

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 10/30/2012
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 145853	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED C 08/14/2012
NAME OF PROVIDER OR SUPPLIER CENTRAL BAPTIST VILLAGE			STREET ADDRESS, CITY, STATE, ZIP CODE 4747 NORTH CANFIELD AVENUE NORRIDGE, IL 60656		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETION DATE	
F 323	Continued From page 3 Interview with E9 (Certified Nurse Assistant) on 8-10-12 at 8:40 AM states E6 asked me to pull R4's pants down while E6 and E8 stood R4 up by the arms. E9 states R4 was almost falling down but that she put the shower chair under her. E9 states R4 was not completely sitting in the shower chair. E9 states that E6 and E8 were on the sides of R4 and they grabbed her legs and arms and scooted her back into shower chair.	F 323			
F9999	FINAL OBSERVATIONS LICENSURE VIOLATION: 300.610a) 300.1210b) 300.1210d)6) 300.3240a) Section 300.610 Resident Care Policies a) The facility shall have written policies and procedures, governing all services provided by the facility which shall be formulated by a Resident Care Policy Committee consisting of at least the administrator, the advisory physician or the medical advisory committee and representatives of nursing and other services in the facility. These policies shall be in compliance with the Act and all rules promulgated thereunder. These written policies shall be followed in operating the facility and shall be reviewed at least annually by this committee, as evidenced by written, signed and dated minutes of such a meeting. Section 300.1210 General Requirements for Nursing and Personal Care	F9999			

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F9999	Continued From page 4 b) The facility shall provide the necessary care and services to attain or maintain the highest practicable physical, mental, and psychological well-being of the resident, in accordance with each resident's comprehensive resident care plan. Adequate and properly supervised nursing care and personal care shall be provided to each resident to meet the total nursing and personal care needs of the resident. d) Pursuant to subsection (a), general nursing care shall include, at a minimum, the following and shall be practiced on a 24-hour, seven-day-a-week basis: 6) All necessary precautions shall be taken to assure that the residents' environment remains as free of accident hazards as possible. All nursing personnel shall evaluate residents to see that each resident receives adequate supervision and assistance to prevent accidents. Section 300.3240 Abuse and Neglect a) An owner, licensee, administrator, employee or agent of a facility shall not abuse or neglect a resident. These regulations ae not met as evidenced by the following: Based on record review and interview the facility improperly transferred one resident (R4) from a sample of four residents assessed for falls/fractures. This failure resulted in R4 sustaining a fracture of the distal femur.	F9999			

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F9999	<p>Continued From page 5</p> <p>Findings Include:</p> <p>Review of R4's incident report dated 8-8-12 denotes it is conceivable that her (R4) leg twisted during transfer or repositioning, and this, combined with her history, caused the bone to fracture.</p> <p>Review of R4's care plan dated 7-3-12 denotes resident (R4) is noted to require more assistance with activities of daily living and mobility. She is noted to be totally dependent to staff with activities of daily living and mobility and is observed with less energy. Interventions: Assist resident (R4) with all activities of daily living. Two person extensive assist with total mechanical lift transfer.</p> <p>Interview with E6 (Certified Nurse Assistant) on 8-9-12 at 3:45 PM states she and another CNA lifted R4 from the wheel chair to the shower chair. E6 states she did not use the total mechanical lift because she did not want to get the total mechanical lift pad wet. E6 states she washed R4 then she and another CNA (E8) lifted up R4 from the shower chair and put her back in the wheel chair. E6 states she rolled R4 in her wheelchair to her room and then used the total mechanical lift to put R4 in the bed for the night on 8-6-12.</p> <p>R4 nurses notes dated 8-7-12 at 9:00 AM denotes R4 was calling out the whole night complaining of pain when repositioned, noted swelling left hip. Doctor notified and X-ray ordered of left hip, thigh and knee. R4 nurse notes dated 8-7-12 at 6:00 PM denotes X-ray results to left leg with femur fracture with order for ortho referral, keep leg immobilized.</p> <p>Facilities policy for resident handling/limited lift denotes resident handling can result in injury to</p>	F9999			

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F9999	<p>Continued From page 6</p> <p>staff or residents. In order to provide safe resident handling/transfers with limited lifting, facility has provided sit to stand and total/mechanical lifts. Resident transfers status will be reviewed during care planning. Resident transfer status will be communicated by indicating the method on the " Resident Care Guide" for the CNA's. A transfer that could harm the resident or staff member should not be attempted.</p> <p>Interview with E1 (Restorative Registered Nurse) on 8-9-12 at 9:20 AM states she assessed R4 to need the total mechanical lift and put it on the care plan and on the resident care guide that is kept in R4's room for the CNA to see. E1 states staff are expected to use the total mechanical lift every time R4 needs to be transferred.</p> <p>Review of R4's care guide denotes Transfers: total mechanical lift. Interview with E5 (Director of Nursing) on 8-9-12 at 4:00 PM states R4 was assessed to need the total mechanical lift and should have been used every time R4 needed transferring.</p> <p>Interview with E7 (Assistant Administrator) on 8-9-12 at 3:30 PM states E5 informed her that E6 was suspended because E6 did not follow the policy and did not use the total mechanical lift. E7 states E6 transferred R4 manually.</p> <p>Review of E6 (Certified Nurse Assistant) employee file denotes disciplinary warning and notice, date of violation 8-6-12. Observed performing an improper lifting technique, resident (R4) designated as total mechanical lift in care plan and clearly stated in the CNA care guide, E6 did not follow designated technique.</p>	F9999			

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F9999	Continued From page 7 Interview with Z2 (Medical Doctor) on 8-10-12 at 10:30 AM states R4's fracture is a break in bone upper thigh (femur). Z2 states something caused the fracture, it did not happen on it's own. Z2 states does not know how R4 sustained the fracture because no one told her what happened. Interview with E8 (Certified Nurse Assistant) on 8-10-12 at 8:30 AM states she was in the shower room when E6 asked her to help lift up R4. E8 states me and E6 lifted R4 up by her arms from the wheelchair to stand her up. E6 states another CNA (E9) slid the shower chair behind R4 and then we let her sit down on the shower chair. Interview with E9 (Certified Nurse Assistant) on 8-10-12 at 8:40 AM states E6 asked me to pull R4's pants down while E6 and E8 stood R4 up by the arms. E9 states R4 was almost falling down but that she put the shower chair under her. E9 states R4 was not completely sitting in the shower chair. E9 states that E6 and E8 were on the sides of R4 and they grabbed her legs and arms and scooted her back into shower chair. B	F9999			