STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	14G356	A. BUILDING _____ B. WING _____	C 01/03/2013

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
SHADY OAKS WEST	16220 PARKER ROAD LOCKPORT, IL 60441

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W 149	Continued From page 6 > On 12/4/12 , all facility staff are being trained to exercise caution when working with clients, in order to avoid injury. The training addresses a number of care situations, including transfers, repositioning, passing through doorways, maneuvering wheelchairs in close proximity to others, placing residents into bed, dressing, changing, etc. > Staff have been directed to refer to the range of motion materials already in place in each client's program for appropriate ways to relax muscles. This material, which has always been available to staff, clearly indicates not to use forceful movements and to keep movements slow. > Training is scheduled for 12/17/12, during which an Occupational Therapist will provide instruction and demonstration of safe ADL (activities of daily living) care provision. > The existing abuse/ neglect policy will be reviewed with all staff at this training session as well. While the Immediate Jeopardy was removed on 12/6/12, the facility remains out of compliance as the facility has not had the opportunity to fully implement and evaluate the effectiveness of their plan.	W 149		
W9999	FINAL OBSERVATIONS Licensure Violations 350.620a) 350.1210 350.1230d)1)2) 350.3240a) Section 350.620 Resident Care Policies	W9999		

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W9999	Continued From page 7 a) The facility shall have written policies and procedures governing all services provided by the facility which shall be formulated with the involvement of the administrator. The policies shall be available to the staff, residents and the public. These written policies shall be followed in operating the facility and shall be reviewed at least annually. Section 350.1210 Health Services The facility shall provide all services necessary to maintain each resident in good physical health. Section 350.1230 Nursing Services d) Direct care personnel shall be trained in, but are not limited to, the following: 1) Detecting signs of illness, dysfunction or maladaptive behavior that warrant medical, nursing or psychosocial intervention. 2) Basic skills required to meet the health needs and problems of the residents. Section 350.3240 Abuse and Neglect a) An owner, licensee, administrator, employee or agent of a facility shall not abuse or neglect a resident.	W9999		

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W9999	Continued From page 8 These Regulations were not met as evidenced by: Based on record review and interview, the facility failed to prevent neglect when they neglected to: 1) Ensure that staff implemented the appropriate maneuvering of R1 and R2's extremities when dressing for 2 of 2 clients reviewed (R1 and R2). R1 sustained a right distal fibular fracture on 8/18/12, diagnosed on 8/29/12. R2 sustained a right comminuted proximal femoral shaft fracture on 11/23/12; 2) Ensure that staff were re-trained on the appropriate way of dressing the clients after the incident of 8/18/12 and immediately after the incident of 11/23/12, potentially affecting all 14 clients (R1, R3 through R15) residing in the facility who needs staff assistance when extremities are maneuvered when being dressed. Findings include: - R1 was diagnosed with a right distal fibular fracture after being dressed by E3, Direct Support Personnel (DSP). On 11/23/12, E3 was dressing R2, while trying to put R2's pant leg on, R2 sustained a right comminuted proximal femoral shaft fracture. - the facility failed to ensure that re-training of staff on appropriate dressing techniques was	W9999		

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W9999	Continued From page 9	W9999		

completed after these incidents.

1) R1, per his Physician's Orders Sheet dated 12/1/12 through 12/31/12, has a diagnosis of Profound Mental Retardation.

R1's Individual Program Plan dated 5/24/12 includes under functional skills, "..."R1 is unable to remove any articles of clothing and relies on staff for all of his dressing and undressing needs..."

An Incident Report dated 8/18/12 includes under Injury Description: At 6:15am on 8/18/12, R1 was assisted with shower by E3. While dressing R1 on shower bed and putting his right foot into his sweat pants, E3 heard R1's right ankle "clicked". Approximately 5-10 minutes later, E3 noticed that R1's right ankle had 5 cm (centimeter) red area to it." R1 was sent to the hospital and was diagnosed with Right Ankle Sprain.

A progress note completed by E1, Administrator, dated 9/1/12 was reviewed. It includes, "R1 was sent to the ER on 8/18/12 following a known, documented, reported and investigated injury. At that time he was x rayed, no evidence of fracture was found and he was discharged back to the facility with a diagnosis of "sprain"....On 8/29, hospital staff told R1's mother that the orthopedic doctor was "not satisfied" with the X-ray completed on 8/18/12 in the ER and another X-ray was done, which showed a fracture, for which he was casted on 8/30."

A Consulting Physician Appointment form dated 9/21/12 was reviewed. Under findings it includes,

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W9999	Continued From page 10	W9999		

"right distal fibular fracture."

Further review of the facility trainings showed that the facility did not retrain any of their staff in appropriate techniques in dressing the individuals after R1's diagnosis of fracture.

2) R2, per his Physician's Orders Sheet, dated 12/1/12 through 12/31/12, has a diagnosis of Profound Mental Retardation.

R2's Individual Program Plan dated 10/9/12 includes under functional skills, "...R2 is unable to remove any articles of clothing and relied on staff for his dressing and undressing needs..."

An investigation of an injury dated 12/27/12 was reviewed. It includes, "On the morning of 11/23/12, R2 a resident sustained a fracture to his right femur, requiring surgical repair. The staff person that had been working with R2 at the time of the injury, E3 (DSP), was removed from the workplace pending investigation. There was not evidence of abuse or neglect, however, due to the severity of the injury, suspension and subsequent investigation are warranted . E3 stated that at 7am, while dressing R2, he heard a "pop" while putting R2's pants on and immediately got the nurse..." It further includes; "...However, due to the severity of the injury, in order to ensure client safety, E3's employment has been terminated and he will not return to the workplace..."

E3's personnel file was reviewed. Under evaluations it includes, "11/27/12 Termination - client safety: On 2 separate occasions, clients you were providing care to sustained broken

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W9999	Continued From page 11 bones." R2's Operative Report dated 11/23/12 was reviewed. Under preoperative diagnosis it includes, "right comminuted proximal femoral shaft." Under anesthesia, it includes, "...He does have a three part fracture of the proximal femoral shaft with a large butterfly fragment..." Z1, manager at orthopedic surgeon's clinic, was interviewed via phone, while she was speaking with the orthopedic surgeon, on 12/6/12 at 11:08am. Z1 verified that R2's bones are not osteoporotic, which could cause the bones to break easily. E1, Administrator, was interviewed on 11/29/12 at 12:00nn. E1 verified that the facility did not re-train staff on the appropriate dressing techniques after the 8/18/12 nor after the 11/23/12 incidents. E1 however informed surveyor that she had made contact with the therapy company to have the occupational therapist come to the facility to do re-training on activities of daily living. E2, Qualified Mental Retardation Professional was interviewed on 12/6/12 at 9:45am. E2 verified that all the clients residing in the home needs staff help in dressing and undressing them. (B)	W9999		