

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

PRINTED: 07/09/2013
FORM APPROVED
OMB NO. 0938-0391

| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 145868 | (X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____ | | (X3) DATE SURVEY COMPLETED C 03/28/2013 |
|---|---|---|---|----------------------|---|
| NAME OF PROVIDER OR SUPPLIER ARLINGTON REHAB & LIVING CTR | | | STREET ADDRESS, CITY, STATE, ZIP CODE 1666 CHECKER ROAD LONG GROVE, IL 60047 | | |
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| F 323 | Continued From page 10 to get a CNA from the facility to help." On 3/26/13 at 11:45 AM, E7 (CNA) stated, "You have to have 2 people for the (mechanical lift) transfer. You should never do it alone. So you have a witness in case something happens and also for the safety of the resident." The undated facility policy entitled Mechanical Lifts states, "During the actual lifting and moving of the resident, two staff persons are to be available to assist. Both persons will transfer the resident in accordance with the manufacturer's operating instructions." | F 323 | | | |
| F9999 | IL62232 FINAL OBSERVATIONS Licensure Violations 300.610a) 300.1210h) 300.1210c) 300.1210d)3) 300.3240a) Section 300.610 Resident Care Policies | F9999 | | | |

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| F9999 | <p>Continued From page 11</p> <p>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.</p> <p>Section 300.1010 Medical Care Policies</p> <p>h) The facility shall notify the resident's physician of any accident, injury, or significant change in a resident's condition that threatens the health, safety or welfare of a resident, including, but not limited to, the presence of incipient or manifest decubitus ulcers or a weight loss or gain of five percent or more within a period of 30 days. The facility shall obtain and record the physician's plan of care for the care or treatment of such accident, injury or change in condition at the time of notification.</p> <p>Section 300.1210 General Requirements for Nursing and Personal Care</p> | F9999 | | | |

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| F9999 | Continued From page 12 c) Each direct care-giving staff shall review and be knowledgeable about his or her residents' respective resident care plan. 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: 3) Objective observations of changes in a resident's condition, including mental and emotional changes, as a means for analyzing and determining care required and the need for further medical evaluation and treatment shall be made by nursing staff and recorded in the resident's medical record. 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 were not met as evidenced by: | F9999 | | |

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| F9999 | <p>Continued From page 13</p> <p>Based on observation, interview and record review the facility failed to ensure a resident's safety during a transfer. The facility also failed to ensure that 2 staff members are present when transferring a resident with a mechanical lift. This failure resulted in R1 sustaining a fractured left ankle on 3/16/13.</p> <p>This applies to 1 of 3 residents (R1) reviewed for mechanical lift transfers in a sample of 6.</p> <p>The findings include: The Physician's Order Sheet dated 3/2013 shows that R1 has diagnoses including Dementia, Cerebrovascular Accident and Osteoarthritis.</p> <p>R1's care plan dated 3/8/12 states, "Transfers with 2 assist. Extensive assist use (mechanical) lift."</p> <p>The facility Occurrence Report dated 3/16/13 states, Injury/Outcome: "Left ankle, mild swelling and redness to left ankle. Complains of pain. Resident verbalized, "It hurts a lot." and noted with facial grimacing." Actions: " Continue to observe; 3/17/13 7:30 AM noted with increased swelling and redness to left ankle." Description of Occurrence: Assigned CNA approached writer that while he was removing (R1's) pants, (R1) complained of left leg pain. Upon assessment when writer touched (R1's) left thigh, (R1) verbalized pain. Writer asked (R1) where exactly the pain was and (R1) stated, "My whole entire left leg hurts.".... Outcome: Further assessment was done on 3/17/13; noted with increased swelling (severe) to left ankle and redness. "</p> <p>On 3/26/13 at 1:00 PM, E3 (CNA) stated, "I came</p> | F9999 | | | |

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| F9999 | <p>Continued From page 14</p> <p>to work and I asked the nurse for report on my people. The nurse didn't know. I asked another CNA (don't know her name) , and she said (R1) was an extensive assist of 1 for transfers.. When I went to get her up before lunch I transferred her with a gait belt into the wheelchair in her room. It seemed to go okay. (R1) had an old skin tear on her leg and it started bleeding so I went and got the (E4 LPN). E4 came in and treated the skin tear. I told (E4) that (R1's) foot looked strange, it looked twisted. (E4) told me it was fine. Then E4 told me that (R1) is supposed to transfer with a (mechanical lift). (E4) thought that (R1) looked uncomfortable in the wheelchair so (E4) said we would transfer (R1) to the new (reclining) wheelchair that was in her bathroom. You can put a mechanical lift sling under her while she is in the wheelchair but (E4) said we would just transfer (R1) (with a gait belt). I was following the direction of my nurse. (E4) barely assisted with the transfer. I bared most of the weight. We got her into the (reclining) wheelchair and I told (E4) again that her foot looked strange. (E4) said her foot is fine so I believed her. "</p> <p>A written statement by E3 states, "I transferred (R1) from the bed to the wheelchair. I noticed that (R1) had blood dripping from her leg and that her foot appeared to look strange. I asked E4 to come into the room right away. (E3) used some type of treatment to clean up the small little wound. ...(R1)appeared to be uncomfortable in the wheelchair I put her in. (E4) stated that (R1) appeared uncomfortable and (E4) shared with me that (R1) was a (mechanical lift for transfers). (There was no (mechanical lift sling in sight, no mechanical lift sling for (R1). There was no indication to me that (R1) was a (mechanical lift</p> | F9999 | | | |

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| F9999 | <p>Continued From page 15</p> <p>for transfers). (E4) stated that we would transfer (R1) from the wheelchair to the (reclining wheelchair). During the transfer process between me and (E4), I supported most of (R1's) weight. E4 didn't really help me during the transfer. I struggled to keep (R1) from falling and finally I got (R1) in the (reclining wheelchair). I asked E4 if (R1's) foot was okay because it looked appeared strange.(E4) told me there was nothing wrong with (R1's) foot so I took her word because she is the nurse and I'm the CNA without nursing experience as far as LPN or RN.3/17/13 for AM shift. (R1) was sent to the hospital. A few hours later (E5-LPN) asked if I had (R1) yesterday and I told her exactly wheat happened. It was the understanding from E5 that I and E4 had (mechanically lifted) (R1). This is not true at all."</p> <p>The hospital diagnostic X-ray dated 3/17/13 states: "There are fractures seen involving the distal shafts of the tibia and fibula. There is some mild comminution on the fracture fragments and mild impaction without significant displacement or angulation.</p> <p>On 3/26/13 at 9:50 AM, E2 (Director of Nursing) was asked how the CNAs receive information about the residents they are caring for. E2 stated, "Most of the CNAs have a permanent position on a unit. Then we have some float CNAs to cover all units on staff days off. CNAs can get report from the nurse on the unit or from other CNAs on the unit. We have a cardex system but it is not in use right now because it is being revamped. If CNA doesn't know how do care for a resident they should ask another CNA on the unit."</p> | F9999 | | | |

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| F9999 | <p>Continued From page 16</p> <p>On 3/26/13 at 11:30 AM, E6 (CNA) stated, " I replace whoever is off. Sometimes I don't know how to care for a resident so I ask another CNA or the nurse. We just started a new thing that whoever is leaving is responsible for telling whoever is coming in, what is going on. It is not working too well. Sometimes when we come in in the morning the night shift is punching out so we can't get report from them. It depends on the CNA. Some of them don't want to give or get report. "</p> <p>2. The Physician's Order Sheet dated 3/2013 shows that R1 has diagnoses including Dementia, Cerebrovascular Accident and Osteoarthritis.</p> <p>R1's care plan dated 3/8/12 states, "Transfers with 2 assist. Extensive assist use (mechanical lift."</p> <p>On 3/26/13 at 10:50 AM, Z1 (Hospice CNA) transferred R1 with the mechanical lift from the bed to the (reclining wheelchair). No other facility/hospice staff were present during the transfer.</p> <p>Z1 stated, "Sometimes there are two of us. I have to get a CNA from the facility to help."</p> <p>On 3/26/13 at 11:45 AM, E7 (CNA) stated, "You have to have 2 people for the (mechanical lift) transfer. You should never do it alone. So you have a witness in case something happens and also for the safety of the resident."</p> <p>The undated facility policy entitled Mechanical Lifts states, "During the actual lifting and moving</p> | F9999 | | | |

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| F9999 | Continued From page 17 of the resident, two staff persons are to be available to assist. Both persons will transfer the resident in accordance with the manufacturer's operating instructions." <p style="text-align: center;">(B)</p> | F9999 | | | |