

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>145983</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____  B. WING _____		(X3) DATE SURVEY COMPLETED  <b>C</b> <b>06/20/2013</b>
NAME OF PROVIDER OR SUPPLIER  <b>RENAISSANCE AT 87TH STREET,THE</b>			STREET ADDRESS, CITY, STATE, ZIP CODE <b>2940 WEST 87TH STREET</b> <b>CHICAGO, IL 60652</b>		
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F 309	Continued From page 11 Record does not show evidence of an order for a pain assessment every shift. On 6/5/13 at 4:30pm E31 verified there is no order for a pain assessment every shift. E31 stated R24 should have a pain assessment every shift. "There was an order but it was discontinued on 12/2/12 and I don't know why." E31 stated the pain care plan should be updated with new interventions when a resident has new complaints of pain.  Facility policy Management of Pain documents "promptly and accurately assessing pain; aggressively assessing pain in non-verbal and cognitively impaired residents; pain will be assessed and managed in a timely fashion, especially if it is of recent onset; thorough communication with the physician will ensure an appropriate pain management plan. Pain Screening - upon change of condition or when pain is suspected, the pain screening will be filled out. Physical Examination - the nurse will complete a physical evaluation of the resident that includes...objective observation of the painful area."	F 309			
F9999	FINAL OBSERVATIONS  Licensure Violations  300.610a) 300.690a) 300.1210a) 300.1210b) 300.1210c)6) 300.3240a)  Section 300.610 Resident Care Policies  a) The facility shall have written policies and	F9999			

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F9999	<p>Continued From page 12</p> <p>procedures governing all services provided by the facility. The written policies and procedures 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. The policies shall comply with the Act and this Part. The written policies shall be followed in operating the facility and shall be reviewed at least annually by this committee, documented by written, signed and dated minutes of the meeting.</p> <p>Section 300.690 Incidents and Accidents</p> <p>a) The facility shall maintain a file of all written reports of each incident and accident affecting a resident that is not the expected outcome of a resident's condition or disease process. A descriptive summary of each incident or accident affecting a resident shall also be recorded in the progress notes or nurse's notes of that resident.</p> <p>Section 300.1210 General Requirements for Nursing and Personal Care</p> <p>a) Comprehensive Resident Care Plan. A facility, with the participation of the resident and the resident's guardian or representative, as applicable, must develop and implement a comprehensive care plan for each resident that includes measurable objectives and timetables to meet the resident's medical, nursing, and mental and psychosocial needs that are identified in the resident's comprehensive assessment, which allow the resident to attain or maintain the highest practicable level of independent functioning, and provide for discharge planning to the least</p>	F9999			

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F9999	<p>Continued From page 13</p> <p>restrictive setting based on the resident's care needs. The assessment shall be developed with the active participation of the resident and the resident's guardian or representative, as applicable. (Section 3-202.2a of the Act)</p> <p>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.</p> <p>c) Each direct care-giving staff shall review and be knowledgeable about his or her residents' respective resident care plan.</p> <p>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.</p> <p>Section 300.3240 Abuse and Neglect</p> <p>a) An owner, licensee, administrator, employee or agent of a facility shall not abuse or neglect a resident. (A, B) (Section 2-107 of the Act)</p> <p>These requirements are not met as evidenced by:</p> <p>Based on interview and record review the facility</p>	F9999			

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F9999	<p>Continued From page 14</p> <p>failed to follow their pain policy, assess and treat complaints of pain for one of three sampled residents (R24) reviewed for pain in the sample of 28. In addition, the facility failed to implement a policy for identifying resident's personal items, to prevent the misappropriation of property for one supplemental resident (R69).</p> <p>As the result of the facility's failure, R24's investigation to identify the source of the pain was not completed in timely manner. R24's left ankle fracture was not identified until nine days after the first complaint of pain and swelling.</p> <p>Findings include:</p> <p>1.) Facility policy Management of Pain documents "promptly and accurately assessing pain; aggressively assessing pain in non-verbal and cognitively impaired residents; pain will be assessed and managed in a timely fashion, especially if it is of recent onset; thorough communication with the physician will ensure an appropriate pain management plan. Pain Screening - upon change of condition or when pain is suspected, the pain screening will be filled out. Physical Examination - the nurse will complete a physical evaluation of the resident that includes...objective observation of the painful area."</p> <p>Closed record documents R24 was admitted to the facility on 3/19/12 and then admitted to hospice on 1/24/13 with diagnoses of advanced dementia and failure to thrive. R24 was bedbound and dependent on staff for all care.</p> <p>Hospice Communication Log 3/21/13 documents "patient having pain on her left leg, told nurses."</p>	F9999			

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F9999	<p>Continued From page 15</p> <p>Hospice Aide Visit Note 3/21/13 documents "Patient having pain on her left leg." On 6/5/13 at 12:20pm Z12 (Hospice Aide) stated that on 3/21/13 she told the facility nurse aide and the day nurse that R24 complained of pain in her left leg. Facility Investigation Form (undated) documents Z12 informed another aide and nurse that resident was complaining of pain to left leg. On 6/5/13 at 10:55am E52 (Nurse Aide) stated that abnormal findings are reported to her by the hospice aide. "I know to report them right away. I don't remember which nurse I told" about (R24)'s left ankle pain on 3/21/13.</p> <p>On 6/5/13 at 11:45am E15 (Nurse) stated that Z13 (hospice nurse) told her R24 had right leg pain on 3/25/13, not left. "I did not do a pain assessment or compare the right leg to the left leg." E15 stated she did not medicate R24 for pain on 3/21/13, 3/25/13 or 3/26/13. E15 stated that on 3/26/13, Z13 changed her assessment to left leg pain. Hospice Communication Log 3/25/13, Z13 documents "during movement of left (crossed out) right lower extremity, patient displays 5 out of 10 pain." Hospice Communication Note 3/26/13, Z13 documents pain, swelling decreased to left lower extremity." Hospice Note 3/25/13 documents right lower extremity pain and swelling, discussed with (E15)." Hospice Note 3/26/13 documents pain and swelling to left lower extremity, E15 notified and educated on new order, pain management, and comfort care including keep left lower extremity elevated. This note also documents that the pain medicine Oxycodone just arrived to the facility during that visit. Hospice Clinical Chart Addendum 3/26/13 5:10pm documents corrected information to Z13's charting for 3/25/13 and 3/26/13 for R24's left lower extremity, not right</p>	F9999			

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F9999	<p>Continued From page 16</p> <p>lower extremity. Facility Investigation Form 4/2/13 documents "documentation and miscommunication between hospice nurse and facility staff" regarding the care of R24.</p> <p>R24's March 2013 Medication Record documents a current order from 1/25/13 for the pain medicine Morphine 5 milligrams (mg) as needed for pain. R24 did not receive any pain medicine from 3/21/13 through 3/30/13 with any of the complaints of left leg pain.</p> <p>Controlled Substance Administration Log documents Morphine was given to R24 on 4/9/13. On 6/5/13 at 4:30pm E31(Unit manager) stated that there were no narcotic logs in March 2013 for R24. "That means (R24) didn't receive any narcotics in March 2013."</p> <p>Hospice Communication Log 3/25/13 by Z13(Hospice Nurse) documents "during movement of left lower (crossed out), right lower extremity. Patient displays 5 out of 10 pain.</p> <p>Hospice Communication Log 3/26/13 documents "visit to follow up with patient pain and physician orders, 2 out of 10 pain, swelling decreased to left lower extremity." Physician Telephone Orders 3/25/13 documents "elevate right lower extremity" crossed out and "left lower extremity " is written next to it, and there is an order for the pain medicine Oxycodone 5 milligrams(mg) by mouth twice a day. Telephone Order 3/26/13 documents changing the Oxycodone to twice a day as needed for pain. The next telephone order is on 3/30/13 for x-ray of left lower extremity. X-ray report 3/31/13 documents left lateral ankle fracture and R24 was sent to the hospital. An investigation was started on 3/31/13 after the fracture was discovered.</p> <p>Facility Investigation Form 4/1/13 written and signed by Z13 documents the pain R24</p>	F9999			

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F9999	<p>Continued From page 17</p> <p>experienced was in the left lower extremity, not the right. Facility Investigation Form (unsigned and undated) documents "On 3/25/13 hospice nurse (Z13) noted swelling to the left extremity, elevated left leg on a pillow. (R24) was grimacing and guarding left leg." Z13 cannot be interviewed because she is unreachable out of the country.</p> <p>On 6/5/13 at 11:10am Z3 (Hospice Clinical Director) stated that the facility called a meeting with Z12 and Z13 after the fracture was discovered. The meeting was to clarify the discrepancy of right versus left leg of R24. Z3 stated that hospice conducted their own investigation and the facility took statements from Z12 and Z13. Z3 stated "All of (Z12) and (Z13)'s statements are consistent with each other and with their documentation."</p> <p>On 6/4/13 at 3pm E1(Administrator) stated that once R24's ankle fracture was discovered, an investigation was started. A meeting was called with hospice staff that cared for R24 and reported the pain. E1 stated that Z13 changed the charting from right leg to left leg. "It's legal to change your charting."</p> <p>On 6/5/13 at 12pm Z1(Physician) stated that R24 had pain and swelling to the left ankle. Even when a resident is on hospice, pain should be assessed by asking the resident or looking for other signs like guarding the area, moaning, or grimacing. The staff should also compare left to right sides to assess for redness, swelling, deformity, or temperature changes. Z1 stated "(R24)'s painful leg should have been looked at before 3/30/13 when the fracture was discovered and compared to the other side. That would have clarified right versus left. Pain should be</p>	F9999			

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F9999	<p>Continued From page 18</p> <p>assessed every shift. (R24) should have been given pain medicine if there was a complaint of pain. The facility has a policy to assess and treat new areas of pain." Z1 stated R24 should not have gone 9 days without a pain assessment or pain medication.</p> <p>Nurse Notes from 3/21/13 through 3/30/13 do not consistently document a pain assessment of R24, in general or specific to the left or right lower extremities.</p> <p>R24's Pain Care Plan was initiated on 1/21/13 and updated on 3/31/13 upon discovery of the left ankle fracture. There are no interventions between 3/21/13 and 3/31/13 for the new complaint of left leg pain. Interventions dated 1/21/13 include monitor, report and record and complaints of pain: location, duration, quantity, quality, alleviating factors, aggravating factors; monitor, report and record any non-verbal signs of pain (crying, guarding, moaning, restlessness, grimacing, diaphoresis, withdrawal).</p> <p>The most recent Pain Assessment was completed on 10/18/12. March 2013 Medication Record does not show evidence of an order for a pain assessment every shift. On 6/5/13 at 4:30pm E31 verified there is no order for a pain assessment every shift. E31 stated R24 should have a pain assessment every shift. "There was an order but it was discontinued on 12/2/12 and I don't know why. "E31 stated the pain care plan should be updated with new interventions when a resident has new complaints of pain.</p> <p>2.) 6/11/2013 at 3pm, the surveyor interviewed Z14 (R69's Daughter) by telephone. Z14 said R69 was admitted to the facility on 4/23/2013 at 3:30pm, she was not present however another</p>	F9999			



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F9999	<p>Continued From page 19</p> <p>relative of R69 was. That relative reported "The facility staff admired how my mother was dressed, especially her leather boots." When R69 was discharged from the facility, she did not have the leather boots.</p> <p>The facility's clothing list policy states: Upon entry into the facility, a clothing list is to be filled out and signed by both staff and resident (or the resident's family). R69's clothing list did not list a pair of leather boots and was not signed by either R69 or a family member.</p> <p>On 6/13/2013, this concern was brought to facility staff in a meeting, E1 (Administrator) stated that R69 and family refused to sign the clothing list, there was no documentation of refusal to sign.</p> <p style="text-align: center;">(B)</p>	F9999			