

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

PRINTED: 12/30/2013  
FORM APPROVED  
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>145469</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____  B. WING _____		(X3) DATE SURVEY COMPLETED  <b>07/26/2013</b>
NAME OF PROVIDER OR SUPPLIER  <b>PARIS HEALTH CARE CENTER</b>			STREET ADDRESS, CITY, STATE, ZIP CODE <b>1011 NORTH MAIN STREET PARIS, IL 61944</b>		
(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 465	Continued From page 11 basement where the water heaters and hot water heating system are located had water all over.  The basement extends the entire length of the building. There were dozens of cloth recliner chairs and other furniture stored in the basement. One of the upholstered recliner chairs was covered in mold. The basement was very poorly lit, making it difficult to assess the condition of the furniture stored there. There were no dehumidifiers in use or other effective measures in place to reduce the moisture in the air. There were a couple of box fans only. There was alot of excess equipment stored in this location.  Administrator E1 stated on 7/24/13 at 5:00 pm that she was aware of the issue with the basement and agreed that the entire basement needed to be cleaned and have the water issues addressed.  According to the Centers for Medicare & Medicaid Services Resident Census and Conditions of Residents form completed on 7-25-13 the facility houses 80 residents.	F 465			
F9999	FINAL OBSERVATIONS  LICENSURE VIOLATIONS:  300.1210b) 300.1210d)2) 300.1210d)4)A) 300.1210d)6) 300.3240a)  Section 300.1210 General Requirements for Nursing and Personal Care b) The facility shall provide the necessary care	F9999			

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F9999	<p>Continued From page 12</p> <p>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>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:</p> <p>2) All treatments and procedures shall be administered as ordered by the physician.</p> <p>4) Personal care shall be provided on a 24-hour, seven-day-a-week basis. This shall include, but not be limited to, the following:</p> <p>A) Each resident shall have proper daily personal attention, including skin, nails, hair, and oral hygiene, in addition to treatment ordered by the physician.</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.</p> <p>These requirements were not met as evidenced by: Based on interview and record review the facility failed to ensure that one of one residents (R27) reviewed for injuries in a sample of 16 was provided with the physician-ordered protective</p>	F9999			

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F9999	<p>Continued From page 13</p> <p>wraps to their lower extremities to protect them from injury during transfers. This resulted in an injury to the posterior lower right leg requiring 7 sutures.</p> <p>Findings include:</p> <p>R27's Incident/Accident Report of 11-14-12 at 1:00pm stated " (Certified Nurses Aides/CNA's) transferring (R27) from (wheelchair) to bed when CNA assisted (R27) (with) undressing noticed blood to posterior (right lower extremity). (R27) received 6 by 6 (centimeter) laceration [deep tissue]."</p> <p>R27's November 2012 Physician Order Sheet (POS) lists diagnoses of Lymphodema, Polyneuropathy, and Peripheral Vascular Disease. An order for "wrap (bilateral lower extremities) with gauze (and) flexible bandage wraps to feet (and ) legs daily."</p> <p>R27's Medication Administration Record indicates the treatment of leg wraps were to be changed daily on the 2 to 10 shift.</p> <p>On 7-26-13 at 11:00am E14, CNA stated that on 11-14-12 just after lunch both she and (E15, CNA) were transferring R27 back into bed from her wheelchair. E14 stated they had removed the foot pedals and the side rail on the bed. E14 stated "it was a perfect transfer, I was on the bottom half. When I took off her pants that's when we saw the blood, she didn't have the (flexible bandage) with the gauze wraps, it was just her pants. I just saw the gash in her leg. Her legs were just full of edema. They are usually wrapped. I don't know why they weren't on. It</p>	F9999			

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F9999	Continued From page 14 looked like she hit the frame of the bed." E14 then pointed to the place where the bed adjusts to raise the head up and stated this was the place where the blood was on the frame.  The Hospital Emergency Room report for R27 on 11-14-12 at 2:02pm states "...an injury, a laceration, 6 cm (centimeters), clean, simple..affect the right of the calf...resulted from a direct blow...Skin closed with 7 3-0 sutures."  (B)	F9999			