

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

PRINTED: 02/19/2015
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 14G365	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED R 01/30/2015
NAME OF PROVIDER OR SUPPLIER ALDEN VILLAGE NORTH			STREET ADDRESS, CITY, STATE, ZIP CODE 7464 NORTH SHERIDAN ROAD CHICAGO, IL 60626		
(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	
{W 000}	INITIAL COMMENTS	{W 000}			
{W 194}	<p>FOLLOW UP TO ANNUAL CERTIFICATION SURVEY OF 11/3/14</p> <p>483.430(e)(4) STAFF TRAINING PROGRAM</p> <p>Staff must be able to demonstrate the skills and techniques necessary to implement the individual program plans for each client for whom they are responsible.</p> <p>This STANDARD is not met as evidenced by: REPEAT</p> <p>Based on interview and record review, the facility failed to demonstrate the skills and techniques necessary to implement the program plans for 2 of 10 clients in the sample (R1 and R3) with a history of altered skin integrity / pressure sores.</p> <p>Findings include:</p> <p>1) Review of the facility's Incident Reports identified that on 1/1/15 R1 was noted to have a skin tear / fissure to the gluteal cleft. The skin tear measured 2 X .5 cm (centimeter). E1 (Administrator) interviewed E6 (nurse) on 1/2/15 and documented the following: E1 stated that the aide (E5 - CNA / Certified Nurses Assistant) told him that she was cleaning R1 and R1 sustained a skin tear / fissure to the gluteal cleft area. E6 stated that area (gluteal cleft) is very sensitive because R1 has old scar tissue there which is prone to injure easily. E1 also interviewed E5 on 1/2/15. E5 stated that she was cleaning R1's behind (buttock) when the skin split on her coccyx. E5 stated, "I pulled her buttocks apart to clean in there and must have</p>	{W 194}			

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

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{W 194}	<p>Continued From page 1 pulled it too much."</p> <p>R1's 4/30/14 IPP (Individual Program Plan) was reviewed. R1's IPP identifies that R1 is prone to the development of pressure sores to the back of her head and coccyx.</p> <p>On 1/29/15 at 11:45am E1 provided a "Resident Service Objectives and Plan of Care" document. E1 stated this document is developed based on R1's 4/30/14 IPP.</p> <p>The document includes the following: "Skin Care: ... Skin around buttock area is sensitive use gentle care when wiping, changing to prevent tears. Do not spread buttocks apart."</p> <p>R1's medical record was reviewed. There is a physician's order, dated 1/1/15, in response to the skin tear that R1 sustained on 1/1/15. The physician's order is for Exuderm odorshield 4 X 4 to be applied every 3 days until healed. R1 previously had the same order that was discontinued on 12/17/14.</p> <p>E1 was interviewed on 1/29/15 at 12:10pm. E1 stated that R1 had previously sustained a skin tear to the coccyx on 6/10/14. E1 provided an Incident Report dated 6/10/14. E1 documented that on 6/10/14 E7 (CNA) was giving R1 a shower and cleaning the coccyx area and the skin split. E1 documented that staff will be in-serviced to be more careful when cleaning residents and not to pull the buttocks apart when cleaning residents so that fissures do not occur.</p> <p>E2 (DON - Director of Nursing) was interviewed on 1/29/15 at 10:45am. E2 verified that E5 (CNA) pulled R1's buttocks apart and that is why R1</p>	{W 194}			

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{W 194}	<p>Continued From page 2</p> <p>sustained a skin tear to the gluteal cleft on 1/1/15. E2 stated the CNA's are to implement the Resident Service Objectives and Plan of Care sheet, per the IPP, for R1 to prevent skin tears. E2 verified E5 did not implement R1's skin care plan of care on 1/1/15.</p> <p>2) Review of the facility's Incident Reports noted that on 1/22/15 R3 was noted to have to be bleeding from the gluteal cleft with a skin tear / fissure measuring 4.5 X 0.2 X 0.1 cm. E1 documented an interview of E8 (CNA) that notes the following: "I was cleaning (R3) because he had a BM (bowel movement) and tried to make sure his behind was cleaned good. I think I spread his behind too much when trying to clean him because he started bleeding, I told the nurse."</p> <p>E1 also documented an interview of E9 (nurse) that notes the following: "The aid called me to (R3's) room because he (R3) was bleeding. I assessed R3 and noted that he had a gluteal fissure from the aid spreading his buttocks too much. ..."</p> <p>R3's 2/26/14 IPP was reviewed. R3's IPP notes, "... When providing me with personal care (wiping or changing) please be aware that my inter-gluteal cleft /buttocks area is sensitive and may tear easily. ..."</p> <p>On 1/29/15 at 11:45am E1 provided a "Resident Service Objectives and Plan of Care" document. E1 stated this document is developed based on R3's 2/26/14 IPP.</p> <p>The document includes the following: "Skin Care: ... Skin around buttock area is sensitive staff are to utilize gentle care when wiping and changing."</p>	{W 194}			

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{W 194}	Continued From page 3 E1 (Administrator) was interviewed on 1/29/15 at 11:15am. E1 stated that the above noted Resident Service Objective is available for all staff to implement. E1 verified that E8 did not implement the IPP when providing personal care to R3 on 1/22/15.	{W 194}			