STATE OF ILLINOIS
DEPARTMENT OF PUBLIC HEALTH
STATEMENT OF VIOLATIONS AND PLAN OF CORRECTION

GOOD SAMARITAN NURSING HOME - KNOXVILLE
Facility Name

0001107
I.D. Number

407 HEBARD STREET, KNOXVILLE, ILLINOIS 61448
Address

FEBRUARY 3, 2005
Date of Survey

INCIDENT INVESTIGATION OF
JANUARY 17, 2005
Type of Survey

As a result of a survey conducted by representative(s) of the department, it has been determined the following violations occurred. Please respond to each violation. The response must include specific actions which have been or will be taken to correct each violation. The date of which each violation will be corrected must also be provided. Forms are to be submitted with the original signature.

IMPORTANT NOTICE: THE STATE AGENCY IS REQUESTING DISCLOSURE OF INFORMATION THAT IS NECESSARY TO ACCOMPLISH THE STATUTORY PURPOSE AS OUTLINED UNDER PUBLIC ACT 83-1530. DISCLOSURE OF THIS INFORMATION IS MANDATORY. THE FORM HAS BEEN APPROVED BY THE FORMS MANAGEMENT CENTER.

"A" VIOLATION(S):

300.1210(a)
300.1210(b)(6)

a) The facility must 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 assessment and plan of care. 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.

b) General nursing care shall include at a minimum the following and shall be practiced on a 24-hour, 7-day-a-week basis:

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.

Based on record review, interviews and observations, the facility failed to have a system in place to monitor and supervise who enters and exits the facility through outside doors. The facility failed to have a system in place to monitor and supervise residents at risk of elopement. R1 is one of eleven residents identified by the facility as an elopement risk.

These failures resulted in R1 leaving the facility unnoticed and unsupervised by staff. R1 walked approximately 0.5 miles from the facility.

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Findings include:

The facility face sheet shows R1 is an 87-year-old resident of the facility who was readmitted on July 3, 1999. The physicians order sheet dated January 1, 2005 through January 31, 2005 shows diagnoses for R1 as: Paranoid Schizophrenia, Anxiety, Tremors, Impulse Control Disorder, Parkinson and Post Cerebral Vascular Accident (Stroke).

Incident report dated January 17, 2005, at 4:40 p.m. states, "4:10 p.m. - Received phone call (caller unknown) saying a lady with red sweater and walker going past his house - 3 staff members, one in car - two on foot - alerted and went to look. I and (Z1/podiatrist) checked nursing home for missing residents and found (R1) was not in facility. At approximately 4:20 p.m., I received the second phone call (caller unknown) saying it looked like a resident was on Main Street…...4:40 p.m., resident brought back by staff."

A copy of the police report written by Z3 (police officer on duty) was obtained from Z4 (Chief of Police) on January 28, 2005 at 9:45a.m.. This report by Z3 states, "On Monday, January 17, 2005, at 1607 hours (4:07 p.m.) I was advised by City Hall of a female subject at Z5 (local dentist), requesting assistance. While enroute, I was flagged down at the police department by personnel of (Facility) wanting to report a 'walk away' from the home. They were requested to follow me to (Z5's) office. It was there that I met with nurses of (Z5) and (R1). (R1) said that she was going to the bank to pay bills. When asked where she lived, (R1) seemed confused and mumbled something that I could not understand. (E1- Nursing Home Administrator) responded and said (R1's) name. (R1) was taken back to the nursing home where she belonged and put under a 10-minute watch by the nurses.

On January 28, 2005, at 9:30a.m., Z7 (receptionist at local dentist office) was interviewed. Z7 stated, "Around 4:00 p.m., the door opened and (R1) stuck her head in. (R1) asked, 'Is this the bank?' I told her no. She had a walker, no coat and it was very cold. Something didn't look right. She had her walker with a bag in front. I asked her, 'Are you walking?' She pointed in the direction of the nursing homes. I called City Hall. The police officer came and then staff came. She didn't know her name - said she had just gotten married and her husband was in Hawaii. Her first name was on her walker. Her face and ears were red. She started to get antsy so we did what we could to keep her here til someone came for her."

E1 (Administrator) informed surveyor of the route R1 was believed to have walked. This route was observed by this surveyor. In areas the sidewalk is broken and uneven with spots where no sidewalk is visible. R1 crossed two active railroad tracks. She then continued down the road to

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Main Street which is also known as Illinois Route 150. R1 crossed this four-lane highway with a posted speed limit of 30 miles per hour. This distance is approximately 0.5 miles from the facility.

Z6 (Personnel from Midwestern Regional Climate Center) was contacted on January 27, 2005, at 10:30 a.m. for the weather conditions on January 17, 2005 at 4:00 p.m. Z6 stated, "The weather recorded is for Galesburg, At 3:45 p.m. on January 17, 2005, it was 16 degrees Fahrenheit (F).At 4:45 p.m. on January 17, 2005, it was 12 degrees F."

R1 was interviewed on January 26, 2005 at 11:25 a.m. outside her room in the facility. R1 stated her name is "Dxxx" and she is married to a doctor. She stated she lives in that room (pointed to her room). She looked out the window and stated it was spring. She stated her room was in a shelter care home. She was unable to state the name of the facility. At 12:00 p.m., R1 was able to state the name of the facility but was not sure of the city.

On January 26, 2005, R1 was observed at 1:30 p.m. and 2:00 p.m. attempting to leave the facility through the laundry room exit. This door leads to a hallway and exit on the East side of the building. R1 was redirected by staff away from the exit doors. At 2:02 p.m., R1 was again Interviewed. R1 was unable to state what she would do when crossing the street or railroad tracks. R1 asked if this surveyor knew. When asked where she was going now, R1 stated she was "going to her daughter's house to check on her because my daughter is deaf and has had a leg cut off." I asked R1 how she would get there. R1 stated, " I would walk and my chauffeur is going to teach me to drive so I can drive back and forth. " I again asked R1 what she would do before crossing the street or railroad tracks. R1 stated, " I just don't know, do you?"

The facility admission face sheet shows R1 resided in a mental health facility prior to initial admission on July 11, 1997. Guardianship papers dated May 2, 1990 show R1 "not fully capable of managing her person and estate because of Schizophrenia, Paranoid, Chronic" with the "Office of State Guardian" appointed as R1's guardian.

Facility admission papers state R1 was never married and has no children. E1 confirmed admission sheet as fact and accurate on January 26, 2005 at 2:30 p.m. during interview.

The current Minimum Data Set (MDS) dated December 16, 2004, includes the following information. R1 has a legal guardian with moderately impaired cognitive skills (decisions poor, cues/supervision needed). R1 has periods of altered perception or awareness of her surroundings (e.g.: moves lips or talks to someone not present; believes she is somewhere else;

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confuses night and day). R1 experiences the behavioral symptom of wandering (moves with no rational purpose, seemingly oblivious to needs or safety) one to three times in the past seven days and this behavior was difficult to alter. R1 experiences delusions and walks independently with the use of a wheeled walker due to an unsteady gait.

The Resident Assessment Protocols (RAP) dated December 16, 2004 was reviewed. The "Falls RAP" signed by E10 (Director of Nurses/DON) contains a handwritten notation which states "Continues to walk with walker - needs reminders at times to take it with her. Walks too fast frequently. Needs reminders to slow down."

The facility "Medical Social Service Quarterly Note" on September 16, 2004 and December 18, 2004, identify R1 as "Wanders/high risk for elopement" signed by E9 (Social Service Designee). "Accident/Incident Potential Assessment" dated April 1, 2004 identifies R1 as a high risk with potential for accidents.

The Care Plan dated December 16, 2004 was reviewed. Problem #6 states: "Resident has potential to go outside, has attemtped one time in the past thirty days." The short-term goal listed is: "(R1) will have 0 injuries from going outside unescorted by December 31, 2000 (date listed on CarePlan)." Listed approaches include: "1) Gently remind (R1) that she lives here. If she persists, tell her whoever is coming that they will come inside to get her or tell her they called and they are unable to come today. 2) SSD (Social Services Designee) will visit with resident and offer to take her on outings, shopping, van rides, etc. 3) All staff will monitor resident whereabouts when door alarms."

The facility elopement policies were reviewed. E1 stated in interview and confirmed in writing that both policies were instituted in February, 1999 and were in effect at the time of the elopement. The facility policy "Elopement Policy" #4 states: Documentation must be done in the resident chart as to time of incident, what precipitated the incident, whether family visit and just occurred and the approaches used to redirect the resident attention to something else. #9 states: Facility must do a complete review of the security system to be sure in proper working order. All policies and procedures should be evaluated to be sure every aspect has been addressed and that proper approaches and documentation was done.

The facility failed to follow this elopement policy. Nurses notes and nurse behavior tracking sheets dated May 2004 through December 2004 were reviewed. There are 14 incidents of wandering behavior. Nursing notes for May 2004 do not address R1 leaving the facility that month. There are no nursing notes showing how R1 attempted to leave, what redirection was required, nor was R1's careplan updated. CNA behavior sheets document two separate episodes of elopement in May 2004.

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E2 (CAN) was interviewed on January 26, 2005, at 11:05 a.m. E2 stated “(R1) has tried to leave before when I have worked. (R1) leans on the door and it opens after 15 seconds or so, about 6 months or more (R1) did leave and we got her back. Once she was on Jefferson and Depot. The other time she was on Hebard and Depot. She probably can say where she lives but I am not sure if she could find her way back on her own. I brought her back in car.” In May of 2004, notes by E2 state, "5/8/04 - (R1) got out today right before shift change. Second shift CNA brought resident back. (R1) made it to the R.R. (railroad) tracks." A second entry states, "5/9/04 - Resident got out today on second shift. Visitor didn't push red button after leaving so resident got out around 4 p.m. She only got to the corner today. CNA got her to come back in. "On 1/28/05 at 10:05 a.m., E2 was again interviewed regarding these notes. E2 stated, "On 5/8/04, (R1) got to the corner of Hebard and Depot Street. One of the CNAs saw her through the break room window and then I got in my car to get her."

E1 was interviewed regarding this finding at 1:20 p.m. on January 26, 2005. E1 stated these incidents were not reported because "she was still on facility property. The facility owns the house on one of the corners." E1 also stated no investigation was done because of where R1 was located. E1 was questioned regarding R1's ability to find her way back to the facility and stated, "Her mentation fluctuates so it would depend on the time. We have no elopement assessment. I have never heard of anything like that."

The facility is a split-level home. The lower level is the West Wing where residents reside. The West Wing has one exit door leading to the street. A ramp goes up to the mid-level where the Administrator’s office and lobby are located. On the date of R1’s elopement from the facility, the mid-level had an inside door leading to the laundry and a hallway which leads to an exit door on the East (main door). This inside door had no alarm. The ramp continues to the upper level which houses the activity room, dining room, kitchen and some unused resident rooms. The top level has a door leading to another exit on the East side of the building.

On January 26, 2005 at 9:50a.m., E1 toured the facility with surveyor and explained the door alarm system as, "All three exit doors require pushing the code twice before the alarm system will rearm. The exit by my office requires punching the code and pushing a red button outside the door to rearm the system when exiting the facility. If the code is only punched one time on both Jefferson Street exit doors, the alarm system will not rearm and anyone can enter/exit without staff being alerted by an alarm. The door on west wing will continue to alarm until the code is punched a second time.

On January 26, 2005 at 11:45a.m., E3 (facility cook) entered the facility to start her shift. E3 was at the time clock located outside the Administrator's office. E3 stated to E4 (Certified

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Nursing Assistant/CNA) and E5 (Housekeeping), "The door was unlocked again. It doesn't do much good to have a lock if it's not on." E4 replied, "Yeah, it was unlocked earlier today." Surveyor exited the Administrator's office and immediately interviewed E3 and E4 who confirmed the door was unalarmed when they entered the facility. E4 was interviewed again at 12:15p.m. on January 26, 2005. E4 stated, "I didn't come in today until 10:00 a.m. and the door alarm was off."

On January 28, 2005 at 10:20am, surveyor toured the facility with E8 (maintenance man). All exit doors were again checked and an explanation of the door operation was reviewed. The door on the west wing leading to the street was noted to be unarmed (green light on) when approached by E10 and surveyor and no alarm was sounding. E10 confirmed this finding when asked and stated, "When the door is armed, the alarm will sound and the light on the code panel is red. When the door is unarmed, the light is green." E10 stated all three exit doors require the use of the code twice before the system will rearm itself. He confirmed the use of the red button outside the facility on Jefferson Street can be used as the second "code" to rearm the system when exiting. E10 confirmed, "If one of the codes are not utilized, the system does not rearm itself and anyone can then enter/exit the facility without staff being alerted by the alarm." E10 stated, "The door will not rearm itself and will not continue to alarm when the door closes if the code is not punched a second time." This information conflicted with the information received from E1 on January 26, 2005. The door alarms were tested during the tour with E10 and the statements by E10 were confirmed as accurate.

The facility policy "Door Lock System" dated February, 1999 was reviewed. This policy contradicts the findings on tour by stating, "In order to exit the building, a four-digit number code must be entered into the keypad located near the door, the red light will go off and the green light will come on and the door can be opened. The lock is ineffective for 15 seconds after the code has been entered. To enter the door from the outside, a red button must be pushed to release the locking mechanism." This policy conflicts with observation of the alarm system currently in place.

E6 (CNA) was interviewed on January 26, 2005 at 2:22p.m. E6 confirmed she was on duty on January 17, 2005, second shift. E6 stated, "She has not gotten out since I came back in 12/03, not that I know of. We received a call around 3:55 p.m. to 4:00 p.m. (E11/CNA) and I were changing a resident. (E7/Licensed Practical Nurse) came and told us that someone called about a lady walking down the street. We went out and looked for her immediately. I stopped at the police station and then he (Z3/police) helped us look. (Z3) called and found out (R1) was at the dentist office. We found her around 4:30 - 4:40 p.m. She was wearing a red sweater. Her wheeled walker was with her. She had pants, shoes, socks, and a shirt on as well. I didn't hear an alarm. We (E6/E11) were in a room and can't hear it then. I don't know if (R1) would find her way back. I never asked her where she lives. I am not sure about her cognition.

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