STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA	(X2) M	ULTIF	PLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED	
, and the contraction of the con		IDENTIFICATION NOMBER.	A. BUILDING		G	C	
		145647	B. WIN	B. WING		06/08/2006	
	ROVIDER OR SUPPLIER		•		EET ADDRESS, CITY, STATE, ZIP CODE		
ROSEWO	OOD CARE CENTER	OF PEORIA		Ρ	EORIA, IL 61614		
(X4) ID PREFIX TAG	(EACH DEFICIENCY	TEMENT OF DEFICIENCIES MUST BE PRECEEDED BY FULL SC IDENTIFYING INFORMATION)	ID PREFI TAG		PROVIDER'S PLAN OF CORRECT (EACH CORRECTIVE ACTION SHOULD REFERENCED TO THE APPROPRIATE D	BE CROSS-	(X5) COMPLETION DATE
F 314	Continued From pa	ge 10	F3	314			
	completed on 5/25/	706.					
F9999	FINAL OBSERVAT		F99	999			
	300.1210 a) 300.1210 b)3) 300.1210 b)5) 300.3240 a)						
	300.1210 General I Personal Care	Requirements for Nursing and					
	and services to atta practicable physica well-being of the re each resident's con plan of care. Adeq nursing care and pe	provide the necessary care ain or maintain the highest I, mental, and psychosocial sident, in accordance with aprehensive assessment and uate and properly supervised ersonal care shall be provided meet the total nursing and Is of the resident.					
		care shall include at a ring and shall be practiced on ay a week basis:					
	resident's condition emotional changes and determining ca further medical eva	vations of changes in a I, including mental and I, as a means for analyzing Ire required and the need for Iluation and treatment shall be aff and recorded in the record.					
		m to prevent and treat at rashes or other skin					

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F9999	breakdown shall be seven day a week is enters the facility we develop pressure so clinical condition desores were unavoid pressure sores shat services to promote and prevent new processor agent of a facility resident. (Section 2) These requirement: Based on interview facility failed to more residents admitted stage I pressure so R3 was admitted to the death certificate Gangrene of the rig septicemia. Findings include: The admission face admission to the factor rehabilitation aft living independently shows diagnoses in closed reduction), A Congestive heart factor conserved.	e practiced on a 24 hour, pasis so that a resident who ithout pressure sores does not ores unless the individual's emonstrates that the pressure lable. A resident having II receive treatment and e healing, prevent infection, ressure sores from developing. In a neglect ee, administrator, employee of shall not abuse or neglect a 22-107 of the Act) are not met as evidenced by a sare not met as evidenced by a sand record review, the nitor and assess one of three with a pressure sore. The re progressed to a stage IV. In a local hospital and died with the listing cause of death as: with theel, right leg cellulitis and es sheet dated 3/16/06 shows cility on 3/14/2006 at 1:30 pm er sustaining a fracture while of at home. This face sheet including: Fractured ankle (F99	999				

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F9999	(nerve pain). R3 w a long leg cast on to the admission nurs 06 by E4 (Licensed identifies R3 as a 9 weight bearing stated due to a long leg cashows R3 as orient two with transfers a R3 is described on identifies R3 as received for movement. E4 as she is no longer Nursing note by E2 R3's medical recording theel is soft and protectors will be usuassist with transfers stated,"(E4) was not what I expected in a helped (E4) in come Guide' upon admissionable The facility "CNA CE2 at this time. The pressure ulcer previous guidance to CNAs checklist includes to the checked by E2 mattress, heel protections, boot (heep pillows, sleeves, elside rails and pressure stated). The facility "Activities and pressure ulcer protections and pressure ulcer protections, boot (heep pillows, sleeves, elside rails and pressure ulcer protections.	as admitted to the facility with he left leg. sing assessment dated 3/14/ I Practical Nurse/LPN) 5 year old resident on non- us to the left lower extremity ast. This nursing assessment red and requiring assistance of and mobility. The right heel of this form as "soft." E4 also puiring the assistance of two was unavailable for interview employed at the facility. (Director of Nurses/DON) on dated 3/14/06 states, "Her damashy to touch. Heel sed. She is a two person as." E2 on 5/24/06 at 1:50 pm as and I wanted to show her a nursing admission note. I pletion of the 'CNA Care sion." Care Guide" was reviewed with the section titled "Skin care/rention" is a check list for in delivery of care. This he following areas which were or E4: pressure relief sectors, float heels, heel el), trapeze, bed cradle, body libow protectors, legs, padded	F9:	999			

-			(X3) DATE SU COMPLE	ETED			
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F9999	transfers and bed in E3 (Rehab/Restora on 5/25/06 at 10:52 admit. I have to se hours. I initiated th opened on 3/29/06. about 25% of the to surrounding tissue protocols that we fo boot or lifted heel (opior to the heel opit was still red, soft." E3 (RN/Rehab/Restoration on 5/25/06 at 10:52 boots, floating her in relieve pressure to except for the use of the surrounding tissue protocols that we for the heel opit was still red, soft." E3 (RN/Rehab/Restoration on 5/25/06 at 10:52 boots, floating her in relieve pressure to except for the use of the surrounding tissue protocols. The initial facility "V dated 3/29/06 which admission and sign Restorative Nurse). 'Unstageable', with .1 x 4.2 centimeters dark red. Of this er as slough and anot eschar. The wound amount of sero-same	tive Registered Nurse) stated am "I saw the redness on e every new admit within 24 e wound sheet when the heel. The opening was small (stal area documented) and the was dark. We do have wound ollow. Initially there was no on the right heel). The week ening I know I checked it and and mushy but no open areas torative Nurse) stated again am no pressure relieving neels or any other measure to the right heel was used of an air mattress. 706 "It was probably my fault y new (employed since I did not know a physician's to obtain heel protectors." Wound Documentation" form is in is fifteen days after ed by E3 (RN/Rehab/. The wound is described as the entire wound measuring 5 is (cm) with the entire wound intire wound, 25% is described as did was noted to have moderate	F99	999			

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F9999	the facility until 4/3/an order to "culture of drainage, odor a The facility "Daily N dated 3/14/06 throuthe section "Skin C documentation of a the stage I to the hemade of a stage IV covered in this sect of wound), drainage or not the wound w These "Daily Nursin 29/06 through 4/4/0 documentation of the drainage/odor) of the on 5/23/06, 5/24/06 E3 (RN/Rehab/Resexplain why staff didocument changes improvement. The initial pressure 06 by E4 identifies interventions noted states to: turn and /as necessary, utilize monitor areas of profiles interventions /29/06 when the rig IV as stated by E3 at 1:50 pm and 5/26	06 when E6 (LPN) obtained right heel, copious amounts and febrile." Jursing Assessment Tool" ugh 4/4/06 was reviewed. In condition" there is no my pressure areas, including eel. On 3/29/06 a note is heel ulceration. The areastion include: site/description (el/odor (of wound) and whether as observed by the nurse. In a Assessment Tools" from 3/206 do not include any mese aspects (description/ne wound. During interviews and 5/25/06, E2 (DON) and attorative Nurse) were unable to do not utilize this area to deterioration and/or ulcer assessment dated 3/14/R3 at moderate risk. The on the back of this form reposition at frequent intervals are pressure relief devices and essure under splints/braces. In were under splints/braces. In were not implemented until 3 and the progressed to a stage during interviews on 5/23/06	F9'	999			
	Ulcers - Pressure U Prevention Protoco	Ilcer Risk Assessment and Is" state: 3) Document skin nurses notes. 4) Implement					

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F9999	skin integrity based Assessment scores assessment after s document results in The second part of Rehab/Restorative assessment of the document on the P Assessment form. Pressure Ulcer Ris completed by the a guest and review th . 2) Implement apple based on the Asses Ulcer Assessment changes in condition of Daily Living, skin make re-evaluation preventative protocout. These areas carried out until 3/2 separate interviews 25/0 at 10:52 am the pressure reducing the used by E3. The "Rosewood Ca Quick Reference Garea" as a stage I to objectives for this scause." The intervedue to pressure are monitor every shift.	ols to prevent impairment of lon the Pressure Ulcer Risk (s. 5) Perform weekly skin howers or as assigned and in the nurse's notes. this protocol directs the Nurse to: 1) Complete a skin guest on admission and ressure Ulcer Risk If the assessment and k Assessment has been dmitting nurse, assess the ne documentation for accuracy ropriate prevention protocols asment scores. 3) Repeat the quarterly or when significant on (such as decline in Activities and condition, nutritional status) appropriate. 5) Monitor that ols are consistently carried of the protocol were not 9/06 as E3 stated in two as on 5/23/06 at 1:50 pm and 5/10 at no boots, heel lifts or other measures were noted being the Center Clinical Practice uide" identifies a "reddened alceration. Treatment tage are to "protect, remove tentions listed for stage I ulcers the content of the protocol were not stage I ulcers the center Clinical Practice uide" identifies a "reddened alceration. Treatment tage are to "protect, remove tentions listed for stage I ulcers the content of the protocol was needed (prn) and	F99	999			

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F9999	check on it every fe an air mattress. Is stage I and docume boots or a heel lift b. The medication adr/2/06 at 10:15 pm s for "increased temptemperature was loan order was obtain medical director) fo copious amounts or On 4/4/06 R3's temptemperature was loan order was obtain medical director) for copious amounts or On 4/4/06 R3's temptemperature was loan order was obtain medical director) for copious amounts or On 4/4/06 R3's temptemperature was loan order was obtain medical director) for copious amounts or On 4/4/06 R3's temptemperature was loan end of the right buttock as documentation regards the right buttock as documentation regards the luceration. The hospital admiss admitted on 4/4/06 heel, right leg cellul septicemia. Blood hospital on 4/4/06 Resistant Staphyloginitial nursing assess hospital states, "Rigred. Right heel red draining. The opent 4 x 6 centimeters we erythema and cellul foot up to the calf." received by the face	en. It just opened up. I would w days. We did have her on hould have staged it as a ented follow up. There were no being used on the right heel." ministration record (MAR) on 4 hows medication dispensed herature." No recording of this cated. On 4/3/06 at 9:00 am, need from E5 (physician/ r a wound culture due to " f drainage, odor and febrile." perature increased to 104 t (F) as noted on the transfer cal hospital. 20 pm on 4/4/06 by E3 show an additional pressure area on a stage II but there is no arding the condition of the	F99	999				

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F9999	Z2 (hospital physicion of at 3:05 pm. Z2 to the hospital with cellulitis to her right attending when she leg early in March 2 most was what app treatment to the uld she had given perm to see (R3) while at come yet. (R3) hablood). It was most was not open when after the fracture." Z2 further stated, "Ir expect the staff to the cast. In order would have only haleverage. I would et to protect that heeld debrided sooner	an) was interviewed on 5/24/stated, "She (R3) was admitted gangrene and extensive heel/leg. I was her hospital had the fracture of her left 2006. What concerned me eared to have been lack of eration. Her daughter said hission for a wound specialist Rosewood but no one had d MRSA septicemia (in her talkely due to the heel ulcer. It is she left the hospital for rehab a situation like (R3) I would ake aggressive action to her heel; lamb skin boots, (R3) was non-ambulatory due to even move in bed she d her right foot/heel for expect staff to do all they could It should have been much sooner. It was black to was a drastic change from harged (on 3/14/06)." It d consultant) was interviewed on and stated,"I was asked to on her right heel. It was all smelling. The goal for	F99	999			
	use aggressive pre the heel of the othe critical to protect the if they can't walk.	y with one leg in a cast is to ventative measures to protect r foot (R3's right heel). It is e elbows and heels even more ou would need to keep the el. The use of foam boots,					

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F9999	waffle boots and/or to prevent shearing measures. If her hould have should check three times a day who be observing for a law to be observed by the	lifting the leg so the heel is off or friction are some seel was soft and mushy an developing. To prevent it orther, the staff/family if at at the heel twice a day at least, yould be better. They should colister or any color changes. It is signs and even more sees could be taken." Ician/medical director) stated from "I saw her during the day (was not open then so it may evening so the nurses would for call physician for orders. It is when I got back I found out the hospital." The documents cause of death or as a consequence of ure due to or as a	F99	999			