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TATEMEN	ENTERS FOR MEDICARE & MEDICAID SERVICES ATEMENT OF DEFICIENCIES D PLAN OF CORRECTION AME OF PROVIDER OR SUPPLIER LIVES MEMORIAL CHRISTIAN VLG SUMMARY STATEMENT OF DEFICIENCIES TAG (X4) ID SUMMARY STATEMENT OF DEFICIENCIES TAG REGULATORY OR LSC IDENTIFYING INFORMATION) F 520 Continued From page 76 Seidents (R10 and R17). This failure resulted in R10 and R17 untimally medication administered that increased behaviors for which PT was admitted to a local hospital. This failure resulted in expressed resident pain. See F224. F 9999 FINAL OBSERVATIONS 300.1210a) 300.1210b)6) 300.3240a) Section 300.1210 General Requirements for Nursing and Personal 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)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.	(X3) DATE	(X3) DATE SURVEY COMPLETED				
		146026	B. WII	NG		08/	15/2007
NAME OF F	ROVIDER OR SUPPLIER		-	STREET	ADDRESS, CITY, STATE, ZIP CODE	COMPLETED 08/15/2007 P CODE CORRECTION (X5) CTION SHOULD BE COMPLET THE APPROPRIATE DATE	
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ļ	residents (R10 and R1 untimely medical increased behaviors a local hospital. The and R17 untimely a monitor and assess	R17). This failure resulted in tion administered that for which R1 was admitted to stailure also resulted in R10 dministered medications, ment which resulted in	, ,				
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	300.1210b)6)						
	Nursing and Persona) The facility must pand services to attain practicable physical, well-being of the reseach resident's complan of care. Adequation of care and personal care needs b)6) All necessary prassure that the resident to nursing personnel stream assistance to present assistance to present and assistance to present and assistance to present and assistance to present and services to attain a servi	al Care provide the necessary care in or maintain the highest mental, and psychological ident, in accordance with prehensive assessment and ate and properly supervised resonal care shall be provided neet the total nursing and of the resident. recautions shall be taken to rents' environment remains azards as possible. All rall evaluate residents to see ceives adequate supervision revent accidents.					
:	a) An owner, license						

These regulations are not met, as evidenced by

resident.

PRINTED: 09/12/2007 DEPARTMENT OF HEALTH AND HUMAN SERVICES FORM APPROVED CENTERS FOR MEDICARE & MEDICAID SERVICES OMB_NO. 0938-0391 STATEMENT OF DEFICIENCIES (X1) PROVIDER/SUPPLIER/CLIA (X2) MULTIPLE CONSTRUCTION (X3) DATE SURVEY AND PLAN OF CORRECTION **IDENTIFICATION NUMBER:** COMPLETED A. BUILDING B. WING 146026 08/15/2007 NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE 3400 WEST WASHINGTON LEWIS MEMORIAL CHRISTIAN VLG SPRINGFIELD, IL 62702 (X4) ID SUMMARY STATEMENT OF DEFICIENCIES PROVIDER'S PLAN OF CORRECTION ID (X5)(EACH DEFICIENCY MUST BE PRECEDED BY FULL PRÉFIX **PREFIX** (EACH CORRECTIVE ACTION SHOULD BE COMPLETION REGULATORY OR LSC IDENTIFYING INFORMATION) CROSS-REFERENCED TO THE APPROPRIATE TAG TAG DATE DEFICIENCY) F9999 Continued From page 77 F9999 the following: Based on observation, interview and record review, the facility failed to ensure one resident. R2, of 24 sampled residents, received adequate supervision and assistive devices to prevent accidents. This failure resulted in harm to R2 who was admitted to the facility for rehabilitation after left femoral neck open reduction internal fixation surgery. R2 had multiple falls after admission to the facility with injury of 2 cm hematoma to left eye brow on 5-19-07, and was admitted to the hospital on 6-26-07 with refracture to the left hip that was not repaired due to R2's age and mental status. Findings include: 1. During tour of the facility on 8-6-07 at 9:30AM with E11, Licensed Practical Nurse (LPN), E11 stated that R2 came into the facility for rehab after fall at home resulting in a fracture and surgery. E11 stated R2 fell at the facility and refractured his hip and was unable to have surgery. Record review of R2's Physician Order Sheet (POS) of August 2007, shows R2 was admitted to the facility on 5-14-07 with a diagnosis, in part, of Orthopedic Aftercare for healing of fractured hip and Alzheimer's. R2's assessment, of 6-9-07 identifies R2 as

without physical assistance.

having mild cognitive impairment with difficulty in new situations only. The assessment shows no behaviors; R2 requires extensive assistance of two for bed mobility, transfer, dressing, bathing and toilet use; and R2 is unable to sit or stand

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AND PLAN OF CORRECTION IDENTIFICATION NUMBER:		A. BUILD	TIPLE CONSTRUCTION ING	(X3) DATE SURVEY COMPLETED		
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F9999	R2's Care Plan of 6 risk for falls r/t (relation falls with fall resulting Currently TTWB (to leg. R2 is alert and confused at times. dx (diagnosis) of de chair alarm applied tracking to check for placed on bed." Cain part, bed and chailight within reach at reminders not to an assistance. Record review of R R2 had multiple fall bed without assistance. Record review of R R2 had multiple fall bed without assistance. Record review of R R2 had multiple fall bed without assistance. Record review of R R2 had multiple fall bed without assistance. Record review of R R2 had multiple fall bed without assistance. Record review of R R2 had multiple fall bed without assistance. Record review of R R2 had multiple fall bed without assistance. Record review of R R2 had multiple fall bed without assistance. Record review of R R2 had multiple fall bed without assistance. Record review of R R2 had multiple fall bed without assistance. Record review of R R2 had multiple fall bed without assistance. Record review of R R2 had multiple fall bed without assistance. Record review of R R2 had multiple fall bed without assistance. Record review of R R2 had multiple fall bed without assistance. Record review of R R2 had multiple fall bed without assistance. Record review of R R2 had multiple fall bed without assistance. Record review of R R2 had multiple fall bed without assistance. Record review of R R2 had multiple fall bed without assistance. Record review of R R2 had multiple fall bed without assistance.	S-2-07 states, "Impaired safety sted to): Hx (history) of multiple ing in hip Fx. (fracture). The touch weight bearing) on left oriented, but can become the can be aggressive. Has expression and anxiety6/2 bed and B&B (bowel and bladder) for pattern. 6/4 roll guards are Plan approaches, include air alarms and roll guards, call all times when in room, verbal inbulate/transfer without. 2's Nurses Notes shows that is and attempts to get out of ince, was confused, and facility dimplement a plan to prevent injuring self other than an resulted in R2 having injury including reinjury to left otes show that R2 fell and/or to fobed on the following dates if to the facility on 5-14-07: Its found on the floor with no mal alarm on. Is legs over the side of the is observed attempting to ently. Fell forward to floor and head. Assisted up with 2, oted a 2cm hematoma to left.	F999	9		

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STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	' '	IULTIPL ILDING	E CONSTRUCTION	(X3) DATE SURVEY COMPLETED	
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	alarmR2 found or Aide, alarm in pla 6-4-07 - R2 yellicompletely out of be breath. Has O2 off onmat remains or 6-5-07 - Discus Interdisciplinary Tearview and updated at times. (Record reshows roll guards or on 6-4-07. Care Pla documentation on the when R2 fell and wa 6-22-07 - up in valarm. 6-26-07 - Found assisted back to recomplate the fracture. 6-27-07 - Admit to 6-27-07 - Admit to 6-27-07 - Readmonhollers out at time 6-30-07 - Alert with yelling out at staff and other residents. 7-1-07 - Alert with yelling out at staff and continues to attempt in wheel chair. 7-6-07 - Calls out and urinal. Incontine call light. He scream in reachfamily gave seroquel. 7-14-07 - Found coded as on wheel chair 7-15-07 - Elbow is 15-07 - Elbo	in floor by CNA, Certified Nurse ace. ing for help. Has legs ed. Noted increased short of Pulse Ox 86%alarm in the floor. issed recent incident in IDT, am, meeting. Care Planalarms in placeincontinent eview of R2's Care Plan in the bed was implemented an shows the next the Care Plan was 6-26-07 as sent to the hospital.) wheel chair with personal/chair on floor, slid out of recliner, liner by 2ROM, Range Of int of hip painsent to on. to hospital with diagnosis of	F99	999			

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

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F9999	Continued From pa	age 80	F9	999			
	floor1/2 cm skin to 7-29-07 - Noted thought were pants 8-3-07 - CNA he noted R2 lying on fle extremities within no area complained of body in placePhys protectors and asse Physical Therapy Pr R2 is showing some safety and increased and function to allow of 6-25-07 states R2 mobilitysafety deci impulsivefatigue of safetyDischarge p wife.	tear on left forearm. d to be reaching for what he is and fell to the floor leard personal body alarm, floor. Range of Motion to all hormal limits except left hip if discomfort. Roll guards and isical Therapy will order hip less for low bed. Progress Note of 6-19-07 states to progressrequiring cues for led assistto improve safety we return home per goal. Note 12 has improved creases and he becomes causes decreased planning to go home with his		BEEF			
	hip fracture with no rabductor in wheel che Physical Therapy Property R2 fell out of his when pink, swollen, warm has been limited second by the progress. Note of 8-to wait for help to inchas bilateral hip protection and a blue matching was implement with injury including matching results.	rogress Note of 7-16-07 states reel chair. Right elbow is hot and painfulR2's progress condary to pain with Right Leg length difference limiting 6-6-07 states R2 was educated crease his safety. R2 now tectors and a bed in low mat to increase his safety.					

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F9999 Co E) Oi his lea re: alr tra E2 an wa his ha R2 ala im an	Continued From pa	age 81	F9	999			
	EXCUSES"	9 -					
	. On 8₌7₌07 at 4:10P	M R2 was observed to be in					
NAME OF PROVIDER OR SUPPLIER LEWIS MEMORIAL CHRISTIAN VLG (X4) ID PREFIX TAG (EACH DEFICIENCY MUST BE PRECEDED REGULATORY OR LSC IDENTIFYING INFORM F9999 Continued From page 81 EXCUSES" On 8-7-07 at 4:10PM, R2 was observed his room in a recliner. R2 was observed his room in a recliner. R2 was observed leaning over to the right of the chair as reaching for something and his right halmost touching the floor. At 4:20PM, transferred from his recliner to his wheeled and did not bear weight during the transwas then transferred to bed. R2 had on his recliner but not on his wheel chair. Have on hip protectors. R2's Care Plan of 6-2-07 shows bed and alarm and on 6-4-07 roll guards were implemented. On 7-31-07 dicem to whand recliner was added. Knee separal wedge cushion. Care Plan note of 8-3 will order hip protectors secondary to his risk. During meeting with the facility on 8-9-9:45AM, E2, Director of Nursing, stated Physical and Occupational Therapy has working with R2. Alarm was being use guards were put into place on 6-4-07. The and pre restraining assessment was sess for low bed. The alarm should effective because R2 is alert and orien was informed that R2's POS shows a calcheimers and nurses notes identify calcheimers and nurses notes identify calcheimers and recliner and a knee customer and a k				•			
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	and did not bear we	eight during the transfer. R2		:			
	was then transferre	ed to bed. R2 had dicem on					
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	have on hip protected	ors.					I
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DEPARTMENT OF HEALTH AND HUMAN SERVICES CENTERS FOR MEDICARE & MEDICAID SERVICES

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and Hos "Th(f was sus sur lt wa repa it wa age Diag	spital Discharge e patient is an el facility) and had it s brought to the E pected fracture v gical site. He wa as a very difficult air this or to treat as felt best to tre , and his mental gnoses: Recurre ertension, B12 d	ge 82 ble to make decisions. Summary of 6-29-07 states, lderly male who is in rehab at increased pain in the hip. He Emergency Room where a was done at the previous as evaluated by orthopedics. It decision deciding whether to the tit conservatively. In the enduatit conservatively given his statusDischarge ent hip fracture, dementia, eficiency, urinary cossible depression." (A)	F9	999		