

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6016497	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 08/12/2014
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NAME OF PROVIDER OR SUPPLIER SOUTH SUBURBAN REHAB CENTER	STREET ADDRESS, CITY, STATE, ZIP CODE 19000 HALSTED HOMEWOOD, IL 60430
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S9999	<p>Final Observations</p> <p>STATEMENT OF LICENSURE VIOLATIONS:</p> <p>300.610a) 300.1210a) 300.1210b) 300.1210d)6) 300.1220b)2) 300.1220b)3) 300.1220b)9) 300.3240a)</p> <p>Section 300.610 Resident Care Policies a) The facility shall have written policies and procedures governing all services provided by the facility. The written policies and procedures shall be formulated by a Resident Care Policy Committee consisting of at least the administrator, the advisory physician or the medical advisory committee, and representatives of nursing and other services in the facility. The policies shall comply with the Act and this Part. The written policies shall be followed in operating the facility and shall be reviewed at least annually by this committee, documented by written, signed and dated minutes of the meeting.</p> <p>Section 300.1210 General Requirements for Nursing and Personal Care a) Comprehensive Resident Care Plan. A facility, with the participation of the resident and the resident's guardian or representative, as applicable, must develop and implement a comprehensive care plan for each resident that includes measurable objectives and timetables to meet the resident's medical, nursing, and mental and psychosocial needs that are identified in the</p>	S9999		
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Illinois Department of Public Health LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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S9999	<p>Continued From page 1</p> <p>resident's comprehensive assessment, which allow the resident to attain or maintain the highest practicable level of independent functioning, and provide for discharge planning to the least restrictive setting based on the resident's care needs. The assessment shall be developed with the active participation of the resident and the resident's guardian or representative, as applicable.</p> <p>b) The facility shall 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 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>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 300.1220 Supervision of Nursing Services</p> <p>b) The DON shall supervise and oversee the nursing services of the facility, including:</p> <p>2) Overseeing the comprehensive assessment of the residents' needs, which include medically defined conditions and medical functional status, sensory and physical impairments, nutritional status and requirements, psychosocial status, discharge potential, dental condition, activities</p>	S9999		

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S9999	<p>Continued From page 2</p> <p>potential, rehabilitation potential, cognitive status, and drug therapy.</p> <p>3) Developing an up-to-date resident care plan for each resident based on the resident's comprehensive assessment, individual needs and goals to be accomplished, physician's orders, and personal care and nursing needs. Personnel, representing other services such as nursing, activities, dietary, and such other modalities as are ordered by the physician, shall be involved in the preparation of the resident care plan. The plan shall be in writing and shall be reviewed and modified in keeping with the care needed as indicated by the resident's condition. The plan shall be reviewed at least every three months.</p> <p>9) Participating in the development and implementation of resident care policies and bringing resident care problems, requiring changes in policy, to the attention of the facility's policy development group.</p> <p>Section 300.3240 Abuse and Neglect a) An owner, licensee, administrator, employee or agent of a facility shall not abuse or neglect a resident.</p> <p>These requirements are not met as evidenced by:</p> <p>Based on observations, record review and interviews the facility failed to have trained staff members to intervene to prevent or stop physical abusive behavior to avoid resident injury, have crisis interventions protocols for residents with combative/aggressive behaviors and have individual care plan interventions for residents to address combative/aggressive behavior. These failures apply to 10 of 17 residents (R1, R3, R6, R11, R12, R13, R14, R15, R16 and R17)</p>	S9999		
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S9999	<p>Continued From page 3</p> <p>reviewed for behaviors in a sample of 17. As a result of the facility's failure, on 7/22/2014 R1 was physically abused by a staff member (E7) during a physical intervention to stop a negative behavior. During this encounter E7 caused multiple injuries to R1's facial area. R1 was admitted to the hospital and treated for the injuries.</p> <p>Findings Include:</p> <p>1. R1 is an eighty-one (81) year old resident admitted to the facility on 6/14/2014, with a diagnosis of dementia.</p> <p>-The facility's incident report dated 7/22/2014 at 6:00 PM denotes: "R1 was receiving activities of living (ADL) and R1 became agitated and combative during care. R1 lost his balance and hit his head on the headboard but R1 stated he was hit by staff. R1 was assessed by the nurse and was observed with a laceration to the lip. R1's family and physician were notified R1's physician gave orders to send to the hospital for an evaluation."</p> <p>R1's hospital emergency record dated 7/22/2014 denotes R1 had a laceration to the upper lip and received three sutures.</p> <p>A local police report dated 7/22/2014 stated: E7 (Nurse's Assistant) was arrested and detained for 2 days at the police station. E7 was questioned about the incident involving R1 that lead to his injuries and required hospitalization. E7 explained to the local police R1 became very uncooperative and very combative, unable to get assistance. R1 swung both arms at him and after a few minutes of struggling with one another; R1</p>	S9999		
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S9999	<p>Continued From page 4</p> <p>fell off the bed and struck the corner of the table located next to the bed.</p> <p>On 7/24/2014 at 3:30PM, Z1 (Psychiatric Physician) explained " the facility never call me about the incident of R1 being sent to the hospital for a facial lacerations. Nothing was told to me about an emergency room visit, police reports or an arrest of an employee. They just informed be about R1 having negative acting out behaviors. The facility spoke to me about consultations and medications."</p> <p>R1 was observed on 7/24/2014 at 5:00 PM, on the skilled nursing unit in a wheel chair. R1 is alert and he was propelling his wheelchair independently while stating, "I am busy and I don't have the time to talk to you." R1 had sutures on the upper lip on the left side. The left side of R1's his face was discolored with mild swelling to the jaw line (middle of face) and lip.</p> <p>On 7/31/2014 at 12:20pm, Z2 (family) stated she went to the hospital on 7/22/2014 after being called by the facility. Z2 stated, R1 told her the boy he was working with, hit him in the mouth. My husband has a big piece missing out of his lip, I don't like this.</p> <p>- Next, the facility's incident report dated 7-25-14 denotes: R1 was calm initially and during care became aggressive. E3 (staff nurse) held R1's arms down and did not apply any pressure.</p> <p>On 7-25-14 at 9:30AM, E6 (Social Worker) explained R1 was transferred out of the facility to the hospital because R1 hit a nursing staff.</p> <p>On 7/25/2014 at 11:00AM, E3 explained R1 hit her in the face while she was assisting E4</p>	S9999		
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S9999	<p>Continued From page 5</p> <p>(Nurse's Assistant) with putting on R1's pants. E3 explained she held one arm across R1 's chest at the wrist and held the other arm against the side his body, holding the lower arm, while he was lying in bed. E4 then put the pant on while R1 remain lying in the bed. R1 was resistant to care at that time.</p> <p>On 7/25/2014 at 12:30PM E4 (Nurse's Assistant), admitted she and E3 went into the room and E3 held R1's hands and arms down. " I pulled his pants up "</p> <p>-R1's nursing progress notes from admission on 6/14/2014 to 7/25/2014 had documentation of R1's multiple physical altercations with staff and other residents as follows:</p> <p>7-6-14 at 10:55AM: (R1) continues to be combative with staff members and refusing care. Notes several scratches on both lower extremities.</p> <p>7-7-14 at 10:19AM denotes R1 became aggressive and attempted to hit staff and curse at staff.</p> <p>7-8-14 at 7:06AM; combative, kicking and punching staff.</p> <p>7-9-14 notes R1 increasing agitated and agitated and aggressive and combative. Hitting and punching staff.</p> <p>7-11-14 at 5:30PM denotes combative, swinging and hitting staff.</p> <p>Also incident reports documented R1's aggressive/abusive behavior as follows:</p>	S9999		
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S9999	<p>Continued From page 6</p> <p>7-16-14 denotes R1 was scratch at the bridge of his nose by another resident, (R5).</p> <p>7-20-14 denotes R1 was in a verbal and physical altercation with another resident, R5.</p> <p>R1's clinical record had no psychosocial interventions to decrease, re-evaluate, or re-assessment of medications to address the severity, duration of (30 days) R1's combative aggressive behavior toward staff and other residents.</p> <p>2. The facility has nine (9) other elderly residents (R3, R6, R11, R12, R13, R14, R15, R16 and R17) who have been identified by the social service department as demonstrating combative aggressive behaviors.</p> <p>-E5 (Therapy aide) explained on 7-24-14 that R3 hit her because an explanation was not given before she reach to zip up her pants. R3 is a 71 year old resident.</p> <p>-R6 according to progress notes, attempted to get physically aggressive with another peer using an object on 7-8-14.</p> <p>-R11 's progress notes dated 6-8-14 denotes, resident physically threatening another resident. Both were separate and resident educated."</p> <p>-R12's progress notes dated 7-28-14 stated, "resident with erratic behavior which is difficult to re-direct with staff. Resident behavior to be potentially harmful to self and others."</p> <p>-R13's progress notes dated 6-12-14 at 10:47AM and 1:07PM denotes, R13 became physically</p>	S9999		
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S9999	<p>Continued From page 7</p> <p>aggressive and attempted to hit staff and hitting staff with close fist.</p> <p>-R14's progress notes dated 7-21-14 denotes, (R14) hitting and screaming at staff and her peers."</p> <p>-R15's progress notes dated 7-29-14 denotes, (R15) resident has a history of physically abusive, kicking, swing his arms toward staff."</p> <p>-R16's progress notes dated 6-25-14 denotes, " (R16) pushed another resident " on 6-30-14 physically aggressive toward peers."</p> <p>-R17's progress notes dated 7-24-14 denotes, aggressive behavior, told unable to smoke, not going to meds (medication), will exit facility through a window.</p> <p>R3, R6, R11, R12, R13, R14, R15, R16 and R17's current care plans, had no staff crisis interventions for catastrophe adverse behaviors nor how the staff would intervene physically to stop physically abusive.</p> <p>When requested, the facility did not present a policy governing resident's safety measures to protect the residents or employee from any resident's with aggressive combative behaviors. The facility's current abuse policy does not address any preventive intervention.</p> <p>On 7-25-14 at 4:00PM, E6 (Social Service Director) explained, there is no protocols to follow when dealing with elderly residents identified with combative aggressive behaviors. E6 explained, we assess, identify and document behaviors, along with consultation in house and provide one to one therapy. If these things are not effective, a</p>	S9999		
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S9999	<p>Continued From page 8</p> <p>psychiatric evaluation, family involvement and possible discharge (is implemented) if adverse behaviors continues. R1 should have been discharge from the facility because of his behaviors not being address safely and other multiple incidents he was involved in. E6 gave no comments about the 9 other residents who required behavior modifications for physical assault toward the staff and or others.</p> <p>E1 (administrator) and E6 explained on 8-6-14 at 2:00PM in the conference room, the facility has no direct policy or procedures in place to treat or care for residents with aggressive combative behaviors.</p> <p>The facility's policy entitled, "Problematic Behavior management - Clinical Protocol" dated August, and 2008 stated the following:</p> <p>Treatment Management 1). the staff will use protocols to identify pertinent interventions, other than medications for the nature and causes of the individual ' s problematic behavior.</p> <p>a). the rational should be based on information contained in pertinent protocols and guidelines regarding the use and adjustment of such medications.</p> <p>Monitoring and Follow-up 1). If the resident is being treated for problematic behavior or mood, the staff and physician will seek and document objective re-assessment of positive or negative changes in the individual ' s until stable.</p> <p>This policy did not outline what a staff member would or should do if it became necessary to</p>	S9999		
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S9999	Continued From page 9 physically intervene when any resident has a catastrophic behavior. The facility did not offer any training of staff member regarding this specific topic within the last year. (A)	S9999		
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South Suburban Rehab Center

Imposed Plan of Correction

Complaint Survey # 1493203/1493196,1493192

Complaint Survey: August 12th, 2014

Please accept the following as the facility's plan of correction.

This plan of correction does not constitute admission of guilt or liability by the facility and is submitted only in response to the regulatory requirement.

F223 / *licensure violations*

South Suburban Nursing and Rehab does ensure that a resident has the right to be free from verbal, sexual, physical, mental abuse, corporal punishment, and involuntary seclusion.

The facility does not use verbal, mental, sexual, physical abuse, corporal punishment, or involuntary seclusion.

Corrective actions which will be accomplished for those residents found to have been affected by the alleged deficient practice:

R1- is no longer in the facility.

R3, R6, R11, R12, R13, R14, R15, R16, and R17- Care plans were reviewed and updated.

How will the facility identify other residents having the potential to be affected by the same deficient practice:

Residents who exhibit combative/aggressive behaviors have the potential to be affected by the alleged deficiency.

What measures will the facility take or what systems will the facility alter to ensure that the problem will be corrected and will not recur:

An Emergency CQI/QA Committee meeting was held.

Residents with aggressive behaviors within the last 30 days will be reviewed by the IDT and care planned/changed/updates as necessary based on this audit. Prior to admissions residents behaviors will be screened by the Director of Nursing or designees. Social Services will review, and update the care plans as needed.

In-services were conducted for all staff on Abuse, Prevention, Responding and Reporting.
In-services were conducted for all Care Giving staff on Working with Aggressive Residents.

The Administrator, Director of Nursing, and Social Service Director will meet and review incidents of Abuse and/or aggressive behaviors to ensure staff responded appropriately.

The facility has developed a Quality Assurance Tool to ensure compliance, the results of the reviews will be documented on the Audit Tool.

Quality Assurance plans to monitor facility performance to make sure that the corrections are achieved and are permanent:

A summary of the Audit Tools will be presented at the Quality Assurance Meetings for three months, and will be continued beyond the time interval if results suggest further monitoring.

Attachments:

- A. In-service Education
- B. Quality Assurance Tools

Completion Date: 8/29/2014

accepted