

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  145405	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  04/26/2024
NAME OF PROVIDER OR SUPPLIER  Bria of Westmont		STREET ADDRESS, CITY, STATE, ZIP CODE  6501 South Cass Westmont, IL 60559	

For information on the nursing home's plan to correct this deficiency, please contact the nursing home or the state survey agency.

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information)
<p>F 0585</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Honor the resident's right to voice grievances without discrimination or reprisal and the facility must establish a grievance policy and make prompt efforts to resolve grievances.</p> <p>46409</p> <p>Based on interview and record review, the facility failed to file a grievance and follow up on the grievance for a resident who notified staff of a concern. This applies to one of three residents (R3) reviewed for improper nursing care in a sample of eight.</p> <p>The findings include:</p> <p>On April 23, 2024 at 03:17 PM, R3 said V12 (CNA/Certified Nurse Assistant) took him to the washroom, and when he came back, his phone screen was shattered. R3 said he asked V12 what happened to his phone while he was in the bathroom, and R3 said V12 said she did not know. R3 showed the surveyor his old phone with the shattered screen. R3 said he purchased a new phone because there was no follow up from the facility. R3 said he spoke to V10 (Social Services) and she said she would speak to the staff, and a week had passed. R3 said he also called V1 (Administrator) and left a voicemail and had not heard back from anyone regarding his broken phone.</p> <p>On April 24, 2024 at 10:15 AM, V10 said R3 told her when he came out of the bathroom, his phone was shattered. V10 said R3 showed her his phone and the phone was shattered. V10 said R3 spoke to her between two to three weeks ago. V10 said V11 (CNA) came and told her about R3's shattered phone and V10 said she went and spoke with R3 right away. V10 said she went looking for V12 but got distracted and does not believe she went back to looking. V10 said she did not fill out a grievance form and did not notify V1. V10 said she should have spoken to V1 about the shattered phone.</p> <p>On April 24, 2024 at 10:30 AM, V11 (CNA) said R3 told her about the phone, and she notified V10. V11 said the incident happened at least two weeks ago. V11 said V10 spoke to R3 the day she told her.</p> <p>On April 25, 2025 at 02:24 PM, V1 (Administrator) said she found out about R3's grievance on April 24, 2024 (during the survey). V1 said once she found out about the phone, she spoke to V11 and tried to find out who V12 was, and had interviewed two other CNAs with similar names, as the facility did not have any CNAs with the name provided by R3. V1 said she would have reimbursed R3 the money if she had known about the incident. V1 said their phone system was not able to receive voicemail and she had notified all the residents, so she would not have received R3's voicemail.</p> <p>(continued on next page)</p>

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.

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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<p>F 0585</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>The EMR (Electronic Medical Record) shows R3's diagnoses including hemiplegia and hemiparesis, dysphagia, type 2 diabetes mellitus, anxiety disorder, benign prostatic hyperplasia, and hypertension. R3's MDS (Minimum Data Set) dated February 22, 2024 showed R3 was cognitively intact. R3 required supervision for eating, oral hygiene, moderate assistance for personal hygiene, maximal assistance for upper body dressing, and was dependent on staff for shower/bathing, lower body dressing, and putting on/taking off footwear.</p> <p>The facility's Grievances/Concerns policy, reviewed in September 2023, showed Notification that Grievances/Concerns may be filed anonymously; A response in writing may be requested' and the grievance must be answered within 72 hours is required .If possible, upon receiving the grievance or concern, attempt to resolve the grievance or direct the resident or family member to the appropriate department head or the Administrator .The staff member will submit the concern form to the appropriate department head/designee for resolution. The department head will summarize on the bottom of the concern form the resolution and forward the completed form to the Administrator/Grievance Officer. The Administrator will be the designate Grievance Officer and will review the completed form and action taken and do any follow-up necessary.</p>		

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<p>F 0684</p> <p>Level of Harm - Actual harm</p> <p>Residents Affected - Few</p>	<p>Provide appropriate treatment and care according to orders, resident's preferences and goals.</p> <p><b>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY**</b> 46409</p> <p>Based on interview and record review, the facility failed to notify the physician of a change in the resident's condition in a timely manner. This failure resulted in a delay in treatment for R1, who experienced a decrease in activities of daily living and increased pain after sustaining a right hip fracture following a fall 4 days earlier. This applies to one of three residents (R1) reviewed for accidents in a sample of eight.</p> <p>The findings include:</p> <p>On April 24, 2024 at 09:47 AM, V9 (Insurance Agent) said R1 was in the facility and had a fall on February 22, 2024. V9 said R1 was sent to the ER (emergency room ) and was found to have a right wrist fracture. V9 said on February 27, 2024 she had right hip pain and it was unclear whether she fell again. V9 said an X-ray was done, which showed a right hip fracture.</p> <p>On April 23, 2024 at 01:36 PM, V3 (PT/Physical Therapist) said she evaluated R1 after her fall. V3 said R1 fell on [DATE], returned to the facility the same night, and she evaluated her on February 23, 2024. V3 said during her evaluation, R1 had a cast on her right arm and was non-weight bearing to the right arm. V3 said prior to the fall, R1 was independent with ambulation with or without an assistive device. V3 said after the fall, R1 was not able to get up. V3 said R1 can be confused, but when it comes to pain, she knows. V3 said when she tried to move R1's right leg, R1 started to exclaim ow! and was tapping her right hip. V3 said when she asked her where her pain was, R1 pointed to her right hip. V3 said she tried to get R1 to sit on the edge of the bed, but she was unable to do so because of her pain. V3 said R1 was in pain even during passive range of motion exercises. V3 said she spoke to the floor nurse about R1 and communicated the resident was not able to sit at the edge and even a little movement caused R1 to complain of pain. V3 said she discontinued treatment for R1 because she was unable to conduct the therapy and wanted to wait until diagnostics were completed for the resident.</p> <p>On April 23, 2024 at 2 PM, V4 (PTA/Physical Therapy Aide) said she worked with R1 on February 25, 2024 and February 26, 2024. V4 said on February 25, 2024, prior to starting treatment with R1, R1 was complaining of pain in the right leg and so she spoke with the nurse to ask if there were any restrictions for R1. V4 said she mainly did active range of motion exercises for the left leg because the right leg was painful, and when she tried to do passive range of motion exercises for the right leg, R1 complained of pain and was unable to tolerate it. V4 said on February 26, 2024, she spoke with the nurse and the NP (Nurse Practitioner) about R1's pain prior to the treatment. V4 said during her session with R1, R1 wanted to use the toilet so V4 attempted to sit R1 on the edge of the bed but was unable to do so because of R1's pain, grimacing, and guarding.</p> <p>On April 23, 2024 at 02:12 PM, V5 (LPN/Licensed Practical Nurse) said she worked on February 23, 2024 from 7 AM to 3 PM. V5 said on February 23, 2024, the PT had told her during therapy, R1 was complaining of pain in her hip. V5 said she assessed R1 to notify her physician of the hip pain but had to leave a message. V5 said she endorsed to the next shift nurse that she was waiting for a call back, and to follow up. V5 said she wrote a note in the EMR (Electronic Medical Record) and told the supervisor.</p> <p>(continued on next page)</p>		

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<p>F 0684</p> <p>Level of Harm - Actual harm</p> <p>Residents Affected - Few</p>	<p>On April 24, 2024 at 11:58 AM, V7 (RN/Registered Nurse) said the nurse did not ask her to call the doctor. V7 said sometimes the nurses chart something, but do not let the oncoming shift know. V7 said she would have called the doctor immediately, and if she was unable to reach the doctor, she would have told her supervisor and tried to reach the NP.</p> <p>On April 23, 2024 at 04:40 PM, V6 (RN) said she was the nurse on duty when R1 fell . V6 said she noticed R1's wrist was crackling, so she was sent out to the ER and returned with a fracture of the right wrist. V6 said when R1 returned, R1 was kind of bed bound. V6 said R1 would be crying if someone touched her, and when the CNA's (Certified Nurse Assistants) were trying to change her, she would scream. V6 said none of the nurse's had passed along to her that they were waiting for a call from the doctor.</p> <p>On April 25, 2024 at 01:09 PM, V8 (NP) said she was not made aware of R1's hip pain prior to February 26, 2024. V8 said the floor nurses never discussed with her about R1 being in pain, but it was her expectation the staff notify her of a change in condition. V8 said if she knew R1 was complaining of hip pain, she would have ordered an X-ray right away, which is what she did on February 26, 2024 when the staff notified her.</p> <p>The EMR (Electronic Medical Record) shows diagnoses including type 2 Diabetes Mellitus, difficulty in walking, weakness, repeated falls, dysphagia, fracture of right wrist and hand. Intertrochanteric fracture of right femur, psychosis, dementia, Alzheimer's disease, chronic kidney disease, hypertension, and osteoarthritis. R1's MDS (Minimum Data Set) dated March 28, 2024 showed R1 had severe cognitive impairment. R1 required supervision for eating, partial assistance for oral hygiene, upper body dressing, and substantial assistance for toileting hygiene, shower/bathing, lower body dressing, putting on/taking off footwear, and personal hygiene.</p> <p>R1's progress notes documents the following:</p> <p>On February 22, 2024 at 06:17 PM, V6 wrote, Resident was witnessed by staff stumbling over and fell on her right side in the hallway. Staff immediately notified writer. Writer assessed resident and V/S (Vital Signs) were stable. During assessment writer noticed a lump above resident's right eye. No other bruising was noted. Resident complained of pain and discomfort on the right side of the face, right shoulder, right arm, and right leg. Writer immediately applied ice pack to right eye to decrease swelling. Staff helped assist resident to bed via [mechanical] lift. Residents' family, DON (Director of Nursing), and NP were notified. Resident is immediately being sent out to [Hospital] via ambulance with all paperwork.</p> <p>On February 22, 2024 at 10:42 AM, V6 wrote, Resident returned from [Hospital] with all paperwork. V/S were stable. Resident returned with a closed fracture of the right wrist. Resident will need assistance with ADLs (Activities of Daily Living). Resident returned with a new medication order of hydrocodone. Resident is currently in bed resting. will continue to monitor.</p> <p>On February 23, 2024 at 12:44 PM, V5 wrote, Writer received a script for residents signed by NP hydrocodone-acetaminophen (5-325), faxed to pharmacy, resident in stable conditions. resting in bed all needs attended to, no signs of distress or discomfort, PRN (As Needed) given r/t (Related To) pain in right hand d/t (Due To) fracture that occur d/t recent fall on 2/22/24. Resident kept comfortable. call light in reach care on going.</p> <p>(continued on next page)</p>		

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<p>F 0684</p> <p>Level of Harm - Actual harm</p> <p>Residents Affected - Few</p>	<p>On February 23, 2024 at 03:31 PM, V5 wrote, Writer informed that while resident was in PT/OT [Physical Therapy/Occupational Therapy] she verbalized complaints of pain in her right hip. R/T fall that occurred 2/22/2024. Writer called PCP (Primary Care Physician) [Doctor] to see if possible x-ray of resident right hip. Writer called message left to return call, Writer awaiting call back at this time Endorsed to next shift to follow up, resident did have a fall yesterday and was evaluated by doctors at hospital and returned this morning. Writer did call for PCP doctor to order hip x-ray endorse to 2nd shift nurses to follow up.</p> <p>V8's Progress Note written on February 26, 2024 showed, During therapy [Complaint Of] right hip and knee pain, X-rays ordered. On February 27, 2024, V8's Progress Note, Patient was seen today for right hip pain, [X-Ray] reviewed and shows right hip impacted intertrochanteric fracture. Discussed with DON likely occurred during previous fall.</p> <p>V3's Summary of Skill, written on February 23, 2024, showed Therapist initiated moving R LE (Right Lower Extremity) however patient c/o pain, refusing to move the leg. Patient unable to tolerate [PROM/Passive Range of Motion] and {AROM/Active Range of Motion} on RLE and pointed on [Right] anterior hip as location of pain, unable to roll and perform bed mobility. Nurse notified.</p> <p>V4's Summary of Skill, written on February 25, 2024 showed, [Patient] report of pain on [Right] knee during [Range of Motion], nothing on [Right] hip for today's session, initially only able to tolerate 5 reps during PROM on RLE however with repetition [Patient] was able to tolerate 10 [Times]. Nursing is aware regarding [Patient] report of pain. [Patient] was seen at bedside. On February 26, 2024, V4 wrote, Coordinated with NP and nursing regarding [Patient] report of pain and if therapy can continue, per NP and nursing [Patient] can continue with therapy. Attempted to work on sitting on [Edge of Bed] as [Patient] reporting of wanting to use the toilet during this attempt [Patient] started screaming despite not being able to move [Bilateral Lower Extremity], [Patient] reporting of R knee pain.</p> <p>The facility's Physician Notification policy reviewed in September 2023 showed In a non-emergent, but acute medical situation the physician will be paged and if there is no return call in 30 minutes, the physician will be notified again. If there is no return call in 30 additional minutes (30 minutes total), the Medical Director will be notified.</p>		