

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 145439	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 01/22/2025
NAME OF PROVIDER OR SUPPLIER Accolade Healthcare of Savoy		STREET ADDRESS, CITY, STATE, ZIP CODE 302 West Burwash Savoy, IL 61874	

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 0641</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Ensure each resident receives an accurate assessment.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 34058</p> <p>Based on observation, interview, and record review, the facility failed to accurately encode Minimum Data Sets to reflect resident status with regards to falls experienced and severity of injuries incurred. This failure affects three residents (R1, R2, R4) out of four reviewed for falls and injuries.</p> <p>Findings include:</p> <p>1. On 1/21/25 at 1:10 PM, R1 was on the facility's dementia care unit wearing a padded helmet.</p> <p>R1's emergency room Reports dated 12/20/24 document R1 had experienced a subdural hematoma without bleeding, a laceration on the right temporal scalp requiring three sutures to close, and a non-displaced fracture of the right wrist during a fall at the facility on this same date.</p> <p>R1's Nurses Notes dated 12/18/24 document R1 had experienced a fall on this date with no apparent injury.</p> <p>R1's Nurses Notes dated 11/28/24 document R1 had experienced a fall on this date with no apparent injury.</p> <p>R1's Nurses Notes dated 11/16/24 and experienced a hematoma (raised bruise) on the back of her head.</p> <p>R1's Minimum Data Set, dated dated dated [DATE], Section J1900 documents R1 had experienced 2 or more falls with no injuries since the prior Minimum Data Set (dated 10/6/24).</p> <p>2. On 1/21/25 at 12:50 PM, R2 was in his own room in bed and had a blanched shiny fresh scar on the right side of his forehead approximately 2 centimeters in diameter with radiating strands outward from the center (starburst appearance).</p> <p>R2's emergency room Reports dated 12/17/24 document findings as bilateral nasal fractures and a scalp laceration on the right forehead requiring sutures to close.</p> <p>R2's Nurses Notes dated 10/27/24 document the initiation of post-fall monitoring and the incurrance of a skin tear on R2's right forearm.</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 0641</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>R2's Minimum Data Set, Section J1900, dated 12/21/24 documents R2 had 1 fall with injury since the previous Minimum Data Set (dated 9/20/24).</p> <p>3. On 1/21/25 at 2:05 PM, R4 was seated in a wheelchair in his own room. R4 had a gauze dressing on his right forearm.</p> <p>R4's Nurses Notes dated 12/28/24 documents R4 was noted to be on the floor after a fall and had incurred a skin tear 7.5 centimeters long on his right forearm.</p> <p>R4's Minimum Data Set, Section J1900, dated 1/2/25 documents R4 had experienced one fall with no injury since his admission on 12/27/24.</p> <p>The Minimum Data Set Manual 3.0 dated October 2024 documents injuries such as skin tears, abrasions, lacerations, bruises, hematomas, or sprains are considered injuries (not major). This same Manual documents injuries such as fractures, joint dislocations, closed head injuries, and subdural hematomas are considered major injuries.</p> <p>On 1/22/25 at 1:45 PM, V2, Director of Nursing, and V18, Registered Nurse Manager, confirmed section J1900 requires information going back 90 days (V18) or to the prior Minimum Data Set (V2). V2 stated and confirmed the number of falls for R1 was 4 falls since the prior assessment, 2 with no injury, 1 with injury, and 1 with major injury. V2 further confirmed the falls for R2 should have been coded as 2 falls, 1 with injury and one with major injury. V2 then confirmed the falls for R4 should have been coded as 1 fall with injury.</p>		