

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  145480	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  06/28/2024
NAME OF PROVIDER OR SUPPLIER  Mattoon Rehab & Hcc		STREET ADDRESS, CITY, STATE, ZIP CODE 2121 South Ninth Mattoon, IL 61938	

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 0686</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Provide appropriate pressure ulcer care and prevent new ulcers from developing.</p> <p><b>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 35380</b></p> <p>Based on interview and record review, the facility failed to provide treatment for a newly developed skin wound for one (R1) of three residents reviewed for skin wounds in the sample list of three.</p> <p>Findings include:</p> <p>R1's Physician Order Sheet (POS) dated June 2024, documents R1's diagnoses as: Moderate Protein-Calorie Malnutrition, Muscle Weakness (generalized), other reduced Mobility, and Myasthenia Gravis without acute exacerbation.</p> <p>R1's Minimum Data Set (MDS) dated [DATE], documents R1 requires substantial/maximum assistance with rolling left and right, sit to lying, lying to sitting on side of bed, sit to stand, and chair/bed transfers.</p> <p>R1's Nurse Skin Inspection Report dated 6/14/24, documents R1's skin is not clear and intact, has redness, bloody drainage, an open ulcer, and a circle placed on the body drawing indicating where these issues are seen (coccyx/sacrum/buttocks) area, signed by V7 Certified Nursing Assistant (CNA) and signed by V8 Licensed Practical Nurse (LPN).</p> <p>There is no documentation in R1's medical record for any treatment or notification being done on this date (6/14/24) for this skin issue. A treatment for R1's buttock did not begin until 6/18/24, four days after the skin issue was identified. R1's Treatment Administration Record (TAR) dated 6/18/24, documents to cleanse buttock with wound cleaner, apply calcium alginate and cover with border gauze daily and as needed until healed every day shift.</p> <p>On 6/27/24 at 2:30 PM, V2 Assistant Director of Nursing (ADON) stated V8 (LPN) should have let the wound nurse know about R1's findings from R1's shower sheet, and let R1's medical doctor know when the skin issue was identified (on 6/14/24) to get a treatment started right away.</p> <p>On 6/27/24 at 3:11 PM, V8 (LPN) stated if there is a finding on a shower sheet (Nurse Skin Inspection Report) she should review the care plan. V8 also stated if the CNA does not advise me (V8) then how would I (V8) know if there's a skin issue. V8 stated V8 was busy that day and doesn't always have time to look at those sheets so she just signs them. V7 then stated V8 just signed the sheet and did not look at it and that V8 should have reviewed the shower sheet when signing it.</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 0686</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>On 6/27/24 at 3:30 PM, V1 Administrator stated any time there is a skin issue on a shower sheet, the nurse should immediately do a thorough skin assessment and address the needs.</p> <p>The facility's Pressure Ulcer/Pressure Injury Prevention Policy dated Revised 3/2022, documents if a pressure ulcer is present, provide treatment to heal it to prevent the development of additional pressure ulcers.</p>