

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 145625	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 11/27/2024
NAME OF PROVIDER OR SUPPLIER California Terrace		STREET ADDRESS, CITY, STATE, ZIP CODE 2829 South California Blvd Chicago, IL 60608	

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 0584</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Honor the resident's right to a safe, clean, comfortable and homelike environment, including but not limited to receiving treatment and supports for daily living safely.</p> <p>47303</p> <p>Based on observation, interviews and record review, the facility failed to ensure that the residents' common shower room was without debris and dirt on the floor. This failure has the potential to affect all 66 residents that reside on the second floor.</p> <p>Findings include:</p> <p>During investigation on 11/25/2024 at 12:45 PM, Surveyor walked into 2nd floor shower room with V20 (CNA/ Certified Nurse Assistant) to observe the resident shower room.</p> <p>At that time, the resident's shower room was observed with debris and dirt on the floor.</p> <p>Surveyor observed plastic bottles, gloves, paper, plastic bags, clothes and towels on the floor.</p> <p>On 11/25/2024 at 12:50 PM, V5 (Nurse Manager) went with surveyor to observe the condition of the resident's shower room. At that time, V5 said that the shower room was unkempt and that it poses and infection control concern for the residents.</p> <p>On 11/25/2024 at 1:10 PM, V21 (Housekeeping) was observed on the 2nd floor near social service office. Surveyor inquired about the expectations regarding residents' shower rooms. At that time, V21 said, that the shower room should be disinfected after each use for sanitary purposes.</p> <p>On 11/27/2024 at 2:20 PM, V2 (DON/ Director of Nursing) said that the expectations is that the residents' shower room should be cleaned in between use to decrease the spread of infection.</p> <p>Facility census report dated 11/25/24 documents 66 residents residing on the 2nd floor.</p> <p>Facility policy titled Housekeeping Guidelines documents, to provide guidelines to maintain a safe and sanitary environment for residents, facility staff and visitors.</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 0684</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Provide appropriate treatment and care according to orders, resident's preferences and goals.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 47303</p> <p>Based on interviews and record review, the facility failed to ensure that one resident with documented skin issues (R2) did not develop maggots in his foot wound. This failure has affected one of three residents reviewed for wound care.</p> <p>Findings include:</p> <p>R2 is [AGE] year old with diagnosis including but not limited to: Cellulitis, spinal stenosis, acquired absence of left leg above the knee, weakness, muscle wasting and atrophy.</p> <p>R2's BIMS (Brief Interview of Mental Status) score is 13, which indicates cognitively intact.</p> <p>On 11/25/2024 at 12:18 PM, R2 was observed lying in bed in his room. R2 said that he informed V5 (Nurse Supervisor) of his painful ingrown toe nail that he had months ago and was told that he (R2) would be assessed by the podiatrist. R2 said that V5 never took off his footie to assess his foot and that when he asked for his soiled wound bandage to be changed, V17 (Wound care nurse/LPN) refused to change his bandage. R2 began to become tearful during interview and said that he was hurt and pissed off that there were maggots coming out of his toe wound prior to having his left leg amputated.</p> <p>On 11/26/2024 at 1:15 PM, V17 said that she was not aware of R2's infected foot and that she was made aware of R2's toe in August when R2's toe was already necrotic. Surveyor inquired about R2's wound care orders. V17 said that the purpose of the betadine is to keep the wound from draining and to aid in wound healing. Surveyor inquired about R2's Hospital wound care recommendations. V17 said, If there are hospital recommendations, there should be notations that the facility Doctor was made aware of the recommendations. Surveyor inquired about R2's PRN (as needed) wound care. V17 said that PRN wound changes were only for when a wound dressing comes off and not for soiled dressing.</p> <p>On 11/26/2024 at 1:55 PM, Surveyor inquired about alleged maggots in R2's wound. V14 (Nurse Practitioner) said, I saw the maggots in his (R2's) wound. If the wound is draining or has too much moisture it could attract flies, which then may drop an egg that cannot be seen by the naked eye. Surveyor inquired about R2's Hospital wound care recommendations of daily betadine. V14 (Nurse Practitioner) said, The recommendations for the daily betadine would be to keep the wound dry and to keep the wound sterile. Moisture will bring in maggots. If it stays wet, it will attract maggots. R2's amputation would have happened sooner or later.</p> <p>R2's progress note dated 08/08/2024 documents, X-ray of the left great toe related to osteomyelitis/ swollen left great toe.</p> <p>R2's Nurse Practitioner note dated 08/13/2024 documents, Cellulitis to the left amputated toe.</p> <p>R2's Nurse Practitioner noted dated 08/28/2024 documents, wound care to follow left great toe wound.</p> <p>(continued on next page)</p>		

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<p>F 0684</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>R2's Hospital record dated 09/23/2024 documents, R2 presented to the hospital for left necrotic toe; X-ray of foot showing large ulceration and possible osteomyelitis; daily betadine and gauze dressing.</p> <p>R2's Hospital record dated 09/26/2024 documents, daily betadine and gauze dressing; wound care recommendations- cleanse left heel ulcer and apply betadine daily and prn (as needed).</p> <p>R2's Order Recap Report documents the following order for the period of 08/08/2024- 08/23/2024: Left Foot Great Toe- Cleanse with normal saline, apply collagenase ointment and hydrocolloid, and cover with dry dressing once a day and as needed.</p> <p>R2's Order Recap Report documents the following order for the period of 08/23/2024- 09/23/2024: Left Foot Great Toe- Cleanse with Normal saline, apply betadine soaked gauze and cover with dry dressing as needed and on Tuesdays, Thursdays and Saturdays.</p> <p>R2's Medication Administration Record for the period of 08/01/2024- 08/31/2024 documents, no PRN (as needed) betadine wound care treatments in the month of August.</p> <p>R2's Medication Administration Record for the period of 08/01/2024- 08/30/2024 documents only two betadine wound care treatments administered.</p> <p>R2's Medication Administration Record for the period of 09/01/2024- 09/30/2024 documents, no PRN (as needed) betadine wound care treatments in the month of September.</p> <p>R2's Medication Administration Record for the period of 09/01/2024- 09/30/2024 documents, nine betadine wound care treatments administered.</p> <p>R2's Progress Note authored by V14 (Nurse Practitioner) dated 09/28/2024 documents, R2 was seen on 08/08/2024 because of reported left great toe infection; noted swelling, pain and erythema of the foot; purulent drainage from the toe bed and some bleeding and maggots on the toe.</p> <p>R2's Progress Note authored by V17 (Wound Care Nurse) on 09/30/2024 documents, writer informed residents mother that dressing change is once a week per Doctor; writer educated resident (R2) that his dressing changes being increased will have no effect on his complaints of pain.</p> <p>R2's MDS (Minimum Data Set) - Skin Conditions section dated June 20, 2024 documents no skin conditions.</p> <p>R2's MDS (Minimum Data Set) - Skin Conditions section dated August 21, 2024 documents an open lesion on R2's foot.</p> <p>Facility Wound Policy documents, purpose is to promote healing of existing pressure and non-pressure ulcers.</p>		

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<p>F 0925</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Make sure there is a pest control program to prevent/deal with mice, insects, or other pests.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 47303</p> <p>Based on observation, interviews, and record review the facility failed to ensure that residents' rooms were free of cockroaches. This failure has the potential to affect all 66 residents that reside on the 2nd floor.</p> <p>Findings include:</p> <p>R2 is a [AGE] year old with diagnosis including but not limited to: Cellulitis, spinal stenosis, acquired absence of left leg above the knee, weakness, muscle wasting and atrophy. R2's BIMS (Brief Interview of Mental Status) score is 13, which indicates cognitively intact.</p> <p>R5 is a [AGE] year old with diagnosis including but not limited to: Gastric ulcer, acute pancreatitis without necrosis or infection, anemia, hypomagnesemia, and periorbital cellulitis. R5's BIMS (Brief Interview of Mental Status) score is 13, which indicates cognitively intact.</p> <p>R6 is a [AGE] year old with diagnosis including but not limited to: Obstructive sleep apnea, type 2 diabetes mellitus, epilepsy, essential hypertension, obesity and hyperlipidemia. R6's BIMS (Brief Interview of Mental Status) score is 12, which indicates moderate cognitive impairment.</p> <p>During investigation on 11/25/2024 at 12:18 R2 was observed lying in bed in his room. R2 complained about having roaches in his room.</p> <p>On 11/25/2024 at 12:40 PM, Surveyor observed a cockroach crawling up the wall near R5's (R2's roommate) bed. R5 said that he sees roaches all of the time in his room and is uncomfortable with the roaches.</p> <p>R6 was sitting on his bed and said that he also sees roaches all of the time in their room.</p> <p>On 11/25/2024 at 12:50 PM, V5 (Nurse Manager) stated that the facility had a roach problem.</p> <p>On 11/27/2024 at 2:20 PM, Surveyor inquired about the expectations regarding pest control. V1 (Administrator) said that she had no comment regarding the facility's pest control.</p> <p>Facility Service Inspection Report dated 10/01/2024 documents that most rooms had problems with cleanliness as well as food being left around that is definitely attracting the pest.</p> <p>Facility Service Inspection Report dated 10/22/2024 documents, V1 (Administrator) reports roaches in resident's rooms, 2nd floor nurses station and the front lobby.</p> <p>Facility Service Inspection Report dated 10/31/2024 documents, V1 reports roaches in residents' rooms and the 2nd floor nurses' station; cleanliness needs to be practices throughout the facility.</p> <p>Facility census report dated 11/25/24 documents 66 residents residing on the 2nd floor.</p> <p>(continued on next page)</p>		

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