

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 145661	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 08/29/2024
NAME OF PROVIDER OR SUPPLIER Ryze West		STREET ADDRESS, CITY, STATE, ZIP CODE 5130 West Jackson Boulevard Chicago, IL 60644	

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 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>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 47303</p> <p>Based on observation, interviews and record review, the facility failed to schedule a dental appointment as ordered by a Nurse Practitioner for a dependent resident noted with severe dental decay. This failure has affected one (R5) of nine residents reviewed for nursing care. This failure resulted in R1 experiencing pain and a continuation of dental decay.</p> <p>Findings include:</p> <p>Resident is [AGE] year old with diagnosis including but not limited to: Need for assistance with personal care, essential hypertension, weakness, respiratory failure and abnormal posture.</p> <p>On 8/26/2024 at 10:46 AM, R5 was observed sitting in dining room on the second floor.</p> <p>At that time, R5 said, I have to have my tooth pulled. It hurts me sometimes, but thankfully it is not hurting right now. I had Txxx (painkiller) and it helps. I just need this tooth pulled because it is rotten.</p> <p>Surveyor inquired about the process of scheduling resident's appointment.</p> <p>On 8/28/2024 AT 10:19 AM, V12 (Restorative Nurse) said, If a resident needs an appointment scheduled, it would show up on the communication board and in the residents orders. For R5, I noticed the order for dental was in the patient's chart, but was not scheduled. I knew that the order for R5 wasn't carried out because I did not see it on the home screen. I added the order to the home (communication) screen so that the appointment can be scheduled.</p> <p>On 8/28/2024 at 10:30 AM, V13 said, I am responsible for scheduling the resident's appointments. If an appointment is to be scheduled, it should be communicated on the home/ communication page. The Nurses relay all orders from the Medical Doctor or Nurse Practitioner on the communication board pertaining to appointments or appointment requests. This is the only way that I know to schedule an appointment, unless it was verbally told to me.</p> <p>On 8/29/2024 at 3:23 PM V1 said, Doctor's appointments shown on the order to schedule should be scheduled as soon as possible. A delay in dental treatment could results in pain and infection.</p> <p>R5's care plan dated 7/17/2024 documents, R5 presently requires the care and support/services that this facility setting provides in order to provide highest practical functioning.</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 0684</p> <p>Level of Harm - Actual harm</p> <p>Residents Affected - Few</p>	<p>R5's care plan dated 7/24/2024 documents, R5 has impaired oral/dental hygiene. Antibiotics prescribed for left molar.</p> <p>R5's Minimum Data Set- Oral/ Dental Status dated 7/24/2024 documents, likely cavity or broken natural teeth.</p> <p>Nurse Practitioner note written on 7/24/2024 by V21 (Nurse Practitioner/NP) documents, Severe dental decay left molar with surrounding swelling and lymphadenopathy; In house or outpatient dental consult asap (as soon as possible) for extraction.</p> <p>Nurse Practitioner note written on 8/5/2024 by V22 (NP) documents, R5 has a bad left molar that needs extraction in which a dentist appointment has yet to be made. I (V22) believe this may be the cause of her headaches. Discussed with nursing to get dental appointment ASAP.</p> <p>R5's Physician Order Sheet documents an order entered on 7/24/2024 documents an order to schedule dental exam for evaluation for tooth extraction left molar which is cracked, extensive decay and pain.</p> <p>R5's Physician Order Sheet excludes any scheduled dental appointments for R5 as of 8/28/2024.</p> <p>Facility policy titled Dental Services documents, to provide for needed dental services to our residents.</p>