

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  145800	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  05/03/2025
NAME OF PROVIDER OR SUPPLIER  Sunset Home		STREET ADDRESS, CITY, STATE, ZIP CODE  418 Washington Street Quincy, IL 62301	

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 0609</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Timely report suspected abuse, neglect, or theft and report the results of the investigation to proper authorities.</p> <p>49187</p> <p>Based on interview and record review, the facility failed to report an injury of unknown origin to the state agency for one of three residents (R1) reviewed for bruises in a sample of three.</p> <p>Findings include:</p> <p>The facility's Abuse and Neglect Policy, dated 7/2023, documents Identifying and Recognizing signs and symptoms of abuse: a. The following are examples of actual abuse/neglect and signs and symptoms of abuse/neglect which should be promptly reported. This listing is not all inclusive. Other signs and symptoms or actual abuse/neglect may be apparent. When in doubt, reported immediately. i. Signs of/actual physical abuse: 1. Welts or bruises. State Agencies: Purpose- to assure all serious bodily injuries and reasonably suspected crimes against resident's, resulting in serious bodily injuries, are reported to IDPH (Illinois Department of Public Health) immediately, all serious incidents and accidents, and allegations of abuse, including injuries of unknown sources, and reasonably suspicion of a crime against a resident are reported to IDPH in an appropriate fashion immediately with a final report sent to the department within five days.</p> <p>R1's Progress Note, dated 2/25/25 and signed by V4/LPN (Licensed Practical Nurse), documents During transfer from wheelchair to stretcher this nurse observed a large circular red/purple bruise to (R1's) left mid back. Emergency Medical Technicians were made aware that (R1) has been on Eliquis (blood thinning medication) but it was placed on hold per (V6/Nurse Practitioner) and that (R1) experienced no recent falls that this nurse was aware of other than the one on 2/7/25. This same progress note documented V4 notified V2/DON (Director of Nursing) of the bruise located to R1's left mid back.</p> <p>On 5/2/25 at 2:15PM V4/LPN stated she observed a large purplish/red bruise approximately six inches in diameter to R1's left mid back for the first time when sending R1 out to the hospital. V4 stated she was unable to measure the bruise to R1's back because R1 was being transferred out to the local hospital. V4 stated, I reported the bruise to (V2/Director of Nursing) because it had appeared overnight, and I did not know what caused it. I let (V2) know I did not believe it was due to (R1's) fall, because the fall had occurred two to three weeks prior to the bruise appearing. There was no rhyme or reason to the bruise appearing to (R1's) back.</p> <p>As of 5/2/25, the facility's reports to the local State Agency did not contain documentation of R1's 2/25/25 injury of unknown origin as being reported.</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 0609</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>On 5/2/25 at 2:28 PM V2/DON stated V4 did report R1's bruise (injury of unknown origin) to V2. V2 stated R1's injury of unknown origin was not reported to the local State Agency and should have been.</p> <p>On 5/3/25 at 10:03 AM V1/Administrator verified the bruise to (R1's) left mid back was not reported to the local State Agency and should have been.</p>		

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<p>F 0610</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Respond appropriately to all alleged violations.</p> <p>49187</p> <p>Based on record review and interview, the facility failed to ensure a thorough investigation was completed following a bruise of unknown origin for one of three residents (R1) reviewed for bruises in a sample of three.</p> <p>Findings include:</p> <p>The facility's Abuse and Neglect Policy, dated 7/2023, documents an injury should be classified as an injury of unknown source when the injury was not observed by any person, could not be explained, and the injury is suspicious because of the extent of the injury or the location. This same policy also states, VI. Abuse Investigations. All reports of resident abuse, neglect, and injuries of unknown origin shall be promptly and thoroughly investigated by the organization management. c. The individual conducting the investigation will, at a minimum: i. review the resident's medical record to determine events leading up to the incident. ii. Interview the person(s) reporting the incident. iii. Interview any witnesses of the incident. iv. Interview the resident (as medically appropriate). v. Interview the resident's attending physician to determine the resident's current mental status. vi. Interview staff members (on all shifts) who have had contact with the resident during the period of the alleged incident. vii. Interview the resident's roommate, family members, and visitors. viii. Interview other residents to whom the accused employee provides cares or services and ix. Review all events leading up to the alleged incident. k. The results of the investigation will be documented.</p> <p>R1's Progress Note, dated 2/25/25 and signed by V4/LPN (Licensed Practical Nurse), documents During transfer from wheelchair to stretcher this nurse observed a large circular red/purple bruise to (R1's) left mid back. Emergency Medical Technicians were made aware that (R1) has been on Eliquis (blood thinning medication) but it was placed on hold per (V6/Nurse Practitioner) and that (R1) experienced no recent falls that this nurse was aware of other than the one on 2/7/25. This same progress note documented V4 notified V2/DON (Director of Nursing) of the bruise located to R1's left mid back.</p> <p>On 5/2/25 at 2:15PM V4/LPN stated she observed a large purplish/red bruise approximately 6 inches in diameter to R1's left mid back for the first time when sending R1 out to the hospital. V4 stated she was unable to measure the bruise to R1's back because R1 was being transferred out to the local hospital. V4 stated, I reported the bruise to (V2/Director of Nursing) because it had appeared overnight, and I did not know what caused it. I let (V2) know I did not believe it was due to (R1's) fall, because the fall had occurred like two to three weeks prior to the bruise appearing. There was no rhyme or reason to the bruise appearing to (R1's) back.</p> <p>As of 5/2/25, the facility's investigations for allegations of abuse did not contain documentation that R1's 2/25/25 injury of unknown origin was investigated as potential abuse.</p> <p>On 5/2/25 at 2:28 PM V2/DON stated V4 did report R1's bruise (injury of unknown origin) to V2. V2 stated an investigation was never initiated for the bruise/injury of unknown origin located on R1's left mid back and should have been.</p> <p>On 5/3/25 at 10:03 AM V1/Administrator verified an investigation was never initiated for the bruise/injury of unknown origin to R1's left mid back and should have been.</p>		