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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 145938 | (X2) MULTIPLE CONSTRUCTION A. Building B. Wing | (X3) DATE SURVEY COMPLETED 04/16/2025 |
| NAME OF PROVIDER OR SUPPLIER Parkshore Estates Nursing & Rehab | | STREET ADDRESS, CITY, STATE, ZIP CODE 6125 South Kenwood Chicago, IL 60637 | |

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) |
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| <p>F 0584</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</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>**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 (R10, R11 and R12) were free from urine on the floor and urine odors.</p> <p>Findings include:</p> <p>R10 is a [AGE] year old with diagnosis including but not limited to: Encounter for attention to other artificial openings of urinary tract, personal history of malignant neoplasm of bladder, anxiety disorder, dementia and obstructive and reflux uropathy.</p> <p>R11 is a [AGE] year old with diagnosis including but not limited to: Essential hypertension, schizophrenia, weakness, bipolar disorder and unspecified fracture of right femur.</p> <p>R12 is [AGE] year old with diagnosis including but not limited to: overactive bladder, bilateral inguinal hernia, weakness, chronic obstructive pulmonary disease and bipolar.</p> <p>During investigation on 4/10/25 at 12:58 PM, Surveyor noted a strong odor of urine outside of residents (R10, R11 and R12) room.</p> <p>Surveyor observed R10 sitting in bed with urine leaking from his urostomy site and a puddle of yellow fluid on the floor next to his (R10's) bed.</p> <p>Surveyor inquired about the odor in the room.</p> <p>On 4/10/25 at 1:00 PM, V5 (LPN/ Licensed Practical Nurse) said, that she smelled a strong odor of urine in the room and would get housekeeping to clean the urine from the floor.</p> <p>On 4/14/25 at 12:32 PM, Surveyor noted a strong urine odor outside of R10's bedroom. R10 was observed sitting in his bed with a puddle of yellow fluid on the floor next to his (R10's) bed.</p> <p>On 4/14/25 at 12:36 PM, V15 (Registered Nurse) said that he would inform housekeeping of the urine on the floor near R10's bed.</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 0584</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p> | <p>On 4/16/2025 at 10:37 AM, V13 (Housekeeping Director) said, The housekeepers' duties includes cleaning and mopping the residents' rooms daily. If there is urine on the floors, we are supposed to get it up. A CNA (Certified Nurse Assistant) or a Nurse should report to us if there is a urine spill in the floor. The nursing staff can also get the spill up if the housekeeper is on lunch and notify us to sanitize the area later.</p> <p>When asked about the importance of spills such of bodily fluids being cleaned immediately, V13 said, Urine on the floor could be a slip hazard and it poses infection control issues. It's important to maintain a nice, clean environment for the resident. We try our best to keep the urine odor down in that room but the residents have a habit of urinating on the floors.</p> <p>Surveyor inquired about possible interventions for a resident with behaviors of urinating on the floor.</p> <p>On 4/16/2025 at 11:30 AM, V3 (DON/ Director of Nursing) said, We could possibly make more frequent rounding, get the families involved and get the psychiatrist involved with the behaviors.</p> <p>On 4/16/2025 at 12:50 PM, V1 (Administrator) said, I do rounds at least three times daily and I smell the urine even after it is addressed. I see R1's brief soaked and he says that he doesn't need help. He (R10) makes it difficult to keep it clean.</p> <p>Facility Census Report dated 4/10/2025 documents R10, R11 and R12 as roommates.</p> <p>Facility document titled Housekeeper Job Description documents, under the direction of the Director of Housekeeping, the Housekeeper is responsible for cleaning resident rooms and other interior and exterior facility areas and assisting in maintaining a clean and attractive environment for the residents.</p> <p>Facility document titled Licensed Practical Nurse/ Registered Nurse Job Description documents, inspects the nursing service treatment areas daily to ensure that they are maintained in a clean and safe manner.</p> <p>Facility policy titled General Cleaning Policies and Procedures documents, to provide a clean, attractive and safe environment for residents, visitors and staff.</p> | | |

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| <p>F 0691</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p> | <p>Provide appropriate colostomy, urostomy, or ileostomy care/services for a resident who requires such services.</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 urostomy supplies for one resident (R10) were available. This failure resulted in R10's lower abdomen and bedroom floor being saturated with urine.</p> <p>Findings include:</p> <p>R10 is a [AGE] year old with diagnosis including but not limited to: Encounter for attention to other artificial openings of urinary tract, personal history of malignant neoplasm of bladder, anxiety disorder, dementia and obstructive and reflux uropathy.</p> <p>R10 has a BIMS (Brief Interview of Mental Status) score of 15, which indicates cognitively impaired.</p> <p>During investigation on 4/10/25 at 12:58 PM, Surveyor noted a strong odor of urine outside of resident's (R10, R11 and R12) room.</p> <p>Surveyor observed R10 sitting in bed with urine leaking from his urostomy site and a puddle of yellow fluid on the floor next to R10's bed.</p> <p>Surveyor requested a urostomy bag from R10's nurse (V5).</p> <p>On 4/10/25 at 1:00 PM, V5 (LPN/ Licensed Practical Nurse) entered R10's and said that R10 had not requested a urostomy bag from her.</p> <p>V7 (Nurse Supervisor) said that R10 had told him (V7) that he (R10) needed a new colostomy bag, but V7 had placed an order for the colostomy bags on that day (4/10/25).</p> <p>On 4/10/25 at 1:03 PM, V7 said that R10 was completely out of urostomy bags.</p> <p>On 4/14/25 at 12:32 PM, Surveyor noted a strong urine odor outside of R10's bedroom.</p> <p>R10 was observed sitting in his bed with his urostomy bag detached.</p> <p>On 4/14/25 at 12:36 PM, V15 (Registered Nurse) brought a colostomy bag to R10's room.</p> <p>R10 said, I can't use this bag. I've been waiting for weeks for the right bag.</p> <p>On 4/14/25 at 12:40 PM, V16 (LPN) said that she was R10's nurse and that she (V16) had asked nurse management to get urostomy bags for R10 from another facility earlier.</p> <p>Surveyor asked if R10 could use the colostomy bag. V16 said that R10 could not use the colostomy bag in place of the urostomy bag and that R10 was completely out of urostomy bags.</p> <p>(continued on next page)</p> |

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| <p>F 0691</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p> | <p>On 4/14/2025 at 3:05 PM, V12 (Central Supplies) said, I place orders every Tuesday. The nurse tells me beforehand if they are running low on the urostomy bags. I was not made aware. V7 (Nurse Supervisor) told me on last week Thursday that we needed the bags, but we were trying to find the correct size.</p> <p>On 4/16/2025 at 12:50 PM, V1 (Administrator) said that R10 should not run out of urostomy bag or incontinent supplies.</p> <p>R10's Order Summary Report documents the following active orders: change suprapubic bag as needed every shift; empty urinary bag every shift and record output every shift; urostomy care as needed for infection control and hygiene; urostomy care every shift for maintenance.</p> <p>R10's Care Plan Report documents, potential for ulceration, infection and/or complications of the ostomy site; perform ostomy care daily and PRN (as needed) according to physician order; maintain the ostomy site to keep it clean and dry to prevent irritation; R10 has a self-care deficit and requires assistance with ADLs (activities of daily living).</p> <p>Facility document titled Licensed Practical Nurse/ Registered Nurse Job Description documents, ensures that an adequate stock level of medications, medical supplies, equipment, etc., is maintained on our unit/ shift at all times to meet the needs of the residents.</p> <p>Facility policy titled Urostomy documents, a urostomy patient has no voluntary control of urine, and a pouching system must be used and emptied regularly; a urostomy pouch should be changed every three to seven days. It is best to change it before it leaks; document procedure to include any pertinent findings; report to physician as indicated.</p> |