

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 146063	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 05/23/2024
NAME OF PROVIDER OR SUPPLIER Allure of Walnut		STREET ADDRESS, CITY, STATE, ZIP CODE 308 South Second Street Walnut, IL 61376	

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 0757</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Ensure each resident's drug regimen must be free from unnecessary drugs.</p> <p>32189</p> <p>Based on record review and interview, the facility failed to identify the indication for the prolonged duration of use for 1 of 1 (R22) resident with a prescribed antibiotic maintenance dose in a sample of 12 residents.</p> <p>Findings include:</p> <p>On 11/24/22, R22's Physician ordered an Antibiotic for maintenance dose for a history of frequent of Urinary Tract Infections with no stop date.</p> <p>On 2/22/24, R22's Careplan documents (R22) has developed a UTI (Urinary Tract Infection). Doctor ordered no stop date and would like R22 to be on a maintenance dose of Antibiotic therapy.</p> <p>On 8/21/23, R22's Physician ordered an Antibiotic for treatment of a Urinary Tract Infection for 7 days.</p> <p>On 5/7/24, R22's Physician ordered an Antibiotic for treatment of a Urinary Tract Infection for 10 days.</p> <p>On 5/22/24 at 11:45 AM, V3 (Infection Control Preventionist) stated I don't know why R22 is on it (maintenance Antibiotic). It (maintenance Antibiotic) hasn't stopped R22 from getting UTI's.</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 0759</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Ensure medication error rates are not 5 percent or greater.</p> <p>32061</p> <p>Based on observation, interview and record review, the facility failed to administer medications as ordered by the physician for three residents (R4, R27 and R31) on the sample of 10 residents reviewed for medication pass. This failure resulted in four medication errors out of thirty- one opportunities for error, for a 21.9% medication error rate.</p> <p>FINDINGS INCLUDE:</p> <p>The facility policy, Medication Administration, dated (7/1/23) directs staff, Medications are administered by licensed nurses, or other staff who are legally authorized to do so in this state, as ordered by the physician and in accordance with professional standards of practice, in a manner to prevent contamination or infection. Ensure the six rights of medication administration are followed: right resident, right drug, right dosage, right route, right time and right documentation.</p> <p>1. R4's current Physician Order Sheet, dated May 2024 includes the following medications: Baclofen 10 MG (1/2 tab) one tablet twice daily; Eliquis 5 MG one tab twice daily; Glucophage 500 MG one tablet two times daily with food; Tylenol 500 MG one tablet two times daily; Lyrica 100 MG one capsule each evening and Carboxymethylcellulose Sodium Solution instill two drops in both eyes two times daily.</p> <p>On 5/20/24 at 3:46 PM, V4/Licensed Practical Nurse (LPN) prepared to administer medications for R4. V4/LPN administered one each of Baclofen, Eliquis, Glucophage, Tylenol and Lyrica to R4. V4/LPN then administered one drop of Carboxymethylcellulose Sodium Solution into both of R4's eyes. Upon exit from R4's room, V4/LPN confirmed the instructions on the bubble pack for Glucophage included the following instructions: Take with food. V4/LPN also confirmed that R4 should have received two drops of Carboxymethylcellulose in each eye.</p> <p>2. R27's current Physician Order Sheet, dated May 2024 includes the following medications: Tylenol 325 MG two tablets twice daily; Allopurinol 100 MG one tablet twice daily; Aspirin 81 MG one tablet daily; Diltiazem ER 240 MG one capsule daily; Vasotec 20 MG one tablet daily; Glipizide 5 MG one tablet daily; Potassium Chloride ER (Extended Release) 10 MEQ (Milliequivalents) one tablet two times daily and Olopatadine HCL (Hydrochloride) 0.2% two drops to both eyes in the morning.</p> <p>On 5/21/24 at 7:56 AM, V5/Registered Nurse (RN) prepared to administer medications for R27. V5/RN administered one each of Allopurinol, Aspirin, Diltiazem, Vasotec, Glipizide, Potassium Chloride and two tablets of Tylenol. V5/RN then administered one drop of Olopatadine HCL (Hydrochloride) into both of R27's eyes. Upon returning to the medication cart, V5/RN confirmed that R27 should have received two drops of Olopatadine HCL in each eye.</p> <p>3. R31's current Physician Order Sheet, dated May 2024 includes the following medications: Cranberry Capsule 200 MG one capsule twice daily; Potassium Chloride Extended Release 20 MEQ (Milliequivalents) one tablet two times daily; Sucralfate 1 GM (Gram) one tablet before meals and at bedtime, take 2 hours before or 2 hours after other medications.</p> <p>(continued on next page)</p>		

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<p>F 0759</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>On 5/20/24 at 3:30 PM, V4/Licensed Practical Nurse prepared to administer medications for R31. V4/LPN administered one capsule of Cranberry 200 MG, and one tablet each of Potassium Chloride 20 MEQ and one capsule Sucralfate 1GM. Upon exit from R31's room, V4/LPN confirmed the instructions on the bubble pack for Sucralfate included the following instructions: Take two hours before or two hours after other medications.</p>

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<p>F 0881</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Implement a program that monitors antibiotic use.</p> <p>32189</p> <p>Based on record review and interview, the facility failed to identify, track, monitor and analyze for trends in data for 2 of 2 (R3, R22) in a sample of 12 residents.</p> <p>Findings include:</p> <p>The Infection Prevention and Control Policy and Procedure policy, dated 7/28/21, documents an Infection Criteria Checklist includes the date the infection was first suspected, evidence the infection was or was not present upon admission, what infection is present, testing, treatment, outcome and follow-up. The Infection Prevention and Control Monthly Log will be completed and used to track infections in the facility and noting trends that may be present.</p> <p>R3's Physician's Orders dated 4/4/24, 4/10/24 and 4/18/24 documents an Antibiotic was ordered for treatment of a Urinary Tract Infection.</p> <p>The Infection Prevention and Control Monthly Log dated April 2024 lacked documentation of R3's Urinary Tract Infection and the other required data.</p> <p>R22's Physician's Orders dated 11/22/23 documents an Antibiotic was ordered for an Upper Respiratory Infection.</p> <p>The Infection Prevention and Control Monthly Log dated November 2023 lacked documentation of R22's Upper Respiratory Infection and the other required data.</p> <p>On 5/22/24 at 12:30 PM, V3 (Infection Control Preventionist) reviewed the November 2023 and April 2024 Infection Prevention and Control Monthly Logs and stated R3 and R22's infections were not documented on the log and should have been. V3 stated I must have just over looked them (R3 and R22's infections).</p>