

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 146102	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 05/23/2024
NAME OF PROVIDER OR SUPPLIER Manor Court of Freeport		STREET ADDRESS, CITY, STATE, ZIP CODE 2170 West Navajo Drive Freeport, IL 61032	

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 - 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>41639</p> <p>Based on observation, interview, and record review, the facility failed to provide treatment per physician's orders for 1 resident (R1) following a fall with injury. This applies to 1 of 3 residents reviewed for falls in the sample of 7.</p> <p>The findings include:</p> <p>R1's electronic face sheet, printed on 5/23/24, showed R1 has diagnoses including but not limited to traumatic subarachnoid hemorrhage, urinary tract infection, muscle weakness, and osteoarthritis.</p> <p>R1's facility assessment, dated 3/28/24, showed R1 has mild cognitive impairment.</p> <p>R1's local hospital after visit summary, dated 5/16/24, showed, Patient instructions: right thumb fracture-+proximal MCP (metacarpophalangeal joints) fracture, thumb splint .keep both arms elevated on pillows for swelling.</p> <p>R1's physician's orders for May 2024 showed no orders for R1 to have a splint or her arms elevated.</p> <p>On 5/23/24 at 8:57AM, R1 was sitting up in her wheelchair with her hands in her lap. R1 did not have a splint on either of her hands, nor did she have her arms elevated on a pillow. At 11:28AM, R1 was in the same position and stated, I think I left my splint at home. My hand is really sore-especially the fingers. My hands feel like the skin is tight.</p> <p>On 5/23/24 at 11:52AM, V5 (Registered Nurse) stated, (R1) doesn't have a splint on today. The therapy department actually brought it to my attention that she was supposed to be wearing one, but I didn't get any information about it in report today. I am an agency nurse, so I rely on the report and the resident's chart to tell me what needs to be done for each resident. I don't see any orders in (R1's) chart either for the pillows or her splint. Looking at the hospital discharge instructions, there should be orders in her chart for a splint and upper extremity elevation to aide in healing.</p> <p>On 5/23/24 at 12:08PM, V2 (Director of Nursing) stated, Whatever instructions are on (R1's) discharge papers should be entered into her chart as a physician's order. It is important to follow these instructions to aide in the healing process and promote comfort for (R1). This was a mistake by the nurse that admitted her back to the facility and these interventions should have been in place.</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 - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>On 5/23/24 at 12:42PM, V2 stated the facility does not have a policy regarding physician's orders, but that it is standard nursing procedure to enter physician's orders upon a resident's return from the hospital and to confirm those orders with the resident's attending physician.</p>		