

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: ASL510301	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 01/24/2025
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NAME OF PROVIDER OR SUPPLIER RIVERSIDE SENIOR LIFE BOURBONNAIS	STREET ADDRESS, CITY, STATE, ZIP CODE 85 E BURNS RD BOURBONNAIS, IL 60914
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A 000	Initial Comment Annual Licensure survey Section 295.4010 cited	A 000		
A4010	Section 295.4010 Service Plan This Regulation is not met as evidenced by: Section 295.4010 Service Plan Level 3 a) Based on the physician's assessment and establishment evaluation (see Section 295.4000), a written service plan shall be developed and mutually agreed upon by the establishment and the resident. (Section 15 of the Act) The establishment shall respect and accept the resident's choices regarding the service plan. b) The service plan shall be developed by: 1) The resident, resident's representative or any individual requested by the resident; 2) The manager or manager's designee; and 3) A registered nurse, if the resident is receiving nursing services or medication administration, or is unable to direct self-care. c) The service plan shall be signed and	A4010		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE _____ TITLE _____ (X6) DATE _____

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A4010	<p>Continued From page 1</p> <p>dated by all individuals involved in its development.</p> <p>d) The service plan, which shall be reviewed annually, or more often as the resident's condition, preferences, or service needs change, shall serve as a basis for the service delivery contract between the provider and the resident (see Section 295.2030). (Section 15 of the Act)</p> <p>e) The service plan shall be reviewed and revised if necessary immediately after a significant change in the resident's physical, cognitive, or functional condition (see Section 295.4000).</p> <p>f) Based on the physician's assessment, the service plan may provide for the disconnection or removal of any kitchen appliance. (Section 15 of the Act)</p> <p>g) Service plans shall address:</p> <p>1) The level of service the resident is receiving, including:</p> <p>A) assistance with activities of daily living;</p> <p>B) dietary needs, if the establishment provides therapeutic diets; and</p> <p>C) special accommodations for the resident;</p>	A4010		

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A4010	<p>Continued From page 2</p> <p>2) The amount, type, and frequency of health-related services needed by the resident;</p> <p>3) Staff responsible for the provisions of the service plan;</p> <p>4) Any risk being negotiated; and</p> <p>5) Whether the resident requires medication reminders, supervision of self-administered medication, or medication administration.</p> <p>h) The service plan shall include all support services provided or arranged for by the establishment.</p> <p>This requirement was not met as evidenced by:</p> <p>Based on record review and interview the establishment failed to revise the service plan by not:</p> <p>-addressing fall incidents for 2 of 4 residents (R1, R5) reviewed for falls. R1 had a total of 8 unwitnessed falls, 4 fall incidents were not addressed with revised interventions. R5 had a witnessed fall incident and sustained a fracture to the left arm and nose. The service plan does not address monitoring of the cast to the left arm, application and removal of the immobilizer to the right leg a facial bruising sustained;</p> <p>-addressing specific interventions for one resident</p>	A4010		

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A4010	<p>Continued From page 3</p> <p>(R1) who eloped out of the establishment and how this resident will be monitored for safety thereafter.</p> <p>These failures have the probability to affect all residents who reside in the assisted living and memory care unit.</p> <p>Findings include:</p> <p>1. R1 is a 92 year old resident who moved into the establishment 8/10/24. R1 has diagnoses including Alzheimers disease, Major depressive disorder and Anxiety disorder.</p> <p>The progress notes from July 2024 through January 2025 were reviewed and show the following related to falls:</p> <p>-7/1/2024: R1 was in her bathroom as R1 turned to use her walker R1 got off balance and landed on the floor. Complaint of severe pain to left hip. Family made aware. The daughter transferred R1 to Ortho appointment that was already scheduled</p> <p>-9/2/2024 (05:04): R1 found on the floor on bottom next to bed - R1 was attempting to get ready for bed and missed her wheelchair and ended up on the floor without any injuries.</p> <p>-9/8/2024 (05:20) R1 noted sitting on buttocks on floor next to bed. R1 stated that she was trying to make her bed without non-skid footwear and lost balance and fell onto her bed. R1 then stated that she attempted to get up off of the bed and was too weak so she slid herself down onto the floor. Denies hitting head, denies any pain or injuries. Will continue to monitor.</p> <p>-12/1/2024 (14:13): R1 had a unwitnessed fall in her bedroom. R1 observed sitting on the floor</p>	A4010		

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A4010	<p>Continued From page 4</p> <p>next to recliner. Wheelchair on its side and potted plant broken. Resident assisted to recliner per staff. Fall protocol initiated.</p> <p>-12/4/2024 (16:28): CNAs entered R1's room to bring R1 to dinner, found R1 sitting on the floor in-between her wheelchair and recliner. CNAs assisted to a standing position and in to wheelchair. R1 stated to the nurse that "the therapist showed me a new way to transfer, so I thought I'd try it out."</p> <p>-12/13/2024 at 7:35am, staff entered R1's room, found R1 sitting on the carpeted floor next to her bed. Nurse entered room to observe R1 sitting on the floor, legs out in front of her, sitting up at 90 degree angle, wearing night gown, no socks, wheelchair next to her and wheels locked. R1 stated that she got up to use the bathroom and slipped down to her buttocks. R1 has 1" x 1.5" skin tear to left elbow. Small flap of skin replaced over wound bed.</p> <p>-1/18/2025 (21:28): R1 sustained an unwitnessed fall at approximately 8:15pm. CNA found R1 on the floor next to the bed with wheelchair nearby. Neurological status remains at baseline.</p> <p>R1 had a total of 8 documented falls.</p> <p>The service plan dated 8/12/24 was not revised with interventions to address the fall incidents that occurred on 7/1/24, 9/8/24, 12/4/24 and 12/13/24</p> <p>2. The Incident/Accident report dated 8/11/24 at 10:30pm (elopement) shows R1 was outside the building next to south west door, escorted back in bldg. R1 found outside of building. No visible injury noted, denied complaint of pain, no</p>	A4010		

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A4010	<p>Continued From page 5</p> <p>discomfort. R1 placed in memory care. PCP (primary care physician) and family made aware.</p> <p>On 1/24/25 at 12:40pm E10 (executive director) stated, "R1 lived in AL (assisted living) at the time. That's why R1 went back to memory care. When R1's daughters would take her to her appointments, they used that door. R1 was moved to memory care that night. The family was in agreement of the move. The doors in AL don't alarm but when they close you can't get back in. A resident's family member was leaving saw R1 and brought her back in. For AL there is only 1 staff. A nurse and 3 CNAs for the whole building. The one nurse floats."</p> <p>The most recent service plan showed only one intervention, R1 is wearing a wander guard bracelet is mentioned. The history of elopement is not addressed with specific interventions as well as how R1 is going to be monitored for safety.</p> <p>2. The progress note dated 6/17/2024 shows R5 had a fall in the entry way of the establishment at approximately 12:30pm. R5 fell face first on the tile floor. R5 was seen leaving the cafeteria with a drink in her right hand. R5 apparently lost her footing, tripped and fell. R5 lost significant amount of blood through her nose, EMS (emergency medical service) was called immediately. The nose was where R5 was losing the significant amount of blood. Staff were unable to get a blood pressure due to the left arm being very painful and displaced.</p> <p>The incident report dated 6/17/24 shows R5 sustained a mildly displaced fracture of nasal bones, left humerus oblique or spiral fracture fracture of mid humerus , demonstrating likely</p>	A4010		

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A4010	<p>Continued From page 6</p> <p>lateral and posterior displacement of distal fracture, mild angulation at fracture site.</p> <p>The service plan dated 4/30/24 was revised after the fall incident that R5 experienced on 6/17/24 with injury. However interventions for the cast care and monitoring to the left arm, application of the immobilizer to right leg and facial bruises are not addressed.</p> <p>On 1/24/25 at 12:45pm E10 executive director) stated, "I saw it as it was happening. R5 lost her footing. R5 had a large area of bruising to her face."</p>	A4010		