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Special Report: Blemishes on Nursing Home's Report Card

In final part, Patch examines how quality of care can hurt a facility's rating.

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A patient at a nursing home in Highland Park suddenly grabbed his throat and started to cough.

His body shook as he threw his head back and forth. When a staff member performed the Heimlich maneuver, a black plastic object was dislodged from the man's throat.

This episode unfolded in March at the [ManorCare](#), and it was recently made public via a federal report that rates nursing homes.

ManorCare is among three for-profit facilities in Highland Park and Deerfield that receives a grade from the [Centers for Medicare & Medicaid Services](#) (CMS), a U.S. Department of Health and Human Service agency that oversees the program.

The CMS notes that more than 1 million people enter a nursing home or similar facility in the U.S. each year. This is occurring as the number of Americans 65 or older is expected to double by 2030.

So the comparison system, established in 2008, can be a useful tool to help potential nursing home residents and their families evaluate the long-term care facilities in their area as well as nationwide.

Of the three local nursing homes, ManorCare falls in the middle, getting three of five stars. [Abbott House](#), also in Highland Park, received five stars and Whitehall North in Deerfield got two stars.

Patch tried to reach Whitehall North and Abbott House several times for comments but they declined to return calls.

Health inspections, staffing levels and self-reported quality measures are the evaluating criteria in getting the top rating of five stars, meaning "much above average." Below that is four stars, "above average," three, "about average;" two, "below average" and one, "much below average."

The March incident at ManorCare is an example of issues taken into consideration in the rating process. Patch decided to scratch beyond the surface to check out the reported circumstances.

Baffling situation

In the ManorCare case, the kitchen staff confirmed the dessert from the night before was prepared using a bag of whipped cream that contained a black pastry tip. But employees claimed there were no pastry tips missing.

They also were confused as to how the resident who required the Heimlich maneuver obtained the dessert the day after it was served, especially since it required refrigeration.

"Unfortunately, that's a situation that happens regularly," said [Jonathan Rosenfeld](#), a lawyer in Chicago who represents individuals allegedly abused at long-term care facilities.

"It's not the type of case I would pursue or encourage someone to pursue in the form of a lawsuit," he said of the below case.

ManorCare's operators alleged the patient's family brought in food for the resident but the facility failed to investigate thoroughly where the plastic object actually came from.

The nursing home also failed to report the incident within the five-day period mandated by the [Illinois Department Of Public Health](#) (IDPH), which passes such information to CMS for its rating database.

"In most care facilities there are errors that are made," Rosenfeld said. "The goal of the facility should be to minimize the errors and record when there is an error and try to learn from it."

Like another incident, where a resident was sent to a dialysis center without a jacket during freezing weather in March 2009. Upon arrival to the clinic, the center's staff alerted ManorCare of the missing jacket and had it sent over for the return trip.

Rosenfeld said these are unfortunate mistakes that happen and unless it becomes a chronic issue, there is not much a family can do.

Drawing the line

But when do all of these mistakes add up to a chronic issue?

According to a state report, a 74-year-old woman was admitted to [Whitehall North](#) in Deerfield in 2009 with renal failure, diabetes and pancreatitis. Her care plan noted she was also at risk of getting bedsores.

The fact that the woman also was incontinent was later added to the report. About two weeks later, staff recorded she had a stage-two pressure sore but no remedies were documented.

When officials went to interview the patient, she said she was incontinent because assistance was slow to arrive to provide bathroom service. The resident also said she was not turned enough to prevent bedsores and the staff didn't provide her with enough pillows.

To substantiate her story, the woman's husband conducted an experiment that was included in the state report. He timed how long it took the Whitehall North staff to respond to his wife after she pressed her call button. According to the report, it took 30 minutes for an employee to show up, which was too long of an interval for the incontinent resident.

When a nurse was questioned about the patient's incontinence, she said the resident had decreased mobility and sat in one position for too long.

Wider data access

Organizations such as the [National Consumer Voice for Quality Long-Term Care](#) are trying to make complaints and other data readily available to families seeking information about a specific nursing home. Also a cottage industry has developed around providing facts about care facilities, with [HealthGrades](#) and [CiteHealth](#) among the players.

[IDPH's online site](#) offers a wealth of information, including reported violations, about long-term care facilities across the state.

Advocates say researchers soon may be able to obtain detailed inspection reports online, so they can see specific incidents that have occurred throughout the year.

Editor's Note: Patch started its in-depth look into the three local nursing homes in a two-part series. [Click here for first installment.](#)

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