Illinois Department of Public Health FORM APPROVED STATEMENT OF DEFICIENCIES (X1) PROVIDER/SUPPLIER/CLIA (X2) MULTIPLE CONSTRUCTION AND PLAN OF CORRECTION (X3) DATE SURVEY IDENTIFICATION NUMBER: A. BUILDING: \_ COMPLETED C JL6000467 B. WING 01/05/2022 NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE 21020 KOSTNER AVENUE **GENERATIONS AT APPLEWOOD** MATTESON, IL 60443 (X4) ID PREFIX SUMMARY STATEMENT OF DEFICIENCIES PROVIDER'S PLAN OF CORRECTION (EACH DEFICIENCY MUST BE PRECEDED BY FULL (X5) COMPLETE **PREFIX** (EACH CORRECTIVE ACTION SHOULD BE REGULATORY OR LSC IDENTIFYING INFORMATION) TAG TAG CROSS-REFERENCED TO THE APPROPRIATE DATE DEFICIENCY) S 000 **Initial Comments** S 000 Facility Reported Incident IL141867 S9999 Final Observations S9999 Statement of Licensure Violations: 300.3210f) 300.3240a) Section 300.3210 General The facility shall make reasonable efforts to prevent loss and theft of residents' property. Those efforts shall be appropriate to the particular facility and may, for example, include, but are not limited to, staff training and monitoring, labeling property, and frequent property inventories. (Section 2-103 of the Act) Section 300.3240 Abuse and Neglect An owner, licensee, administrator, employee or agent of a facility shall not abuse or neglect a resident. These requirements are not met as evidenced by: Based on interview and record review the facility failed to protect a resident from misappropriation of property by staff resulting in a resident experiencing financial and identity theft and financial hardship leading to psychosocial harm. This failure applies to one resident (R1) in a total sample of 3 residents reviewed for theft. Findings include: Attachment A Statement of Licensure Violations On 01/04/2022 from 2:58PM - 4:00PM V1

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)RATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

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**FORM APPROVED** Illinois Department of Public Health STATEMENT OF DEFICIENCIES (X1) PROVIDER/SUPPLIER/CLIA (X2) MULTIPLE CONSTRUCTION (X3) DATE SURVEY AND PLANOF CORRECTION **IDENTIFICATION NUMBER:** A. BUILDING: COMPLETED C IL6000467 B. WING 01/05/2022 NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE 21020 KOSTNER AVENUE GENERATIONS AT APPLEWOOD MATTESON, IL 60443 SUMMARY STATEMENT OF DEFICIENCIES (X4) ID PROVIDER'S PLAN OF CORRECTION (EACH DEFICIENCY MUST BE PRECEDED BY FULL PRÉFIX PREFIX (EACH CORRECTIVE ACTION SHOULD BE COMPLETE REGULATORY OR LSC IDENTIFYING INFORMATION) TAG CROSS-REFERENCED TO THE APPROPRIATE TAG DATE DEFICIENCY) S9999 Continued From page 2 S9999 do so. V1 stated the facility's video footage only showed V8 going into R1's room and performing cleaning procedures and likely packing her belongings but didn't indicate what she was doing inside the room. V1 stated housekeeping staff are typically responsible for packing up resident's belongings for discharge. V1 stated normally housekeeping staff reports any valuable items found while cleaning rooms of residents who are out of the facility and turn it in to management. V1 stated V9 was officially terminated because of the incident of R1's purse being stolen. On 01/05/2022 at 11:42AM R1 stated she was reluctant to take the surveyor's call for fear of retaliation from the facility and because they had already made a false report to law enforcement on her behalf, and she wasn't sure if the surveyor's attempt to reach her was another attempt by the facility to trick her. R1 stated she has been going through hell as a result of having her purse stolen by staff at the facility. R1 stated because of the incident she didn't have her driver's license and had to replace all of her financial and Identification cards. R1 stated her church had to provide her with financial assistance because she wasn't able to acquire items she needed. R1 stated staff stole her entire purse that contained her expensive earbuds. prescription medication, identification cards as well as every credit card she had, and she can't afford to replace any of these items. R1 stated she is still being victimized because last week the offenders attempted to use the card again to purchase a game console subscription. R1 stated, the staff who stole her purse made purchases at a restaurant, a smoke shop, and a

gas station. R1 stated the offenders tried to use her cash app and chime bank card account but it was declined because those accounts had no

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belongings in the closet; V8 and V9 (Maintenance

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