PRINTED: 09/24/2023 FORM APPROVED

Illinois Department of Public Health STATEMENT OF DEFICIENCIES (X1) PROVIDER/SUPPLIER/CLIA (X2) MULTIPLE CONSTRUCTION (X3) DATE SURVEY AND PLAN OF CORRECTION IDENTIFICATION NUMBER: COMPLETED A. BUILDING: \_ B. WING IL6016901 07/19/2023 NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE: ZIP CODE 1200 N ARLINGTON HEIGHTS RD **HEALTHBRIDGE OF ARLINGTON HTS ARLINGTON HEIGHTS, IL 60004** SUMMARY STATEMENT OF DEFICIENCIES PROVIDER'S PLAN OF CORRECTION (X5) COMPLETE DATE (EACH DEFICIENCY MUST BE PRECEDED BY FULL PRÉFIX **PREFIX** (EACH CORRECTIVE ACTION SHOULD BE REGULATORY OR LSC IDENTIFYING INFORMATION) CROSS-REFERENCED TO THE APPROPRIATE TAG TAG DEFICIENCY) S 000 **Initial Comments** S 000 Annual Licensure and Recertification Survey \$9999 Final Observations S9999 Statement of Licensure Violations: 300.615e)f) Section 300.615 Determination of Need Screening and Request for Resident Criminal History Record Information e) In addition to the screening required by Section 2-201.5(a) of the Act and this Section, a facility shall, within 24 hours after admission of a resident, request a criminal history background check pursuant to the Uniform Conviction Information Act for all persons 18 or older seeking admission to the facility, unless a background check was initiated by a hospital pursuant to the Hospital Licensing Act. Background checks shall be based on the resident's name, date of birth, and other identifiers as required by the Department of State Police. (Section 2-201.5(b) of the Act) The facility shall check for the individual's name on the Illinois Sex Offender Registration website at www.isp.state.il.us and the Illinois Department of Corrections sex registrant search page at www.idoc.state.il.us to determine if the individual is listed as a registered sex offender. These REQUIREMENTS were met as evidenced by: Attachment A Statement of Licensure Violations Illinois Department of Public Health

STATE FORM

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

6899

**M3GA11** 

TITLE

If continuation sheet 1 of 6

(X6) DATE

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R23's Admission Record showed R23 was admitted to the facility on June 16, 2023. R23's

background check, ISP background check, and IDOC background check was completed on July

medical record showed R23's criminal

Illinois Department of Public Health

| STATEMENT OF DEFICIENCIES<br>AND PLAN OF CORRECTION                |   | X1) PROVIDER/SUPPLIER/CLIA (X2) MULTIPLE CONSTRUCTION IDENTIFICATION NUMBER: (X2) MULTIPLE CONSTRUCTION A. BUILDING:  |                     |  | (X3) DATE SURVEY<br>COMPLETED |            |  |
|--|---|---|---------------------|--|-------------------------------|------------|--|
|  |   | IL6016901   | B. WING             |  | 07/                           | 07/19/2023 |  |
| NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE |   |   |                     |  |                               |            |  |
| 1200 N API INGTON HEIGHTS PD                                       |   |   |                     |  |                               |            |  |
| HEALTHBRIDGE OF ARLINGTON HTS  ARLINGTON HEIGHTS, IL 60004         |   |   |                     |  |                               |            |  |
| (X4) ID<br>PREFIX<br>TAG   | SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)                  |   | ID<br>PREFIX<br>TAG | PROVIDER'S PLAN OF CORRECTI<br>(EACH CORRECTIVE ACTION SHOUL<br>CROSS-REFERENCED TO THE APPRO<br>DEFICIENCY) | LD BE COMPLETE                |            |  |
| S9999  | Continued From page 2   |   | S9999               |  |                               |            |  |
|  | 3, 2023.  |   |                     |  |                               |            |  |
|  | admitted to the facil<br>medical record shown<br>background check,  | ecord showed R35 was<br>ity on June 13, 2023. R35's<br>wed R35's criminal<br>ISP background check, and<br>sheck was completed on July   |                     |  |                               |            |  |
|  | to the facility on Jun<br>record showed R4's  | cord showed R4 was admitted<br>the 23, 2023. R4's medical<br>to criminal background check,<br>teck, and IDOC background<br>ted on July 3, 2023.   | a                   |  |                               |            |  |
|  | Manager (BOM) sta<br>checks are done by<br>that are to be done<br>check, Illinois State<br>Illinois Department of<br>The background che | t 1:14 PM, V7 Business Office ted, "Resident background our receptionist. The checks are criminal background Police website check, and of Corrections website check ecks are to be initiated within admission, no later." |                     |  |                               |            |  |
|  | "We are aware som<br>checks were done is<br>staff responsible for<br>realize they weren't<br>ensure the checks a                        | e 9:21 AM, V7 BOM stated, e of the resident background ate. We had a change in the doing the checks. We didn't getting done. We need to are done within the timeframe dents or staff at risk, in case hinal background."  |                     |  |                               |            |  |
|  | 2023, showed, "To p<br>the safety of resider<br>risk of harm posed backgrounds, Illinois  | round Screening esidents policy dated January prevent abuse and promote ats, staff, and visitors from the by residents with criminal s' long-term care facilities are a background screening on                           | 16                  |  |                               |            |  |

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b)

Each facility shall develop and implement

The resident members shall be elected to

a plan for assuring a liaison with concerned individuals and groups in the local community. Ways in which this requirement can be met include, but are not limited to, the following:

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resident census of 35.

On July 17, 2023, at 11:24 AM, V7 Business Office Manager was asked for the facility's monthly Resident Council Meeting minutes dated August 2022-July 2023. V7 stated, "We don't have a resident council or a resident council president. We have never had one here. We primarily have short-term residents here, but we

do have some long-term residents ..."

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Illinois Department of Public Health