

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>IL6004667</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING: _____	(X3) DATE SURVEY COMPLETED  <b>C</b> <b>11/14/2024</b>
NAME OF PROVIDER OR SUPPLIER  <b>KENWOOD VLGE NRSG AND RHB CTR</b>		STREET ADDRESS, CITY, STATE, ZIP CODE <b>4505 SOUTH DREXEL CHICAGO, IL 60653</b>		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
S 000	Initial Comments  Investigation of Facility Reported Incident of 8/27/2024 IL180089 - 300.690	S 000		
S9999	Final Observations  Statement of Licensure Violation: 300.690a) 300.690b) 300.690c)  Section 300.690 Incidents and Accidents a) The facility shall maintain a file of all written reports of each incident and accident affecting a resident that is not the expected outcome of a resident's condition or disease process. A descriptive summary of each incident or accident affecting a resident shall also be recorded in the progress notes or nurse's notes of that resident. b) The facility shall notify the Department of any serious incident or accident. For purposes of this Section, "serious" means any incident or accident that causes physical harm or injury to a resident. c) The facility shall, by fax or phone, notify the Regional Office within 24 hours after each reportable incident or accident. If a reportable incident or accident results in the death of a resident, the facility shall, after contacting local law enforcement pursuant to Section 300.695, notify the Regional Office by phone only. For the purposes of this Section, "notify the Regional Office by phone only" means talk with a Department representative who confirms over the phone that the requirement to notify the Regional Office by phone has been met. If the facility is unable to contact the Regional Office, it shall notify the Department's toll-free complaint registry hotline. The facility shall send a narrative summary of each reportable accident or incident	S9999		

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

TITLE

(X6) DATE

Electronically Signed

11/23/24

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S9999	<p>Continued From page 1</p> <p>to the Department within seven days after the occurrence. (Source: Amended at 37 Ill. Reg. 2298, effective February 4, 2013)</p> <p>These Requirements were NOT met as evidenced by:</p> <p>Based on interview and record review, the facility failed to report an accident with serious injury to the state survey agency within time reporting requirements. This failure affects 1 resident (R2) reviewed for injury reporting.</p> <p>Findings include:</p> <p>Review of initial facility reportable dated 8/27/2024 documents in part that R2 was noted with a laceration to the back of the head and returned later to the facility with 2 staples to the back of the head. Attached facsimile transmittal report documents in part that the initial report was submitted on 8/27/2024.</p> <p>Review of final facility reportable dated 9/4/2024 documents in part that R2 was noted with a laceration to the back of the head from hitting R2's head in R2's room and returned later to the facility with 2 staples to the back of the head. Attached facsimile transmittal report documents in part that the final report was submitted on 9/4/2024 (9 days after incident).</p> <p>On 11/12/2024 at 1:07 PM, V2 (Director of Nursing) stated that V2 completed the investigation regarding R2's head laceration. V2 stated that V2 submitted the initial report on 8/28/2024 and the final report on 9/4/2024. V2 stated that accidents with major injury are to be reported to the state survey agency within 24</p>	S9999		

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S9999	<p>Continued From page 2</p> <p>hours and then a final report sent in "within 5 business days" of the event occurring. V2 affirmed that 9/4/2024 is 5 business days after 8/28/24.</p> <p>On 11/13/2024 at 12:29, V1 (Administrator) affirmed that V1 started around 5 weeks ago and that the incident that occurred on 8/27/2024 was prior to V1's tenure with the facility. V1 stated that the state regulation for reporting accidents and incidents with major injury is 5 working days.</p> <p>Facility policy titled, "ACCIDENT/INCIDENT AND UNUSUAL OCCURANCE POLICY", dated 2/2020, documents in part, the following, " ...14.</p> <p>The Administrator/Designee is responsible for referring reportable occurrences to the respective state agencies(s) in which the facility operates. The following are examples of reportable occurrences a. ABUSE - occurrences involving physical, sexual, verbal and/or mental abuse as defined by the facility's Abuse Prevention Policy; b. UNUSUAL DEATH - a resident death that is unusual and/or the result of an accident; c. SIGNIFICANT INJURIES - examples included but not limited to: 1). Injuries sustained while a resident is physically restrained; 2). Large areas of contusions or laceration, including bruises of unknown origin of 8 cm. or larger and lacerations in a totally dependent resident or those of unknown origin requiring hospital treatment; 3). Fractures sustained by a totally dependent resident 4). Burns greater than 1st degree; 5). Choking resulting in hospitalization; 6). Other serious, unusual and/or life-threatening injury ...</p> <p>15. The results of all reportable occurrence investigations will be made to the respective Department of Health within five (5) business days of the occurrence in writing or via fax will include: a. Time, place, and nature of the</p>	S9999			

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S9999	Continued From page 3  occurrence; b. Investigative action(s); c. Other parties or agencies to whom occurrence was reported; d. Plan of action/interventions implemented to prevent similar occurrences ..."  (C)	S9999			