

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6014500	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 11/01/2024
NAME OF PROVIDER OR SUPPLIER ALDEN ESTATES OF NORTHMOOR		STREET ADDRESS, CITY, STATE, ZIP CODE 5831 NORTH NORTHWEST HIGHWAY CHICAGO, IL 60631		
(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 Annual Licensure Survey	S 000		
S9999	Final Observations Statement of Licensure Violations 300.615e) 300.615f) 300.615g) 300.625c)2) 300.625g) 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) f) 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. g) If the results of the background check are	S9999		

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

TITLE

(X6) DATE

Electronically Signed

11/15/24

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S9999	<p>Continued From page 1</p> <p>inconclusive, the facility shall initiate a fingerprint-based check, unless the fingerprint check is waived by the Director of Public Health based on verification by the facility that the resident is completely immobile or that the resident meets other criteria related to the resident's health or lack of potential risk, such as the existence of a severe, debilitating physical, medical, or mental condition that nullifies any potential risk presented by the resident. (Section 2-201.5(b) of the Act) The facility shall arrange for a fingerprint-based background check or request a waiver from the Department within 5 days after receiving inconclusive results of a name-based background check. The fingerprint-based background check shall be conducted within 25 days after receiving the inconclusive results of the name-based check.</p> <p>Section 300.625 Identified Offenders</p> <p>c) If the results of a resident's criminal history background check reveal that the resident is an identified offender as defined in Section 1-114.01 of the Act, the facility shall do the following:</p> <p>2) Within 72 hours, arrange for a fingerprint-based criminal history record inquiry to be requested on the identified offender resident. The inquiry shall be based on the subject's name, sex, race, date of birth, fingerprint images, and other identifiers required by the Department of State Police. The inquiry shall be processed through the files of the Department of State Police and the Federal Bureau of Investigation to locate any criminal history record information that may exist regarding the subject. The Federal Bureau of Investigation shall furnish to the Department of State Police, pursuant to an</p>	S9999		

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S9999	<p>Continued From page 2</p> <p>inquiry under this subsection (c)(2), any criminal history record information contained in its files.</p> <p>g) Facilities shall maintain written documentation of compliance with Section 300.615 of this Part.</p> <p>These regulations were NOT MET as evidenced by:</p> <p>Based on record review and interview, the facility failed to obtain Criminal History Information Response Process (CHIRP) reports within 24 hours of admission and failed to arrange fingerprinting within 72 hours of the positive CHIRP for 3 (R49, R52, R118) residents reviewed in the sample of 8 for Identified Offenders Program.</p> <p>Findings include:</p> <p>On 10/30/24, the following records indicated the following: R49 was admitted on 9/20/24, the CHIRP completed on 9/23/24 which was a positive HIT. Fingerprints were not ordered until 10/1/24. R52 was admitted on 2/29/24, the CHIRP completed on 4/2/24, which was a positive HIT. Fingerprints were not ordered until 4/11/24. R118 was admitted on 7/23/24, the CHIRP completed on 7/26/24, which was a positive HIT. Fingerprints were not ordered until 7/31/24.</p> <p>On 10/30/24 at 2:05 PM, V5 (Social Service Director) stated, " The Admission Director runs the CHIRP, if the CHIRP come back with a HIT, then I will send an email for the fingerprints and get consent from the resident. The fingerprints need to be ordered within 72 hours of the CHIRP results."</p>	S9999		

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S9999	Continued From page 3 On 10/31/24 at 11:00 AM, V1 (Administrator) stated, "The Admission Director is not here today. The CHIRP needs to be ran with in 24 hours of admission or prior to admission. The date at the top of the CHIRP is the date the CHIRP was ran. If the CHIRP come back with a HIT, then the fingerprints need to be ordered with in 72 hours, via email." Policy documents in part: As part of the preadmission screening process the facility will inform the resident, family member, legal representative of the following: Criminal history will be request it through Illinois State Police upon admission to the facility within 24 hours of admission. If results are a HIT facility will arrange for a fingerprint based checked or request a waiver the fingerprints must be ordered within 72 hours of the HIT/CHIRP results. (C)	S9999		