## PRINTED: 12/19/2024 FORM APPROVED

	T OF DEFICIENCIES OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION A. BUILDING: B. WING		(X3) DATE SURVEY COMPLETED 12/04/2024	
		IL6000657				
		I	EET ADDRESS, CITY, STATE, ZIP CODE		12/04/2024	
BALMOR	AL HOME			L AVENUE		
(X4) ID PREFIX TAG	CHICAGO SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)		ID         PROVIDER'S PLAN OF CO           PREFIX         (EACH CORRECTIVE ACTION           TAG         CROSS-REFERENCED TO THE           DEFICIENCY)         DEFICIENCY		N SHOULD BE COMPLE E APPROPRIATE DATE	
S 000	Initial Comments		S 000			
	Annual recertification	on and licensure				
S9999	Final Observations		S9999			
	Statement of Licen	sure Violations				
	300.661					
	Section 300.661 H Background Check					
	Worker Backgroun	bly with the Health Care d Check Act and the Health ground Check Code.				
	This requirement is	NOT MET as evidenced by:				
	failed to maintain d pre-employment so employees to deter conducted prior to	and record review, the facility ocumentation of preening of newly hired mine searches were hire. This failure has the II the 159 residents residing at				
	Findings include:					
	The 12/01/2024 fac	ility census was 159.				
	worker background (Assistant Administ checking the I**H p registries so we wil the hiring process; applicant. The pur checks is for the sa	1:16am during the healthcare check task with V10 rator). V10 stated we are ortal and the other six be in compliance. It is part of it is done prior to hiring an pose of doing the background ifety of the residents and staff. we employ have no records on				
BORATORY	ment of Public Health DIRECTOR'S OR PROVID	DER/SUPPLIER REPRESENTATIVE'S SIG	NATURE	TITLE		(X6) DATE 12/13/24

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STATEMENT OF DEFICIENCIES () AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION A. BUILDING: B. WING		(X3) DATE SURVEY COMPLETED 12/04/2024	
		IL6000657				
NAME OF F	PROVIDER OR SUPPLIER	STREET AD	DRESS, CITY, ST	TATE, ZIP CODE		
	AL HOME	2055 WES	ST BALMORA	L AVENUE		
		CHICAGO	), IL 60625			
(X4) ID PREFIX TAG	(EACH DEFICIENCY	TEMENT OF DEFICIENCIES / MUST BE PRECEDED BY FULL SC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF C (EACH CORRECTIVE ACTION CROSS-REFERENCED TO TH DEFICIENCY	ON SHOULD BE HE APPROPRIATE	(X5) COMPLET DATE
S9999	Continued From page 1		S9999			
	checking the health check and the other abuse. V10 stated to doing the six registr the facility. I (V10) r from the head office On 12/03/2024 at 1 ago, I was the one of background checks the results from the Receptionist) prints Then she (V23) will result from the I**H and the applicant's accepted, she (V23 send it to (V24 - HF office. Then she (V2 I (V10) spoke to her no hit on the registr result, she will only found on the registr knowing if the regis hire because there review. So, we ran the Review of V9 (Sche Assistant- CNA), V2 (CNA), V31 (House Housekeeping, and Care Worker Regis Correction Inmate F Registry searches i registries; and the F	V33 (Dietary Aide) Health try, the Department of Registry, and Wanted Fugitive ndicated no dates on these Public Sex Offender Registry, der Registry, and OIG Registry ed these registries were				
	The (12/03/2024) e					

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Illinois Department of Public H           STATEMENT OF DEFICIENCIES         (           AND PLAN OF CORRECTION         (		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION A. BUILDING: B. WING		(X3) DATE SURVEY COMPLETED 12/04/2024	
		IL6000657				
AME OF	PROVIDER OR SUPPLIER	STREET AI	DDRESS, CITY, S	TATE, ZIP CODE		
BALMOF	RAL HOME		ST BALMORA O, IL 60625	L AVENUE		
(X4) ID PREFIX TAG	(EACH DEFICIENCY	TEMENT OF DEFICIENCIES ' MUST BE PRECEDED BY FULL SC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF ( (EACH CORRECTIVE ACT) CROSS-REFERENCED TO T DEFICIENC'	ION SHOULD BE HE APPROPRIATE	(X5) COMPLET DATE
S9999	Continued From page 2		S9999			
	documented that V27 and V28 work PM Shift on 2nd floor, V31 works AM Shift and is assigned to all floors.					
ois Depa			t			

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