

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6008262	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 12/12/2024
NAME OF PROVIDER OR SUPPLIER WARREN PARK HEALTH & LIVING CTR		STREET ADDRESS, CITY, STATE, ZIP CODE 6700 NORTH DAMEN AVENUE CHICAGO, IL 60645		
(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 Certification and Licensure Survey	S 000		
S9999	Final Observations Statement of Licensure Violations 1 of 4 300.3210v) Section 300.3210 General v) All Cook County facilities with Colbert Class Members shall provide educational materials and information to all newly admitted Colbert Class Members within one to three days of admission, informing them of their rights and services under the Colbert Consent Decree, as prescribed by the Colbert Lead Defendant Agency. All Cook County facilities shall provide verification that the educational materials and information were given to the Colbert Class Members, as requested by a Colbert Defendant Agency. This requirement was not met as evidenced by: Based on interview and record review, the facility failed to provide verification that the educational materials and information were given to the Colbert Class Members within one to three days of admission. This failure has the potential to affect all 14 (R81, R106, R95, R54, R112, R120, R109, R103, R67, R105, R31, R83, R104, R71) Colbert Class members residing in the facility. Findings Include: On 12/09/24 at 10:42 AM, interviewed V10	S9999		

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

TITLE

(X6) DATE

Electronically Signed

12/20/24

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S9999	<p>Continued From page 1</p> <p>(Social Service Director/SSD) and stated that if [V10] thinks a resident is eligible to go back to the community, [V10] will provide some information about the Colbert program. V10 [V10] has no specific timeline on when [V10] provides information about the Colbert program. When Surveyor asked V10 to provide verification that the education materials and information were given to the Colbert Class members within one to three days of admission, V10 stated that [V10] does not document that educational materials and information are provided to the residents. V10 stated that the Colbert agency will be the one who would provide all the detailed information about the Colbert program to its members.</p> <p>At approximately 11:10 AM, the facility provided a list of residents who are Colbert Class Members and revealed there are 14 members (R81, R106, R95, R54, R112, R120, R109, R103, R67, R105, R31, R83, R104, R71) currently residing in the facility.</p> <p>(C)</p> <p>2 of 4</p> <p>300.650c) 300.650d)</p> <p>Section 300.650 Personnel Policies</p> <p>c) Prior to employing any individual in a position that requires a State license, the facility shall contact the Illinois Department of Financial and Professional Regulation to verify that the individual's license is active. A copy of the license shall be placed in the individual's personnel file.</p>	S9999		

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S9999	<p>Continued From page 2</p> <p>d) The facility shall check the status of all applicants with the Health Care Worker Registry prior to hiring.</p> <p>This requirement was not met as evidenced by:</p> <p>Based on interviews and record reviews, the facility failed to perform a Health Care Worker Registry check prior to hiring V4 (Certified Nursing Assistant), and failed to verify two registered nurses (V9, V17) and one licensed practical nurse (V18) with the Illinois Department of Financial and Professional Regulation (IDFPR) prior to hire date.</p> <p>Findings Include:</p> <p>On 12/10/24 at 12:52 PM, surveyor interviewed V15 (Human Resources) and went over employee files. V15 stated prior to hiring someone, the facility needs to check the applicant's licenses, background checks, and registries. V15 stated that [V15] forgot to run V4's Health Care Worker (HCW) Registry. V15 stated that V4's hire date was 4/15/24. V4's employee file shows HCW Registry was checked on 12/09/24.</p> <p>List of last 35 new employees document in part that V9's hire date was on 5/15/24, V17's hire date was 3/11/24, and V18's hire date was 9/26/24. Facility's Lookup Detail View from IDFPR website has a time stamp of 5/30/24 at 11:45 AM for V9 and 5/13/24 at 3:12 PM for V17 (after hire dates). V18's employee file has no records of license verification from IDFPR.</p> <p>(C)</p>	S9999		

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S9999	<p>Continued From page 3</p> <p>3 of 4</p> <p>300.625c)2) 300.625g)</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 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>This requirement was not met as evidenced by:</p> <p>Based on interviews and record reviews, the facility failed to arrange fingerprinting within 72 hours of the positive Criminal History Information Response Process (CHIRP) for five [R42, R52, R69, R120, R226] residents out of five residents who had a positive CHIRP in a total sample of five.</p>	S9999		

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S9999	<p>Continued From page 4</p> <p>Findings include:</p> <p>On 12/21/23 R42 was admitted to the facility, and provided records indicated the CHIRP completed on 12/13/23 with a positive HIT. Fingerprints was completed on 2/1/24.</p> <p>On 7/21/22 R52 was admitted to the facility, and provided records indicated the CHIRP completed on 7/20/22 with a positive HIT. Fingerprints was not completed.</p> <p>On 6/30/17 R69 was admitted to the facility, and provided records indicated the CHIRP completed on 7/7/17 with a positive HIT. Fingerprints was not completed.</p> <p>On 3/19/24 R120 was admitted to the facility, and provided records indicated the CHIRP completed on 3/11/24 with a positive HIT. Fingerprints was not completed.</p> <p>On 12/4/24, R226 was admitted to the facility, and provided records indicated the CHIRP completed on 11/27/24 with a positive HIT. Fingerprints was not ordered until 12/5/24.</p> <p>On 12/10/24 V15 [Human Resource Director] stated, "I have been responsible for IOP since 2018. I understand that if the CHIRP comes back with a HIT, the fingerprints need to be ordered within 72-hours. I did not keep some resident fingerprint documents that I should have kept."</p> <p>On 12/11/24 at 12:15 PM, V1 [Administrator] stated, "I was not aware that the fingerprints needed to be order within 72 hours of the positive CHIRP, our policy says we have five days to order fingerprints. I will go over all the documents and make correction moving forward."</p>	S9999		

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S9999	<p>Continued From page 5</p> <p>Policy document in part: Identified offender Procedure and Protocol -No date Fingerprints need to conducted within 5 business days of receiving the HIT back.</p> <p>(C)</p> <p>4 of 4</p> <p>300.1060f) 300.1060g)</p> <p>Section 300.1060 Vaccinations</p> <p>f) A facility shall document in the resident's medical record that he or she was verbally screened for risk factors associated with hepatitis B, hepatitis C, and (HIV), and whether or not the resident was immunized against hepatitis B. (Section 2-213(c) of the Act)</p> <p>g) All persons determined to be susceptible to the hepatitis B virus shall be offered immunization within 10 days after admission to any nursing facility. (Section 2-213(c) of the Act)</p> <p>This requirement was not met as evidence by:</p> <p>Based on interview and record review, the facility failed to a.) screen and document risk factors associated with Hepatitis B, Hepatitis C, and Human Immunodeficiency Virus/HIV for five (R9, R72, R75, R85, and R226) out of five residents reviewed, and b.) offer immunization within ten days after admission for residents who are susceptible to Hepatitis B. These failures could potentially affect all 125 residents residing in the</p>	S9999		

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S9999	<p>Continued From page 6</p> <p>facility.</p> <p>Findings Include:</p> <p>R9s' Facesheet documents that R9 is a 63-year-old male admitted to the facility on 02/13/2019 with diagnoses not limited to: Chronic Obstructive Pulmonary Disease/COPD, Anemia, unspecified open wound to left leg, and chronic multifocal osteomyelitis. Review of R9s' electronic health record/EHR reveals that there is no documentation to show that the facility screened R9 for Hepatitis B, Hepatitis C, and HIV.</p> <p>R72s' Facesheet documents that R72 is a 73-year-old female admitted to the facility on 01/10/2023 with diagnoses not limited to: Stage 4 Chronic Kidney Disease, Diabetes Mellitus, dependence on renal dialysis, anemia, and acquired absence of kidney. Review of R72s' electronic health record/EHR reveals that there is no documentation to show that the facility screened R72 for Hepatitis B, Hepatitis C, and HIV.</p> <p>R75s' Facesheet documents that R75 is an 83-year-old male admitted to the facility on 11/23/2023 with diagnoses not limited to: adult failure to thrive, drug induced subacute dyskinesia, muscle wasting and atrophy, fracture of left femur, and dementia. Review of R75s' electronic health record/EHR reveals that there is no documentation to show that the facility screened R75 for Hepatitis B, Hepatitis C, and HIV.</p> <p>R85s' Facesheet documents that R85 is a 60-year-old female admitted to the facility on 07/04/2024 with diagnoses not limited to: Dementia, Wernicke's encephalopathy,</p>	S9999		

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S9999	<p>Continued From page 7</p> <p>gastrostomy, vitamin D deficiency, dementia, and alcohol dependence. Review of R85s' electronic health record/EHR reveals that there is no documentation to show that the facility screened R85 for Hepatitis B, Hepatitis C, and HIV.</p> <p>R226s' Facesheet documents that R226 is an 82-year-old male admitted to the facility on 12/04/2024 with diagnoses not limited to: Stage 4 Chronic Kidney Disease, Diabetes Mellitus, Kidney cyst, and hydronephrosis. Review of R226s' electronic health record/EHR reveals that there is no documentation to show that the facility screened R226 for Hepatitis B, Hepatitis C, and HIV.</p> <p>On 12/10/2024 at 2:41PM, V3 (Infection Preventionist/IP) states she has been the IP at the facility for approximately one year. V3 states she has not performed screening and documentation for residents at risk for Hepatitis B, Hepatitis C, and Human Immunodeficiency Virus/HIV. V3 states she has not offered immunizations to residents for the Hepatitis B vaccination. V3 states she focuses more on COVID, Influenza, and Pneumonia screenings and was not made aware that she was responsible for screening residents for Hepatitis B, Hepatitis C, and HIV. V3 states if residents are not properly screened for Hepatitis B, Hepatitis C, and HIV, then this could potentially cause a spread of infection.</p> <p>On 12/11/2024 at 1:42PM, V2 (Director of Nursing/DON) states the facility does not screen or document for residents at risk for Hepatitis B, Hepatitis C, or HIV. V2 states the facility only offer the Hepatitis B vaccination if it is recommended by the residents' physician.</p>	S9999			

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S9999	<p>Continued From page 8</p> <p>Facility census dated 12/09/2024 documents that the facility census reflects 125 residents reside in the facility.</p> <p>Facility policy dated 10/2020 titled; "Hepatitis B vaccine" documents in part, "Hepatitis B vaccination is offered to all unvaccinated adults at risk for Hepatitis B/HBV infection and for adults requesting protection from HBV infection, unless the vaccine is contraindicated."</p> <p>According to the Centers for Disease Control and Prevention/CDC, "The CDC recommends hepatitis B vaccine for: all infants, all children and adolescents younger than 19 who have not been vaccinated, adults 19-59, and adults 60 and older with risk factors for hepatitis B. The CDC recommends all adults get screened for hepatitis B at least once in their lifetime through a blood test. There are also some people who should be tested more often, including: all pregnant people during each pregnancy, infants born to pregnant people with HBV infection, and people with ongoing risk for exposures."</p> <p>(C)</p>	S9999		