

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6013361	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 12/18/2024
NAME OF PROVIDER OR SUPPLIER BELLA TERRA LAGRANGE		STREET ADDRESS, CITY, STATE, ZIP CODE 4735 WILLOW SPRINGS ROAD LA GRANGE, IL 60525		
(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 November 15, 2024/IL182447	S 000		
S9999	Final Observations Statement of Licensure Violation: 300.650d) 300.661 Section 300.650 Personnel Policies d) The facility shall check the status of all applicants with the Health Care Worker Registry prior to hiring. Section 300.661 Health Care Worker Background Check A facility shall comply with the Health Care Worker Background Check Act and the Health Care Worker Background Check Code. These Requirements were NOT met as evidenced by: Based on interview and record review the facility failed to follow their abuse policy by not completing background and website checks on 1 of 3 new hires, (V3), reviewed for background checks and website checks. This applies to all residents residing in the facility. The findings include: The facility data sheet dated December 17, 2024 shows, there are 99 residents residing in the facility.	S9999		

Illinois Department of Public Health

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

TITLE

(X6) DATE

Electronically Signed

12/24/24

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6013361	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____		(X3) DATE SURVEY COMPLETED C 12/18/2024
NAME OF PROVIDER OR SUPPLIER BELLA TERRA LAGRANGE			STREET ADDRESS, CITY, STATE, ZIP CODE 4735 WILLOW SPRINGS ROAD LA GRANGE, IL 60525		
(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
S9999	<p>Continued From page 1</p> <p>On December 17, 2024 at 4:00 PM, V1 (Administrator) stated, V3 (Kitchen Aide) was hired at the facility on February 20, 2022.</p> <p>The Illinois State Police background check for V3 (Kitchen Aide) was done on December 9, 2024 (almost 3 years later). The result is "no record on file."</p> <p>The Illinois Department of Public Health (IDPH), Health Care Worker Registry (no date) with V3's (Kitchen Aide) social security number shows, "no workers found."</p> <p>Another IDPH Health Care Worker Registry (no date) shows, V3 (Kitchen Aide) is eligible to work and had a fee_app (fingerprint) on December 11, 2024.</p> <p>The website checks for V3 (Kitchen Aide) were dated as being done on December 6, 2024.</p> <p>On December 17, 2024 at 2:04 PM, V1 (Administrator) stated, when the allegation of V3 (Kitchen Aide) came about they checked his file. They could not find his "original" back ground check so she ran another one. They found out he had never been fingerprinted so they also had him fingerprinted. They should be done on date of hire.</p> <p>The facility's abuse policy dated July 12, 2024 shows, "Policy Statement: It is the policy of the facility to provide professional care and services in an environment that is free from any type of abuse, corporal punishment, misappropriation of property, exploitation, neglect, or mistreatment. The facility follows the federal guidelines dedicated to prevention of abuse and timely and thorough investigations of allegations. These</p>	S9999			

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6013361	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____		(X3) DATE SURVEY COMPLETED C 12/18/2024
NAME OF PROVIDER OR SUPPLIER BELLA TERRA LAGRANGE			STREET ADDRESS, CITY, STATE, ZIP CODE 4735 WILLOW SPRINGS ROAD LA GRANGE, IL 60525		
(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
S9999	Continued From page 2 guidelines include compliance with the seven (7) federal components of prevention and investigation. 7 steps in abuse prevention: This facility follows the federal guidelines dedicated to prevention of abuse and timely and thorough investigations of allegations. These guidelines include compliance with the seven federal components of prevention and investigation. The seven elements of prevention and investigation include: screening, training, prevention, identification, investigation, protection, reporting/response. 1. Screening: Have procedures to: Screen potential employees for a history of abuse, neglect, exploitation, misappropriation of property, or mistreating residents. This includes attempting to obtain information from previous employers and/or current employers, and checking with the appropriate licensing boards and registries.... Similarly, prior to placement in the facility, the facility will require background check of prospective consultants, contractors, volunteers, caregivers working in behalf of the facility, and students in its nurse aide training program and students from affiliated academic institutions, including therapy, social, and activity programs to care for residents to be done either the facility itself, the third-party agency, or academic institution.3. Check the Illinois Nurse Aide Registry how known as Healthcare Worker Registry upon hire, to determine reports of abuse, neglect, and theft, if staff is not a licensed staff. 4. Initiate Illinois State Police fingerprint check for non-licensed applicants or new hires within 10 days of hiring, unless the applicant had been previously finger-printed in accordance to the Illinois background Check Act...." (C)	S9999			