STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	IL6009864	A. BUILDING: _____ B. WING _____	02/20/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
WESLEY VILLAGE	1200 EAST GRANT STREET MACOMB, IL 61455

(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: 300.661 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. This Requirement is not met as evidenced by: Based on interview and record review the facility failed to conduct internet-based searches for required background checks of new-hire employees for the last year. This failure has the potential to affect all 48 residents in the facility. Federal Resident Census Report dated 2/18/25 indicates there were 48 residents in the facility. State Health Care Worker Background Checks Protocol dated 2/2023 documents: PURPOSE: To evaluate compliance with the Health Care Worker Background Check Act (225 ILCS46/) in facilities licensed by the Nursing Home Care Act [210ILCS 45/] and ensure individuals in a position that requires a State license have an active license DEFINITIONS: "Long-term care facility" means a facility licensed by the State or certified under federal law as a long-term care facility, including without limitation facilities licensed under the	S9999		

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S9999	Continued From page 1 Nursing Home Care Act, the Specialized Mental Health Rehabilitation Act of 2013, the ID/DD Community Care Act, or the MC/DD Act, a supportive living facility, an assisted living establishment, or a shared housing establishment or registered as a board and care home. A. SNF/ICF: Skilled Nursing Facility/Intermediate Care Facility B. ICD: Intermediate Care for Developmentally Disabled C. SMHRF: Specialized Mental Health Rehabilitation Facility D. AL: Assisted Living V. PROCEDURES: Health care employers shall check the Health Care Worker Registry (HCWR) before hiring an employee to determine that the individual has had a fingerprint-based record check and has no disqualifying convictions or has been granted a waiver. If the employee applicant had a FEE_APP (fingerprint) criminal history record check and remains active on the HCWR, a fingerprint-based criminal history record check does not necessitate a second check. (The Illinois State Police (ISP) shall notify the HCWR of any additional convictions associated with the fingerprints submitted.) If the individual did not have FEE_APP or is not active on HCWR, then the health care employer shall: Initiate a fingerprint check, collect the applicant's fingerprints, and transmit electronically to the ISP. . The facility must conduct Internet searches on certain web sites, including without limitation: State Sex Offender Registry, Department of Corrections' Department of Corrections' Inmate Search Engine, Department of Corrections Wanted Fugitives Search Engine, National Sex Offender Public Registry	S9999		

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S9999	Continued From page 2 Health and Human Services Office of Inspector General On 2/19/25 a list of 49 employees who were hired within the last year (dated from 2/9/24 through 1/27/25) was provided for review. On 2/20/25 at 9:45am V9, Payroll/Human Resources stated she didn't know she needed to do the internet-based background check searches for new employees. V9 stated "I just looked at the registry and if they were eligible, I stopped there. No internet-based searches for all employees hired in the last year." (C)	S9999		