

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6001671	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 06/30/2025
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NAME OF PROVIDER OR SUPPLIER CHESTNUT CORNER S C	STREET ADDRESS, CITY, STATE, ZIP CODE 905 WEST CHESTNUT STREET LOUISVILLE, IL 62858
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(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 Complaint investigation: #2555355/IL194443-no deficiencies. #2555539/IL194693	S 000		
S9999	Final Observations Statement of Licensure Violations: One of Eight 330.910 f) 330.910 - Personnel f) Facilities that care for intellectually disabled or discharged psychiatric residents shall be required to employ a social worker. The social worker shall devote at least 40 hours per week in a facility that cares for 75 or more residents. Facilities that care for fewer than 75 residents shall have a social worker who may be assigned other duties or shared with other facilities. This requirement in NOT met as evidenced by: Based on interview and record review, the facility failed to employ the services of a full time Social Worker. This has the ability to affect all 69 residents living at the facility. Findings include: On 6/28/25 at 8:10am, V1, Administrator, stated she has been in the position for over two years, and in that time the facility has never had a full time Social Worker on staff. V1 stated until January of 2025, the facility did employ a Social Work Consultant who worked one to two hours	S9999		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE _____ TITLE _____ (X6) DATE _____

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S9999	<p>Continued From page 1</p> <p>per month consulting with the Activity Director about the facility's activity program. V1 stated she was not aware the facility was required to employ a Social Worker on staff.</p> <p>A Room Roster dated 6/17/25 documented a total of 69 residents living at the facility.</p> <p>C</p> <p>Two of Eight 330.1720 c) 3) B) 4)</p> <p>330.1720 - Content of Medical Records</p> <p>c) In addition to the information that is specified above, each resident's medical record shall contain the following:</p> <p>3) An ongoing record of notations describing significant observations or developments regarding each resident's condition and response to treatments and programs.</p> <p>B) Significant observations or developments regarding resident responses to activity programs, social services, dietary services and work programs shall be recorded as they are noted. If no significant observations or developments are noted for three months, an entry shall be made in the record of that fact.</p> <p>4) Documentation of visits to the resident by a physician and to the physician's office by the resident. The physician shall record, or dictate and sign, the results of such visits, such as changes in medication, observations and recommendations made by the physician during the visits, in the record.</p>	S9999		

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S9999	<p>Continued From page 2</p> <p>This requirement was NOT met as evidenced by:</p> <p>Based on interview and record review, the facility failed to maintain complete medical records for 5 of 5 residents (R5, R9, R19, R20, R21) reviewed for content of medical records in the sample of 21.</p> <p>Findings include:</p> <p>R5's Face Sheet documented an Admission Date of 2/25/25 with diagnoses including Anxiety, Depression, and Schizoaffective Disorder.</p> <p>R9's Face Sheet documented an Admission Date of 8/19/14 with diagnoses including Schizoaffective Disorder.</p> <p>R19's Face Sheet documented an Admission Date of 9/30/09 with diagnoses including Borderline Personality Disorder and Bipolar Disorder.</p> <p>R20's Face Sheet documented an Admission Date of 9/20/24 with diagnoses including Alcohol Abuse.</p> <p>R21's Face Sheet documented an Admission Date of 8/18/21 with diagnoses including Bipolar Disorder.</p> <p>On 6/26/25 at 2:40pm, V10, Medical Staff, stated resident's psychiatric provider notes are available on the web. V10 stated she copies the notes and puts them on the resident's chart. V10 stated she does not make an attempt to obtain encounter notes from specialty medical providers.</p> <p>On 6/29/25 at 10:10am, the medical records of</p>	S9999		

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S9999	<p>Continued From page 3</p> <p>R5, R9, R19, R20, and R21 were reviewed. None of the records reviewed contained documentation from any psychiatric provider. These records also did not contain any documentation as to observations regarding resident responses to programming or overall progress and status.</p> <p>R21's Medical Notes dated 6/11/25 documented,"(R21) went to a (Colon/Rectal Surgeon) appointment today." There was no corresponding encounter note from this provider in R21's medical record.</p> <p>On 6/29/25 at 12:55pm, V1, Administrator, stated that R5 sees an outside telehealth psychiatric provider and she has asked R5 to have the provider send them copies of his evaluations, but to date, they have not. V1 stated the psychiatric provider for the other 4 residents requires they be seen at least once a year, and visits the facility monthly. V1 stated there is nowhere else that the copies of these notes would be except for the chart. V1 stated V10 is the staff member responsible for ensuring the notes make it into the chart.</p> <p>(C)</p> <p>Three of Eight 330.4240 b) 330.4240 c) 330.4240 d) 330.4240 f)</p> <p>330.4240 - Abuse and Neglect</p> <p>b) A facility employee or agent who becomes aware of abuse or neglect of a resident shall immediately report the matter to the facility</p>	S9999		

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S9999	<p>Continued From page 4</p> <p>administrator.</p> <p>c) A facility administrator who becomes aware of abuse or neglect of a resident shall immediately report the matter by telephone and in writing to the resident's representative. (Section 3-610 of the Act)</p> <p>d) A facility administrator, employee, or agent who becomes aware of abuse or neglect of a resident shall also report the matter of the department. (Section 3-610 of the Act)</p> <p>f) Resident as perpetrator of abuse. When an investigation of a report of suspected abuse of a resident indicates, based upon credible evidence, that another resident of the long-term care facility is the perpetrator of the abuse, that resident's condition shall be immediately evaluated to determine the most suitable therapy and placement for the resident, considering the safety of that resident as well as the safety of other residents and employees of the facility. (Section 3-612 of the Act)</p> <p>This requirement is NOT met as evidenced by:</p> <p>Based on interview and record review, the facility failed to document and investigate an allegation of resident to resident physical and emotional abuse for 2 of 5 residents (R4, R5) reviewed for abuse in the sample of 21.</p> <p>Findings include:</p> <p>1. R4's Face Sheet documented an Admission date of 10/25/24 with diagnoses including Major Depressive Disorder and Developmental Delay.</p> <p>On 6/17/25 at 12pm, R4 was alert and oriented.</p>	S9999		

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S9999	<p>Continued From page 5</p> <p>R4 stated in March 2025, R17 got mad at her and shoved a chair into R4's leg on purpose, and R17 threatened R4. R4 stated she was not injured during this event. R4 stated she was very upset about this and reported to V1(Administrator) "That (R17) abused her but she does not feel like (V1) took it seriously." R4 stated R17 is currently in the nursing home for rehab and she hopes R17 doesn't come back because she is afraid of R17.</p> <p>On 6/28/25 at 8:10am, V1 stated R4 had reported the incident with R17 as stated above. V1 stated she, "Had a meeting with both residents," as well as two other female residents in their social circle whom had been excluding R17 from activities. V1 stated she did not interpret this as abuse and did not investigate or document the incident, and did not report it to the Illinois Department of Public Health or local law enforcement.</p> <p>2. R5's Face Sheet documented an Admission Date of 2/25/25 with diagnoses including Schizoaffective Disorder.</p> <p>A Concern and Comment Form dated 4/14/25 documented, "Person making concern: (R5) Person taking comments: (V1) Concern or comment: (R5) approached me when I got to work this morning and said that (R18) had called him retarded and it hurt his feelings. He stated she laughed and thought it was funny. Resolution: (V1) called (R18) into the office and spoke to her about calling other people names. She said she was just playing around and didn't mean to be mean. (V1) explained that (R18) would be upset if the roles were reversed and wouldn't think it was funny. (R18) apologized and said she wouldn't do it anymore."</p> <p>On 6/24/25 at 10:25am, R5 was alert and</p>	S9999		

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S9999	<p>Continued From page 6</p> <p>oriented. R5 stated R18 frequently calls him "retarded." R5 stated this is especially hurtful to him because he was in special education in school and got called retarded. R5 stated V1 is aware but R5 feels V1 doesn't do anything about it.</p> <p>On 6/28/25 at 1:30pm, V1 stated she did not think of the above issue with R5 and R18 as verbal abuse and therefore did not investigate or report it to the Illinois Department of Public Health as such. V1 stated moving forward, she will do so. V1 stated she was only aware of the above issue and R5 had not made her aware it was ongoing.</p> <p>The facility's Abuse and Neglect Policy stated, "Facility employee or agent who becomes aware of abuse or neglect of a resident shall immediately document and report the matter to facility Administrator, or administration. Facility Administrator who becomes aware of abuse or neglect of a resident shall immediately document and report the matter by telephone and in writing to the residents representatives. Facility Administrator shall also report matter to the Department (Illinois Department of Public Health). Resident as perpetrator of abuse: Investigation shall be made on report of suspected abuse from resident to resident based on credible evidence, that a resident of a long term care facility is the perpetrator of the abuse, that residents condition shall be immediately reported, documented, and evaluated to determine the most suitable therapy and placement of said resident considering the safety of that resident as well as others and the employees of the facility."</p> <p>C</p> <p>Four of Eight</p>	S9999		

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S9999	<p>Continued From page 7</p> <p>330.785 b) 2)</p> <p>330.785 - Contacting Local Law Enforcement</p> <p>b) The facility shall immediately contact local law enforcement authorities (e.g., telephoning 911 where available) in the following situations:</p> <p>2) Physical abuse involving physical injury inflicted on a resident by another resident, except in situations where the behavior is associated with dementia or developmental disability;</p> <p>This requirement is NOT met as evidenced by:</p> <p>Based on interview and record review, the facility failed to report an allegation of resident to resident physical abuse to local law enforcement for 1 of 5 residents (R4) reviewed for abuse in the sample of 21.</p> <p>Findings include:</p> <p>R4's Face Sheet documented an Admission date of 10/25/24 with diagnoses including Major Depressive Disorder and Developmental Delay.</p> <p>On 6/17/25 at 12pm, R4 was alert and oriented. R4 stated in March 2025, R17 got mad at her and shoved a chair into R4's leg on purpose, and R17 threatened R4. R4 stated she was not injured during this event. R4 stated she was very upset about this and reported to V1 (Administrator), "That (R17) abused her but she does not feel like (V1) took it seriously."</p> <p>On 6/28/25 at 8:10am, V1 stated R4 had reported the incident with R17 as stated above. V1 stated she, "Had a meeting with both residents," as well as two other female residents in their social circle</p>	S9999		

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S9999	<p>Continued From page 8</p> <p>whom had been excluding R17 from activities. V1 stated she did not interpret this as abuse and did not investigate or document the incident, and did not report it to local law enforcement.</p> <p>(C)</p> <p>Five of Eight 330.2000</p> <p>330.2000 - Food Handling Sanitation</p> <p>Every facility shall comply with the Department's rules entitled "Food Service Sanitation" (77 Ill. Adm. Code 700)</p> <p>This requirement is NOT met as evidenced by:</p> <p>Based on observation, interview, and record review, the facility failed to maintain a sanitary kitchen and dining environment. This has the ability to affect all 69 residents living at the facility.</p> <p>Findings include:</p> <p>On 6/25/25 at 12pm, lunch service was observed in the West Building dining room. Gnats were observed in the service window, and mature flies were observed alighting on tables and residents as well as their food.</p> <p>On 6/26/25 at 9:05am, the facility's kitchen was toured with V5, Kitchen Manager. When asked if there was a cleaning schedule, V5 produced a blank document titled, "Dietary Manager Duty Roster-Weekly", and stated this form is used to document the weekly deep cleaning of the kitchen. When asked to provide the completed document from the week of 6/15/25, V5 stated she could not locate it.</p>	S9999		

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S9999	<p>Continued From page 9</p> <p>On 6/26/25 at 9:10am, two large trash cans in the service area that were uncovered and contained discarded food were are open to air. A commercial cooler was grimy on the outside, with food debris inside on shelving and in the bottom. All 5 residential refrigerator/freezers were grimy outside and had food debris inside on the bottom and on shelving. Foods inside of all units were covered and stored appropriately but not dated. The temperatures of all units were within safe range but V5 could not produce logs that the temperatures were being checked. Under the three-compartment sink was debris including food wrappers and a paper cup. There were spray bottles of cleaning chemicals sitting directly on the floor by the sink. There was a package of frozen hamburger in one of the sink compartments, immersed in water but not running water. V5 stated it was to be served at the lunch meal. V5 stated this is how she thaws meat at home and she believed it to be an acceptable practice. The freestanding deep fryer unit and basket were covered in caked on grease and grime and contained dark oil which V5 stated needed to be discarded. Underneath the work area where the fryer was sitting was a covered five-gallon bucket which V5 stated was used oil of which she did not know how to dispose. When asked if she had contacted their trash contract provider about this, V5 stated she had not but would now do so. The garbage disposal in the dish machine area was noted to contain odorous discarded food. V5 stated she started her job there in February 2025 and the disposal had been non-operational that whole time, with V1, Administrator, being aware. The commercial gas range/dual oven unit had crusted food particles around the burners as well as in the crumb drawer under the flattop. There was baked on</p>	S9999		

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S9999	Continued From page 10 food and debris in the oven, and the handles and burner controls were coated with grime. V5 stated the oven was dirty because she had never been trained on how to clean it. The stove hood and exhaust cover were coated with thick grime. There was oily grime on the corners of the freestanding stainless prep table, on the backsplash tiles behind it, on the shelving above it, and food debris on the floor under it. The floor throughout the food prep area felt sticky under the shoes. Canned and dry goods in the dry storage area were not dated and there was no evidence of stock rotation. In this area were boxes of styrofoam cups being stored directly on the floor. The surfaces of two carts in the kitchen area were grimy. A bread cart was grimy, the bread was undated with date received, and there was no evidence of stock rotation. A door in the kitchen leading to the basement stairs was open with a strong moldy odor coming from the basement. V5 stated the basement is only used to store trash bags and paper cups, and visible was a rusted rack with a box of styrofoam cups on it. All cabinet doors and their handles were noted to be grimy. On a stainless work table sat the ice machine, which was leaking with a pool of water underneath. V5 stated the unit was worked on yesterday but is still leaking. On this work table was a box of brown bananas undated and open to air, sitting next to a laundry basket full of wet, soiled rags. V5 stated the bananas needed to be thrown out but she had not gotten around to it yet. A freestanding grimy rusty metal shelving unit held open to air sleeves of Styrofoam cups. The service window adjoining the dining room had gnats and mature flies buzzing around it. The window itself as well as the surrounding molding was coated with oily grime. There was an visible oily film covering the cracked melamine coating of the sill area where trays go out. A steam table	S9999		

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S9999	<p>Continued From page 11</p> <p>sitting underneath was grimy. In the dining room were 2 large trash containers containing discarded food, uncovered, around which flies were buzzing. Flies were alighting on tables and the residents sitting at them.</p> <p>On 6/26/25 at 1:20pm, V13, Pest Control Company Owner, stated his company comes out monthly to inspect the facility and treat as needed. V13 stated nobody had informed him there was an issue with flies in the kitchen and dining areas of the West Building. V13 stated problems with flies and gnats are generally due to unsanitary conditions which promote breeding, such as uncovered, full trash cans, not washing trash cans regularly, not keeping surfaces free from food debris, and drains and disposals not being flushed and cleaned often. V13 stated he also has fly lights he could install if needed.</p> <p>On 6/28/25 at 8:10am, V1, Administrator, stated she had not been in the kitchen lately and was unaware it was not clean.</p> <p>A Room Roster dated 6/17/25 documents a total of 69 residents living at the facility.</p> <p>(B)</p> <p>Six of Eight</p> <p>330.2220 a) 1)2)3)</p> <p>330.2220 - Housekeeping</p> <p>a) Every facility shall have an effective plan for housekeeping including sufficient staff, appropriate equipment and adequate supplies. Each facility shall:</p>	S9999		

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S9999	<p>Continued From page 12</p> <ol style="list-style-type: none"> 1) Keep the building in a clean, safe, and orderly condition. This includes all rooms, corridors, attics, basements, and storage areas. 2) Keep floors clean, as nonslip as possible, and free from tripping hazards including throw or scatter rugs. 3) Control odors within the housekeeping staff's area of responsibility by effective cleaning procedures and by the proper use of ventilation systems. Deodorants shall not be used to cover up persistent odors caused by unsanitary conditions or poor housekeeping practices. <p>This requirement is NOT met as evidenced by:</p> <p>Based on observation, record review, and interview, the facility failed to maintain a clean, comfortable, homelike environment. This has the ability to affect all 69 residents living at the facility.</p> <p>Findings include:</p> <p>On 6/17/25 at 7:50am, the grounds outside the facility's West Building and East Building were both heavily littered with cigarette butts.</p> <p>On 6/17/25 at 11am, R14 was alert and oriented and was interviewed in the West Building dining room. The dining room floor was old, cracked, stained, and missing portions of tile. There were multiple flies buzzing around the room, and R14 stated flies are a big problem, probably due to residents coming in and out frequently. R14 stated they have housekeeping staff in the building two days per week. R14 stated residents are expected to keep their own rooms tidy and clean, including the floors and changing linens.</p>	S9999		

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STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6001671	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 06/30/2025
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NAME OF PROVIDER OR SUPPLIER CHESTNUT CORNER S C	STREET ADDRESS, CITY, STATE, ZIP CODE 905 WEST CHESTNUT STREET LOUISVILLE, IL 62858
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(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 13</p> <p>R14 stated some residents are compliant with this and others are not.</p> <p>On 6/17/25 at 11:25am, R7 was alert and oriented and interviewed in the West Building dining room. R7 stated they have housekeeping staff 2 days a week. R7 stated residents are expected to keep their rooms clean but acknowledged she often does not feel like cleaning. R7 acknowledged her room is not clean and there is clothing scattered everywhere. When asked what happens when she doesn't want to clean, she stated, "Nothing really happens, it just stays dirty."</p> <p>On 6/17/25 at 1:35pm, V6, Housekeeper, stated she works 2 days per week cleaning the West Building, and V6 stated there are other staff who work cleaning the East Building. V6 stated she has worked for the past year only working 2 days per week, although previously there was a full-time housekeeper for the West Building, and V1, Administrator, had stated she is going to try to hire somebody full time. V6 stated she tries to deep clean every room monthly, but a large room could take 2 days, and she does not have enough time to get all of them done. V6 stated Floor Aids are also responsible for cleaning common areas, and residents are expected to clean their rooms, which they may or may not agree to do, with their being no consequences if they don't. V6 stated some residents do not want staff cleaning their room at all, and again there are no consequences for this. V6 stated some of the residents get paid for working doing chores such as cleaning up cigarette butts in the yard, and the quality of the job they do varies greatly with the resident, and staff do not really supervise their work.</p> <p>On 6/17/25 at 2:45pm, R1 was alert and oriented.</p>	S9999		

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NAME OF PROVIDER OR SUPPLIER CHESTNUT CORNER S C	STREET ADDRESS, CITY, STATE, ZIP CODE 905 WEST CHESTNUT STREET LOUISVILLE, IL 62858
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S9999	<p>Continued From page 14</p> <p>R1 stated the facility is, "(Expletive) filthy."</p> <p>On 6/24/25 at 10:25am, R5 was alert and oriented. R5 stated the West Building needs at least one full time Housekeeper.</p> <p>On 6/24/25 at 11:15am, the bathroom in the East Building by the back exit was noted to have grimy baseboards and a urine odor by the toilet. The floor, fixtures, and drywall were all in poor condition in various states of disrepair.</p> <p>On 6/24/25 at 12:45pm, the East Building bathroom by the front entrance had grimy baseboards and floors, fixtures, and dry wall all in poor condition in various states of disrepair. There was a urine odor by the toilet.</p> <p>On 6/24/25 at 2:10pm, V7 stated she cleans the East Building three days a week and works as a Floor Aid the other 2. V7 stated Floor Aids are expected to clean and do laundry in addition to their other job duties. V7 acknowledged it is hard to keep up with cleaning, especially deep cleaning.</p> <p>On 6/24/25 at 3:45pm, V11, Vice-President of Independent Monitoring for an agency serving individuals with disabilities, stated she and other members of her staff visited the facility in April 2024, and found the resident's environmental living conditions to be worse there than when they last visited the facility approximately two years ago. V11 stated she has grave concerns about the resident's quality of life at the facility.</p> <p>On 6/25/25 at 9:45am, a large trash can was uncovered nearby while gnats were buzzing around in the kitchen service window. Multiple flies were present in the dining room, alighting on</p>	S9999		

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S9999	<p>Continued From page 15</p> <p>tables and residents.</p> <p>On 6/25/25 at 10:00am, R7 was interviewed in her room, which she shares with R15. R7 was wearing a blouse stained with food. The room smelled of body odor and dirty hair. The drywall around R7's bed was flaking and in need of repair. R7 stated her mattress is saggy and hurts her back. R7's bed consisted of a thin (about 6 inches thick) mattress with visible ground-in dirt, and was covered with loose tobacco and personal items, on a metal slatted bed with no box springs. There were no linens on the bed. The floor around and under the bed was littered with loose tobacco, debris, clothing, and shoes. There were two large laundry baskets of clothing nearby, which R7 stated she did not know if they were clean or dirty, and that's why she had not changed her blouse. R7 stated she was not sure why there were no linens on her bed. When the Surveyor asked R7 why her room was dirty and in disarray, R7 stated, "I think I need help cleaning it." R7 stated staff were supposed to clean her room yesterday but they didn't get around to it.</p> <p>On 6/25/25 at 10:25am, the bathroom on the second floor of the West Building was noted to smell of urine. The floor, fixtures, and drywall were all in various states of disrepair. The baseboards were grimy, and the window was propped open and there was no screen.</p> <p>On 6/25/25 at 10:45am, R15 was alert and oriented, lying in her bed. There was a plastic mattress cover on the mattress, but no sheet, and no box springs. There was debris on the floor, as well as in the bed, including a wadded-up towel wrapped around a Christmas ornament. R15 stated she is not sure why there is no sheets on her bed. R15 stated her room probably needed to</p>	S9999		

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S9999	<p>Continued From page 16</p> <p>be cleaned but was not sure when it would be.</p> <p>On 6/25/25 at 11:00 am, R3 was laying in his bed, alert and oriented. The room appeared clean but smelled of urine. R3's bed consisted of a rusted metal frame, with a thin mattress over top, with a plastic mattress cover, no sheets, no blankets, and no box springs. R3 stated they just cleaned his room today.</p> <p>On 6/25/25 at 12:00pm, lunch service was observed in the West Building dining room. Gnats were buzzing around the service window, and flies were alighting on tables, residents, and their food.</p> <p>On 6/25/25 at 12:05pm, V12, Activity Director, was making programming announcements in the West Building dining room as residents were eating lunch. V12 stated in the afternoon, there would be activities available in the East Building. R1 stated, "I don't want to go to the other building, they have bedbugs and I'm afraid I will get them on me," to which V12 responded, "There are bedbugs at both buildings pretty much all the time anyway." R1 responded by saying this was due to staff not cleaning often enough or thoroughly.</p> <p>On 6/25/25 at 12:15pm, both communal use bathrooms in the West Building were noted to be in poor condition, needing replacement or repair to floors, ceilings, drywall, and fixtures. Both bathrooms smelled of urine.</p> <p>On 6/25/25 at 12:35pm, R16 was alert and oriented. R16 stated, "They (staff) don't do a lot of cleaning around here." R16 stated they had bedbugs found in the West Building recently but thinks they got rid of them.</p>	S9999		

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S9999	<p>Continued From page 17</p> <p>On 6/25/25 at 12:50pm, V7 stated R13's room on the second floor of the East Building currently has a bedbug infestation.</p> <p>On 6/25/25 at 12:55pm, R13 was alert and oriented. In R13's room there were two mattresses on metal bedframes, both covered with a plastic mattress cover. There were several piles of clothing lying on the floor of the room. R13 was lying on the mattress closest to the door. R13 stated the other mattress was infested with bedbugs so staff got him a new one. That mattress was observed to have dead bedbugs as well as insect feces on the underside of the mattress. The mattress on which R13 was lying was noted to have both live and dead insects as well as insect fecal material. R13 stated despite lying on the new mattress, he is still getting bites, which R13 stated are not visible.</p> <p>On 6/25/25 at 1:10pm, V7 stated R13's room was cleaned a week ago but not deep cleaned. V7 stated the room needs to be deep cleaned, with all clothing bagged up and laundered, and R13 showered and put in an empty room, but she has not had time to do so. V7 stated she has asked V1 to make her full time in housekeeping, but there has been no response. V7 stated the issue with bedbugs is never fully resolved and she is sure they are currently probably also present in the West Building. V7 stated she feels she would need help from additional staff to properly clean R13's room and laundry.</p> <p>On 6/26/25 at 10:10am, V3, Floor Aid West Building working all three shifts, stated bedbugs are an ongoing problem in both buildings. V3 stated she has been trained on how to clean a room and process laundry with bedbug contamination, but there is not time to do it on top</p>	S9999		

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S9999	<p>Continued From page 18</p> <p>of her other duties, which include passing medications, dealing with behaviors, cooking breakfast while working third shift, cooking all meals while working on the weekend, routine cleaning, laundry, bed checks, and assisting with personal care.</p> <p>On 6/26/25 at 1:05pm, V12, Pest Control Technician, stated he services both buildings at least every month. V12 stated this consists of inspection, and then treatment as needed. V12 stated he has serviced the facility about two years, and bedbugs have always been a problem, although he feels there has been overall improvement in controlling it. V12 stated his last visit was on 6/17/25, as staff had called asking for treatment for two rooms on the West Building. V12 stated prior to his visits, he always emails the facility a preparation checklist to have the rooms ready for treatment. V12 stated when he arrived on 6/17/25, the rooms had not been prepared and thus could not be treated, so he left. V12 stated the facility called yesterday requesting inspection and treatment for all rooms, which he will do on 6/27/25. V12 stated he gave the facility special plastic mattress covers to discourage the insects feeding and told them to place them on all mattresses in the facility. V12 stated the optimal solution would be to remove all residents and all belongings and then treat the building, but it would not be feasible.</p> <p>On 6/28/25 at 8:10am, V1 stated to be fully staffed in the Housekeeping Department, there would need to be one full time Housekeeper for the East Building and one full time Housekeeper for the West Building. V1 did state she feels there is adequate time for Floor Aids to do the majority of the cleaning in addition to their other duties.</p>	S9999		

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S9999	<p>Continued From page 19</p> <p>An undated (Facility) Pest Policy stated, "(The facility's) goal is to prevent any new infestations nor the spread of pests." The policy goes on, "Any current residents who have confirmed bed bugs in their room should have all clothing and bedding items bagged up and taken to the laundry room immediately for treatment," and stated further, "If (the pest control company) is here to treat a resident room or common area for bed bugs, all clothing and bedding items are to be removed from dressers and closets, and all bedroom furniture is to be pulled away from the walls."</p> <p>A Room Roster dated 6/17/25 documented a total of 69 residents living at the facility.</p> <p>C</p> <p>Seven of Eight 330.2210a)1)4)6)7)</p> <p>330.2210 Maintenance a) Every facility shall have an effective written plan for maintenance, including sufficient staff, appropriate equipment, and adequate supplies. Each facility shall:</p> <p>1) Maintain the building in good repair, safe and free of the following: cracks in floors, walls, or ceilings; peeling wallpaper or paint; warped or loose boards; warped, broken, loose, or cracked floor coverings, such as tile or linoleum; loose handrails or railings; loose or broken window panes, and any other similar hazards. (B)</p> <p>4) Maintain the interior and exterior finishes of the building as needed to keep it attractive, clean and safe. (painting, washing and other types of</p>	S9999		

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S9999	<p>Continued From page 20 maintenance).</p> <p>5) Maintain all furniture and furnishings in a clean, attractive, and safely repaired condition.</p> <p>6) Maintain the grounds and other buildings on the grounds in a safe, sanitary, and presentable condition.</p> <p>7) Maintain the grounds free from refuse, litter, insect and rodent breeding areas.</p> <p>This requirement is NOT met as evidenced by:</p> <p>Based on observation, interview, and record review, the facility failed to maintain interior finishes, furniture, and grounds in good repair. This has the ability to affect all 69 residents living at the facility.</p> <p>Findings include:</p> <p>On 6/17/25 at 7:50am, the grounds outside the facility's West Building and East Building were both heavily littered with cigarette butts.</p> <p>On 6/17/25 at 11:00am, the West Building dining room was observed to have broken non-functional blinds and old, stained, cracked flooring.</p> <p>On 6/24/25 at 11:15am, the East Building dining room floor appeared old, chipped, and discolored, as were the walls and ceilings. In this building, the bathroom by the back exit had dirty baseboards, old, dilapidated fixtures, and a discolored floor. The bathroom by the front entrance of the east building had old, stained fixtures and the drywall needing repair. Room 2 was noted to have a beach towel in use in lieu of a curtain or blinds.</p>	S9999		

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S9999	<p>Continued From page 21</p> <p>On 6/24/25 at 3:45pm, V11, Vice-President of Independent Monitoring for an agency serving individuals with disabilities, stated until April of 2025, she had not visited the facility for a couple years and that the living conditions as far as the environment looks worse. V11 stated she has grave concerns about the resident's quality of living exposed to this environment.</p> <p>On 6/25/25 at 10:00am, in room 8 in the West Building, which is triple occupancy, all three beds had no headboard or box springs, only thin mattresses. All dressers were in poor repair. The floor was stained and cracked as was drywall in several areas. The bathroom on the upper floor of the building had old dated worn fixtures and the floor was in need of replacement. The window had been propped open and there was no screen. The window casement was grimy and the paint was peeling. Room 17 contained a rusted metal bed, over top of which was a thin mattress with no box springs.</p> <p>On 6/25/25 at 12:15pm, both communal bathrooms in the West Building had worn, dated fixtures and discolored flooring.</p> <p>On 6/25/25 at 12:55pm, room 15 in the East Building contained two metal beds, both with a thin mattress and no box springs. The room also contained a dresser in poor repair.</p> <p>During the course of the survey, throughout both buildings, no observations were made of interiors, exteriors, fixtures, or furnishings that were not in poor repair with the exception of fold up banquet tables and chairs in both the East and West Building dining rooms which appeared fairly new.</p>	S9999		

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S9999	<p>Continued From page 22</p> <p>On 6/28/25 at 8:10am, V1, Administrator, stated a resident is paid to pick up cigarette butts, but he often refuses, and this duty would fall back to maintenance. V1 stated the facility has been without a full-time permanent Maintenance Worker since 2023. V1 stated she has just hired a full-time combination maintenance/housekeeping position to start work next week.</p> <p>A Room Roster dated 6/17/25 documents a total of 69 residents living at the facility.</p> <p>C</p> <p>Eight of Eight 330.2410a)1)3)</p> <p>Section 330.2410 Furnishings</p> <p>a) Bed Requirements</p> <p>1) Each resident shall be provided with a bed that is at least 36 inches wide, has a headboard, is of sturdy construction, and is in good repair. Cots, rollaway, double, or folding beds shall not be used.</p> <p>3) Each bed shall be provided with a clean, firm, comfortable mattress and box springs of appropriate size for the bed.</p> <p>This requirement is NOT met as evidenced by:</p> <p>Based on observation and interview, the facility failed to provide mattresses and beds in good repair for 5 of 5 resident (R7, R9, R15, R3, R13) reviewed for furnishings in the sample of 21.</p>	S9999		

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S9999	<p>Continued From page 23</p> <p>On 6/25/25 at 10:00am, in room 8 in the West Building, which is triple occupancy for R7, R9, and R15, all three beds had no headboard or box springs, only thin mattresses.</p> <p>On 6/25/25 at 11:00am, R3's room contained a rusted metal bed, over top of which was a thin mattress with no box springs.</p> <p>On 6/25/25 at 12:55pm, R13's room contained two metal beds, both with a thin mattress and no box springs.</p> <p>On 6/28/25 at 8:10am, V1, Administrator, stated the facility has been without a full-time permanent Maintenance Worker since 2023. V1 stated she has just hired a combination maintenance/housekeeping position to start work next week. V1 stated the facility Pest Control Contractor has encouraged them to replace wooden bed frames and box springs due to ongoing issues with bedbugs.</p> <p>C</p>	S9999		