

Illinois Department of Public Health

| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6006126 | (X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____ | (X3) DATE SURVEY COMPLETED 05/01/2025 |
|--|---|--|--|--|
| NAME OF PROVIDER OR SUPPLIER KENSINGTON PLACE NRSG & REHAB | | STREET ADDRESS, CITY, STATE, ZIP CODE 3405 SOUTH MICHIGAN AVENUE CHICAGO, IL 60616 | | |
| (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 and Certification | S 000 | | |
| S9999 | Final Observations Statement of Licensure Violations 1 of 3 300.510a) Section 300.510 Administrator a) There shall be an administrator licensed under the Nursing Home Administrators Licensing and Disciplinary Act (Ill. Rev. Stat. 1987, ch. 111, par. 3651 et seq.) full-time for each licensed facility. The licensee will report any change in administrator to the Department, within five days. These requirements are NOT MET as evidenced by: Based on observation, interview and record review, the facility failed to employ a full-time licensed nursing home administrator, as required by state regulations. This failure has the potential to affect all 127 residents that reside within the facility. Findings include: Record review of facility provided census (4/28/2025) documents that 127 residents reside in the facility. On 4/28/25 at 10:19 am, V1 (Assistant Administrator) affirmed that V1 does not have a nursing home administrator's license and stated, "I am getting ready to retire soon". | S9999 | | |

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

Electronically Signed

TITLE

(X6) DATE

05/16/25

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| S9999 | <p>Continued From page 1</p> <p>On 4/28/2025 at 10:55 AM, V44 (Housekeeper) stated that V1 (Assistant Administrator) is the administrator of the facility. V44 denied knowledge of any other administrator in the facility.</p> <p>On 4/28/2025 at 11:24 PM, V26 (Registered Nurse) stated that V1 was the administrator of the facility. V26 denied knowing who V42 (Administrator) was and affirmed that V1 is the administrator.</p> <p>On 4/28/2025 at 11:46 PM, V3 (Social Services Director) stated that V1 is the administrator of the facility.</p> <p>On 4/28/2025 at 12:40 PM, V1 stated that V42 is the administrator of the building and is "in and out". V1 stated that V42 comes to the facility "around 2 to 3 days per week" and that V1 is responsible for the day-to-day operations of the facility.</p> <p>On 4/28/2025, V42 was not observed by the survey team at any time during the survey.</p> <p>On 4/29/2025 at 11:04 AM, V48 (Assistant Director of Social Services) stated that the administrator of the facility is V1.</p> <p>On 4/29/2025 at 12:15 PM, V34 (Receptionist) affirmed that V1 is the administrator for the facility.</p> <p>On 4/29/2025, V42 was not observed by the survey team at any time during the survey.</p> <p>On 4/30/2025 at 10:04 AM, V4 (Registered Nurse, Infection Preventionist/Quality Assurance Nurse) stated that V42 is the administrator and</p> | S9999 | | |

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| S9999 | <p>Continued From page 2</p> <p>that V1 is the assistant administrator. V4 stated that V4 sees V42 "every once in a while" and has "seen (V42) a couple times since V4 began working (at the facility)". V4 stated that V4 has worked at the facility "for a couple of years".</p> <p>On 4/30/2025 at 11:04 AM, V9 (MDS Coordinator, Licensed Practical Nurse) affirmed that V9 has worked at the facility "since the 90's". V9 stated that V48 is the administrator but that V1 runs the facility. V9 recalled seeing V48 "maybe 3 times per month".</p> <p>On 4/30/2025 at 11:32 AM and 11:52 AM, V48 was called by the survey team by phone and was unable to reach V48.</p> <p>On 4/20/2025 at 12:18 PM, V1 affirmed that V1 is in charge of the day-to-day operations of the facility. V1 affirmed that V1 had texted V48 to let V48 know the survey team was attempting to contact V48. V1 affirmed that the state requirement is a full-time licensed nursing home administrator. V1 affirmed that V1 is not currently licensed as a nursing home administrator. V1 stated that the last time V48 was in the building was the beginning of April. Surveyor requested V48's employee file and V1 stated, "we would have to get that from corporate, I don't have access to that". V48's employee file was not provided to the survey team prior to the exit of the survey.</p> <p>On 4/30/2025 at 1:19 PM, V48 was called by the survey team via phone and was unable to reach V48.</p> <p>On 4/30/2025, V42 was not observed by the survey team at any time during the survey.</p> | S9999 | | |

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| S9999 | <p>Continued From page 3</p> <p>Record review of facility assessment (4/16/2025) documents in part that the facility needs an administrator.</p> <p>Record review of Administrator job description (undated) documents in part, "To direct and manage overall facility operations including but not limited to: all general regulatory, administrative areas of: Nursing; Mental Health & Social Services; Maintenance; Marketing; Dietary; Activities; Risk Management; Budgeting & Bookkeeping; Human Resources; and other duties/responsibilities as assigned by the governing board members. QUALIFICATIONS & ESSENTIAL REQUIREMENTS: ... - Must be able to work a flexible schedule with or without notice. This includes the requirement to be "on-call" twenty-four hours per day, seven days per week and be able to report to the facility as needed ... The duties of this position include, but are not limited to: - Directs all facility internal/external operations. This includes physical inspection of facility environment and personal care services, audits of clinical records, audits of human resource records/materials; audits of ancillary department records and staff observations ... On call 24 hours a day, seven days a week ..."</p> <p style="text-align: center;">(B)</p> <p>Statement of Licensure Violations 2 of 3</p> <p>300.610a) 300.625k)</p> <p>Section 300.610 Resident Care Policies</p> <p>a) The facility shall have written policies and procedures governing all services provided by the facility. The written policies and procedures shall be formulated by a Resident Care Policy</p> | S9999 | | |

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| S9999 | <p>Continued From page 4</p> <p>Committee consisting of at least the administrator, the advisory physician or the medical advisory committee, and representatives of nursing and other services in the facility. The policies shall comply with the Act and this Part. The written policies shall be followed in operating the facility and shall be reviewed at least annually by this committee, documented by written, signed and dated minutes of the meeting.</p> <p>Section 300.625 Identified Offenders</p> <p>k) The facility shall incorporate the Identified Offender Report and Recommendation into the identified offender's care plan. (Section 2-201.6(f) of the Act) I) If the identified offender is a convicted (see 730 ILCS 150/2) or registered (see 730 ILCS 150/3) sex offender or if the Identified Offender Report and Recommendation prepared pursuant to Section 2-201.6(a) of the Act reveals that the identified offender poses a significant risk of harm to others within the facility, the offender shall be required to have his or her own room within the facility subject to the rights of married residents under Section 2-108(e) of the Act. (Section 2-201.6(d) of the Act)</p> <p>These requirements are NOT MET as evidenced by:</p> <p>Based on observation, interview and record review, the facility failed to ensure that a sex offender resided in a private room with a private bathroom. This failure has the potential to affect 2 residents (R81, R114) in a sample of 54.</p> <p>Findings include:</p> <p>Record review of R66's "Criminal History Analysis Security Recommendation Report" (4/24/2014)</p> | S9999 | | |

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| S9999 | <p>Continued From page 6</p> <p>Registered Sex Offenders ..."</p> <p style="text-align: center;">(C)</p> <p>Statement of Licensure Violations 3 of 3</p> <p>300.610a) 300.661</p> <p>Section 300.610 Resident Care Policies</p> <p>a) The facility shall have written policies and procedures governing all services provided by the facility. The written policies and procedures shall be formulated by a Resident Care Policy Committee consisting of at least the administrator, the advisory physician or the medical advisory committee, and representatives of nursing and other services in the facility. The policies shall comply with the Act and this Part. The written policies shall be followed in operating the facility and shall be reviewed at least annually by this committee, documented by written, signed and dated minutes of the meeting.</p> <p>Section 300.661 Health Care Worker Background Check</p> <p>A facility shall comply with the Health Care Worker Background Check Act and the Health Care Worker Background Check Code.</p> <p>These requirements are NOT MET as evidenced by:</p> <p>Based on interview and record review, the facility failed to follow the facility's abuse policy regarding pre-employment screening of abuse for healthcare workers. This failure has the potential to affect all 127 residents that reside within the facility.</p> | S9999 | | |

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| S9999 | <p>Continued From page 7</p> <p>Findings include:</p> <p>Record review of facility provided census (4/28/2025) documents 127 residents reside in the facility.</p> <p>On 4/29/2025 at 12:01 PM, V34 (Receptionist) affirmed that V34 is responsible for completing background checks and sex offender checks for staff within the facility. Surveyor reviewed the employee files of V35 (Certified Nursing Assistant), V36 (Certified Nursing Assistant), V37 (Certified Nursing Assistant), V38 (Certified Nursing Assistant), V39 (Laundry Aide) and V40 (Dietary Aide) with V34. V35's employee records included a hire date of 10/28/2024, registry check date of 11/08/2024 (indicating this was completed after hire) and did not include documentation that the (State) Sex Offender Registry, DOC (Department of Corrections) sex offender, DOC inmate search, DOC wanted fugitive or Health and Human Services Office of Inspector General (HHS OIG) registry was searched. V36's employee records did not include a check of the DOC sex offender registry or DOC wanted fugitive registry. V37's employee records included a hire date of 8/30/2019, registry check date of 9/12/2019 (indicating this was completed after hire) and did not include documentation that the (State) Sex Offender Registry, DOC sex offender, DOC inmate search, DOC wanted fugitive or HHS OIG registry was searched. V38's employee records included a hire date of 11/18/2023, registry check date of 12/7/2023 (indicating this was completed after hire) and did not include documentation that the (State) Sex Offender Registry, DOC sex offender, DOC inmate search, DOC wanted fugitive or HHS OIG registry was searched. V39's employee records did not include</p> | S9999 | | |

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| S9999 | Continued From page 9 previous fingerprint check results, and the offender Website links on the Registry; ..." (C) | S9999 | | |