

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>IL6000483</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING: _____	(X3) DATE SURVEY COMPLETED  <b>05/01/2025</b>
NAME OF PROVIDER OR SUPPLIER  <b>FOREST VIEW REHAB &amp; NURSING CENTER</b>		STREET ADDRESS, CITY, STATE, ZIP CODE <b>535 SOUTH ELM ITASCA, IL 60143</b>		
(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 Health Survey	S 000		
S9999	Final Observations  Statement of Licensure Violaions (1 of 4):  300.610a) 300.1210b) 300.1210c) 300.1210d)2)5)  Section 300.610 Resident Care Policies  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.  Section 300.1210 General Requirements for Nursing and Personal Care  b) The facility shall provide the necessary care and services to attain or maintain the highest practicable physical, mental, and psychological well-being of the resident, in accordance with each resident's comprehensive resident care plan. Adequate and properly supervised nursing care and personal care shall be provided to each resident to meet the total nursing and personal care needs of the resident.	S9999		

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

TITLE

(X6) DATE

Electronically Signed

05/14/25

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S9999	<p>Continued From page 1</p> <p>c) Each direct care-giving staff shall review and be knowledgeable about his or her residents' respective resident care plan.</p> <p>d) Pursuant to subsection (a), general nursing care shall include, at a minimum, the following and shall be practiced on a 24-hour, seven-day-a-week basis:</p> <p>2) All treatments and procedures shall be administered as ordered by the physician.</p> <p>5) A regular program to prevent and treat pressure sores, heat rashes or other skin breakdown shall be practiced on a 24-hour, seven-day-a-week basis so that a resident who enters the facility without pressure sores does not develop pressure sores unless the individual's clinical condition demonstrates that the pressure sores were unavoidable. A resident having pressure sores shall receive treatment and services to promote healing, prevent infection, and prevent new pressure sores from developing.</p> <p>These requirements were not met as evidenced by:</p> <p>Based on observation, interview, and record review, the facility failed to ensure the resident received nutritional interventions to promote wound healing. This failure resulted in R38 developing a stage 3 facility acquired pressure ulcer. The facility also failed to implement physician orders for dietary supplements to prevent further weight loss in a resident with significant weight loss. This failure resulted in R38 experiencing significant weight loss (7.87% weight loss in one month and 10.72% weight loss in six months). This applies to 1 of 3 residents</p>	S9999		

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S9999	<p>Continued From page 2</p> <p>(R38) reviewed for pressure ulcers in the sample of 25.</p> <p>The findings include:</p> <p>The EMR (Electronic Medical Record) showed R38 was admitted to the facility on July 11, 2024, with multiple diagnoses including pneumonia, bipolar disorder, deformity of the right and left hand, and intellectual disabilities.</p> <p>R38's nutrition care plan dated February 4, 2025, showed, "The resident may be at risk for weight loss related to: reduced ability to feed self, chewing problems, clinical diagnosis and/or expression of depression resulting in loss of appetite, poor ability to communicate, other: diagnoses of type 2 diabetes mellitus, acquired deformity both right and left hand, unspecified intellectual disabilities, anemia, disorder of adrenal gland, personal history malignant neoplasm of breast, vitamin D deficiency, gastroesophageal reflux disease, anxiety, bipolar, hyperlipidemia. Present weight 101 pounds: ideal body weight is 125 pounds, plus or minus 10%..."</p> <p>The care plan continued to show multiple interventions dated February 4, 2025, including "Provide dietary supplements, as ordered."</p> <p>A nutrition note dated February 27, 2025, at 11:01 AM, by V11 showed " ...Diet and supplements resumed. Calorie counts initiated. No reported edema. Resident is fed/assisted at meals with reported varied oral intake, 25-75% of meals. Supplements provides extra 750 calories per day. On mirtazapine since November 6, 2024, for appetite. Plan/Recommendations: Continue current interventions and nutritional management. Continue meal supplements- health shakes with meals of frozen nutritional treat, fortified oatmeal</p>	S9999			

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S9999	<p>Continued From page 3</p> <p>..."</p> <p>R38's MDS (Minimum Data Set) dated February 28, 2025, showed R38 had severe cognitive impairment and was dependent on facility staff for eating. The MDS showed R38 had a weight loss of 5% (percent) in the last month or loss of 10% or more in the last six months, and not on a physician-prescribed weight-loss program.</p> <p>R38's care plans for at risk for skin alteration dated July 23, 2024, and April 29, 2025, showed multiple interventions dated July 23, 2024, and April 29, 2025, including "Nutritional Supplements per dietician recommendations."</p> <p>R38's Order Summary Report dated April 30, 2025, showed an order dated April 18, 2025, for "[Frozen nutritional supplement] three times a day for dietary supplement." R38's diet order dated March 10, 2025, showed, "Ice cream with meals."</p> <p>On April 29, 2025, at 11:51 AM, V23 (Wound Nurse) said R38 has a facility acquired pressure ulcer which reopened this week. V23 said R38 has not been eating well which could be why her pressure ulcer reopened. V23 removed R38's dressing and R38 had an opened reddened area on the left buttock. V23 said R38's pressure ulcer had healed on April 16, 2025, but reopened this week.</p> <p>A wound note dated April 29, 2025, by V29 (Wound Doctor) showed R38 had a stage III pressure ulcer of the left buttock measuring 3 cm (centimeters) by 3 cm by 0.1 cm.</p> <p>On April 29, 2025, at 11:51 AM, V23 (Wound Nurse) said R38 has a facility acquired pressure</p>	S9999		

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S9999	<p>Continued From page 4</p> <p>ulcer which reopened this week. V23 said R38 has not been eating well which could be why her pressure ulcer reopened.</p> <p>On April 29, 2025, at 12:12 PM, V11 (Dietician) said R38 has experienced significant weight loss and interventions put in place to prevent further weight loss were adding supplements to R38's meals.</p> <p>On April 29, 2025, at 12:36 PM, R38 was sitting in the dining room with a lunch tray of pureed food, chocolate pudding, and cranberry juice.</p> <p>On April 29, 2025, at 12:48 PM, V28 (LPN/Licensed Practical Nurse) was feeding R38 lunch. V28 said the pureed food, pudding, and cranberry juice was R38's complete lunch. R38's tray did not include a frozen nutritional supplement or ice cream.</p> <p>On April 30, 2025, at 9:26 AM, V25 (CNA/Certified Nursing Assistant) was feeding R38 breakfast. V25 said R38's breakfast was pureed food, sugar free pudding, and cranberry juice. V25 said R38 doesn't eat much at meals but will always eat her pudding. R38's meal ticket showed R38 was to receive whole milk and a frozen nutritional supplement. R38's tray did not include whole milk, a frozen nutritional supplement, or ice cream.</p> <p>On April 30, 2025, at 9:48 AM, V5 said the facility has frozen nutritional supplements and nutritional shakes. V5 showed the frozen nutritional supplement in the facility's freezer in the kitchen.</p> <p>On April 30, 2025, at 12:12 PM, R38 was in the dining room with V14 (POA/Power of Attorney). R38's tray was delivered and V5 (Food Service</p>	S9999		

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S9999	<p>Continued From page 5</p> <p>Manager) said R38's lunch tray was pureed rice, pureed chicken, pureed broccoli, and pudding. V5 said all residents on pureed diets get pudding for dessert. V5 said a frozen nutritional supplement is like ice cream. R38's meal ticket showed frozen nutritional supplement. R38's meal tray did not include a frozen nutritional supplement or ice cream.</p> <p>On April 30, 2025, at 1:10 PM, V24 (R38's Physician) said his expectation would be for facility staff to give residents nutritional supplements as ordered by the provider. V24 said malnutrition would contribute to R38's pressure ulcer reopening.</p> <p>On March 19, 2025, R38 weighed 94 pounds. On April 22, 2025, R38 weighed 86.6 pounds which is a 7.87% (percent) weight loss in one month.</p> <p>On October 28, 2024, R38 weighed 97 pounds. On April 22, 2025, R38 weighed 86.6 pounds, which is a 10.72% weight loss in six months.</p> <p>On April 30, 2025, at 1:38 PM, V2 (DON/Director of Nursing) said facility staff should be giving residents dietary supplements as ordered by the provider. V2 said frozen nutritional supplements come from the kitchen staff when meal trays are being assembled. V2 said R38 should be getting the frozen nutritional supplement especially since R38 likes sweets and will usually eat her sweets at meals. V2 said pudding is not the same as the frozen nutritional supplement because the frozen nutritional supplement is more nutritious. V2 said facility staff documentation showing R38 received a frozen nutritional supplement on April 29, 2025, at lunch and on April 30, 2025, at breakfast and lunch would be incorrect since the frozen nutritional supplement was not on R38's meal</p>	S9999		

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S9999	Continued From page 6  tray.  The facility's policy titled "Guidelines for Prevention/Treatment of Pressure Injuries (Part of the SWAT- Skin Weight Assessment Team Program)" dated October 9, 2023, showed "Purpose: It is the intent of the facility to recognize the following information and to act on it in such a way as to practice evidence-based recommendations for the prevention/treatment of pressure injuries to the residents who reside in the facility. Objectives: In accordance with Federal Regulations and based on resident assessment, the facility will ensure: 1) A resident receives care, consistent with professional standards of practice; to prevent pressure ulcers and does not develop pressure ulcers unless the individual's clinical condition demonstrates that they were unavoidable; and 2) A resident with pressure ulcers receives necessary treatment and services, consistent with professional standards of practice, to promote healing, prevent infection and prevent new ulcers from developing. Note: the second point will be addressed in Guidelines for Addressing Pressure Injuries. Facts: Pressure injuries are significant health issues and one of the biggest challenges for long-term care facilities on a day-to day basis. Preventing pressure injuries is a challenge to care givers in the long-term care industry. The epidemiology of pressure injuries varies by clinical setting. Every effort should be made to prevent a pressure injury from developing. Pressure injuries can interfere with the resident's function and recovery, especially if complicated by pain and/or infection. The presence of pressure injuries is used as a 'marker' of poor overall prognosis and can contribute to premature mortality in some residents. Further, the development of stage 3 and/or stage 4 pressure	S9999		

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S9999	Continued From page 7  injuries is considered by the Joint Commission as a patient safety event ... Multidisciplinary Concern: Many clinicians believe that pressure injury prevention is not only the responsibility of nursing, but also of the entire healthcare system. Therefore, prevention of pressure injuries requires multidisciplinary collaboration. Risk Factors: Not all risk factors are fully modifiable or can be completely addressed. Some risk factors such as permanent lack of sensation to an area may not be modified. Some potentially modifiable risk factors such as malnutrition or uncontrolled blood sugar levels may take some time to correct. Others such as 'pressure' can be modified promptly. Examples of identified risk factors for development of pressure ulcer/pressure injury include but are not limited to: ...Under nutrition, malnutrition, and hydration deficits ... The presence of a previously healed pressure ulcer/pressure injury. The history of an pressure ulcer/pressure injury, its origin, treatment, its stages (if known), is important assessment information since areas of healed stage 3 or stage 4 pressure ulcers/pressure injuries are more likely to have recurrent breakdown ... Strategies for Pressure Injury Prevention based on NPIAP's (National Pressure Injury Advisory Panel's) 'Pressure Injury Prevention Points' ... 3) Nutrition and Weight Loss and Hydration- residents who live in an institution are at risk for undernutrition. Adequate nutrition provides the body with vital energy and building blocks for all of the body's structures and processes. Any organ or body system may require additional energy or structural materials for repair or function. The skin is the body's largest organ. Skin may affect and may be affected by other body processes and organs. Skin condition affects overall body function therefore the presence of skin breakdown may be the most	S9999		



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S9999	<p>Continued From page 8</p> <p>visible indication of a health issue ... Residents who are receiving oral, enteral, and parenteral nutrition will need this intake evaluated regularly to ensure adequacy of nutritional needs being met. Supplemental nutrition will be recommended by the Registered Dietician will be presented timely to the physician to be addressed. Weight loss- significant, unintended weight loss may indicate under-nutrition or worsening health status. Weight stability (in the absence of fluid excess or loss) is a useful indicator of overall calorie balance. Severely impaired organs (heart, lungs, kidneys, liver, etc.) may not be able to utilize nutrients effectively. A resident with a pressure ulcer/pressure injury who continues to lose weight either needs additional caloric intake or correction (when possible) of conditions that are creating a hypermetabolic state ..."</p> <p>(B)</p> <p>(2 of 4):</p> <p>300.615 f)</p> <p>Section 300.615 Determination of Need Screening and Request for Resident Criminal History Record Information</p> <p>f) The facility shall check for the individual's name on the Illinois Sex Offender Registration website at <a href="http://www.isp.state.il.us">www.isp.state.il.us</a> and the Illinois Department of Corrections sex registrant search page at <a href="http://www.idoc.state.il.us">www.idoc.state.il.us</a> to determine if the individual is listed as a registered sex offender.</p>	S9999		

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S9999	<p>Continued From page 9</p> <p>These requirements are not met as evidenced by:</p> <p>Based on interview and record review, the facility failed to check the Illinois Sex Offender and/or the Department of Corrections sex registrant for criminal background checks on new admissions to the facility</p> <p>This applies to 10 of 10 residents (R26, R59, R91, R108, R121, R122, R227, R228, R229, R230) reviewed for background checks.</p> <p>The findings include:</p> <ol style="list-style-type: none"> <li>1. R26's EMR (Electronic Medical Record) showed R26 was admitted to the facility on January 16, 2025. The facility was unable to provide documentation that they had checked the Illinois Department of Corrections sex registrant search.</li> <li>2. R59's EMR showed R59 was admitted to the facility on March 25, 2025. The facility was unable to provide documentation that they had checked the Illinois Department of Corrections sex registrant search.</li> <li>3. R91's EMR showed R91 was admitted to the facility on March 15, 2025. The facility was unable to provide documentation that they had checked the Illinois Department of Corrections sex registrant search.</li> <li>4. R108's EMR showed R108 was admitted to the facility on March 3, 2025. The facility was unable to provide documentation that they had checked the Illinois Department of Corrections sex registrant search.</li> <li>5. R121's EMR showed R121's initial admission</li> </ol>	S9999		

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S9999	<p>Continued From page 10</p> <p>to the facility was on February 4, 2025. The facility was unable to provide documentation that they had checked the Illinois Department of Corrections sex registrant search.</p> <p>6. R122's EMR showed R122 was admitted to the facility on March 24, 2025. The facility was unable to provide documentation that they had checked the Illinois Department of Corrections sex registrant search.</p> <p>7. R227's EMR showed R227 was admitted to the facility on April 23, 2025. The facility was unable to provide documentation that they had checked the Illinois Department of Corrections sex registrant search.</p> <p>8. R228's EMR showed R228 was admitted to the facility on April 11, 2025. The facility was unable to provide documentation that they had checked the Illinois Department of Corrections sex registrant search.</p> <p>9. R229's EMR showed R229 was admitted to the facility on April 11, 2025. The facility was unable to provide documentation that they had checked the Illinois Department of Corrections sex registrant search.</p> <p>10. R230's EMR showed R230 was initially admitted to the facility on April 7, 2025. The facility was unable to provide documentation that they had checked the Illinois Department of Corrections sex registrant search.</p> <p>On April 29, 2025, at 9:19 AM, V17 (Admissions Director) said she does the resident background checks for new admissions. She does the CHIRPS (Criminal History Information Response Process), admission agreements, and uploading</p>	S9999		

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S9999	<p>Continued From page 11</p> <p>records to the EMR (Electronic Medical record). V17 said she does website checks.</p> <p>On April 30, 2025, at 1:51 PM, V17 said she did the website checks for the 10 residents that were given to the survey team for review. V17 said she thought they were just doing the Individuals in Custody Search and was not aware that they were to do the Parole Sex Registrant Search.</p> <p>V1 (Administrator) provided the facility's policy titled, "Abuse Prevention Program." It was revised on March 1, 2021. The policy showed, "This facility shall check the criminal history background on any resident seeking admission to the facility to identify previous criminal convictions. Prior to the admission of a new resident to the facility, this facility will: ... .. Check for the resident's name on the Illinois Department of Corrections sex registrant search page. www.idoc.state.il.us...."</p> <p>(C)</p> <p>(3 of 4):</p> <p>300.650c)</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> <p>The REQUIREMENT was not met as evidence by:</p> <p>Based on interview and record review, the facility</p>	S9999		

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S9999	<p>Continued From page 12</p> <p>failed to verify follow their policy to verify a nurse's license prior to employment. This applies to all 125 residents in the facility.</p> <p>The findings include:</p> <p>The facility's "Long-term Care Application for Medicare and Medicaid" dated April 28, 2025, showed the facility's census was 125 residents.</p> <p>On April 29, 2025, at 11:20 AM, V8 (Human Resources) said V27 (RN/Registered Nurse) was hired on August 13, 2024. V8 said she did not check V27's nursing license on the Illinois Department of Financial and Professional Regulation when V27 was hired.</p> <p>V27's personnel file does not show V27's nursing license was checked prior to V27 being employed by the facility.</p> <p>The facility's policy titled "Abuse Prevention Program" dated March 1, 2021, showed "Policy: It is the policy of this facility to prohibit and prevent resident abuse, neglect, exploitation, mistreatment, and misappropriation of resident property and a crime against a resident in the facility. The following Procedures shall be implemented when an employee or agent becomes aware of abuse or neglect of a resident, or of an allegation of suspected abuse or neglect of a resident by a third party. Procedure: I. Pre-employment Screening of Potential Employees: This facility will not knowingly employ any individual convicted of resident abuse, neglect, exploitation, mistreatment, or misappropriation of resident property. This facility will not knowingly employ any direct care staff convicted of any of the crimes listed in the Illinois Healthcare Workers Background Check Act</p>	S9999			

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S9999	<p>Continued From page 13</p> <p>(unless waived under the provision of the act), or with findings listed on the Illinois Nurse Aide registry. This facility will not knowingly hire any staff with a disciplinary action in effect against their license by a state licensing body that results from a finding of abuse, neglect, exploitation, mistreatment, or misappropriation of resident property. Prior to a new employee starting a working schedule: Initiate a reference check from previous employer(s), in accordance with facility policy. Obtain a copy of the state license of any individual being hired for a position requiring a professional license. Check the Illinois Health Care Worker Registry on any individual being hired for prior reports of abuse, previous fingerprint results, and the six offender Website links on the registry; and initiate an Illinois State Police livescan fingerprint check of any unlicensed individual being hired without a previous fingerprint check ..."</p> <p>(C)</p> <p>(4 of 4):</p> <p>300.661</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>The REQUIREMENT was not met as evidence by:</p> <p>Based on interview, and record review, the facility failed to implement their abuse policy to conduct background checks on employees prior to</p>	S9999		

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S9999	<p>Continued From page 14</p> <p>working in the facility. This applies to all 125 residents residing in the facility.</p> <p>The findings include:</p> <p>The facility's "Long-term Care Application for Medicare and Medicaid" dated April 28, 2025, showed the facility's census was 125 residents.</p> <p>1. On October 2, 2024, V9 (Facility Bus Driver) submitted an application for employment and checked "yes" to "Have you been convicted of or pled guilty or no contest to a felony or misdemeanor other than a minor traffic related infraction?" The facility does not have documentation to show a criminal background check was performed or V9 was sent for fingerprinting.</p> <p>V9's personnel file did not show the Health Care Work Registry was checked prior to V9 being employed in the facility.</p> <p>V9's Health Care Worker Registry dated April 29, 2025, at 11:38 AM, showed "Worker Eligibility: Not Yet Determined."</p> <p>On April 29, 2025, at 2:18 PM, V9 said his most recent conviction was in 2020 for possession of a weapon by a previous offender. V9 said he was on probation for physical assault. V9 said he has not been fingerprinted while working at the facility.</p> <p>On April 29, 2025, at 4:52 PM, V13 (Medical Records/Central Supply) said she is in charge of arranging transportation for residents. V13 said V9 is the facility's primary bus driver to transport residents to appointments. V13 said V9 has transported residents without an escort or another facility staff member to appointments.</p>	S9999		

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S9999	<p>Continued From page 15</p> <p>On April 29, 2025, at 4:40 PM, V1 (Administrator) said V9 will transport residents to appointments. V1 said V9 will also help throughout the facility with painting rooms, housekeeping, and picking up garbage around the facility.</p> <p>On April 29, 2025, at 11:20 AM, V8 (Human Resources) said she was unaware V9 was "Not Yet Determined" on the Health Care Worker Registry. V8 said she did not check the Health Care Worker Registry for V9 and V9 had not been fingerprinted. V8 said she saw V9 selected "Yes" on his application to "Have you been convicted of or pled guilty or no contest to a felony or misdemeanor other than a minor traffic related infraction?" V8 said she did not ask V9 what his conviction was. V8 said since V9's position is not a nursing position, V1 should have also reviewed V9's application. V8 said V9 was not sent for fingerprinting, and V9 started working in the facility on October 15, 2024. V8 said V9 has been responsible for transporting residents in the facility's bus.</p> <p>On April 29, 2025, at 12:35 PM, V1 (Administrator) said he did not recall checking V9's application for employment. V1 said he was unaware V9 selected "Yes" on his application to "Have you been convicted of or pled guilty or no contest to a felony or misdemeanor other than a minor traffic related infraction?" V1 said V9 should not be working in the facility since he was not fingerprinted and not yet determined on the Health Care Worker Registry. V1 said employee background checks should be completed prior to an employee being hired. V1 said applicants need to be listed as eligible on the Health Care Worker Registry before they can work in the facility.</p>	S9999		



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S9999	<p>Continued From page 16</p> <p>On April 29, 2025, at 2:11 PM, V2 (Director of Nursing) said V9 was currently transporting a resident to an appointment.</p> <p>On April 29, 2025, at 3:43 PM, V1 (Administrator) said the Health Care Worker Registry is checked to see if someone is eligible to work in a healthcare facility.</p> <p>On April 29, 2025, 3:44 PM, V12 (Regional Director of Operations) said the facility checks the Health Care Worker Registry and conducts background checks to "minimize the risk of employing somebody with bad behavior."</p> <p>V9's Job Description dated January 29, 2025, showed "Job Description, Position Title: Facility Bus/Van Driver, Department: Activities; Position Summary: The facility bus driver will work under the supervision of the Activities Director and will be responsible for the transit and safety of the residents. The person holding this position is delegated responsibility for carrying out the assigned duties and responsibilities in accordance with current existing federal and state regulations and established company policies and procedures. Essential Job Functions: ...5. Per the procedure below, the facility bus/van driver will transport residents/staff to a designated area as required and appointments will be scheduled during the bus/van drivers regular shift: ... B) Will coordinate the availability of the bus/van and arrange for supervision of residents as necessary in the event the family cannot be present for the appointment ... Knowledge/Skills &amp; Abilities: ... 2. Must be able to work independently in the absence of supervision ... 5. Interacts with residents, family members, co-workers, clinical and ancillary staff in a non-judgmental, supportive</p>	S9999			

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S9999	<p>Continued From page 17</p> <p>and calm manner ..."</p> <p>2. V10's (Activity Aide) Health Care Worker Registry dated November 7, 2024, showed "Worker Eligibility: Not Yet Determined" and V10 was fingerprinted on November 26, 2024. V10's Health Care Worker Registry dated April 29, 2025, at 11:33 AM, showed "Worker Eligibility: Not Yet Determined."</p> <p>On April 29, 2025, at 11:20 AM, V8 said she checked the Health Care Worker Registry when V10 applied and V10 was not yet determined on the registry. V8 said V10 was fingerprinted but V8 did not follow up with the results. V8 said V10's work eligibility was still not yet determined. V8 said V10 is an activity aide who works throughout the entire building. V8 said V10 started working in the facility on December 2, 2024.</p> <p>On April 29, 2025, at 12:35 PM, V1 said he does not follow up when a staff member is fingerprinted to determine eligibility on the Health Care Worker Registry.</p> <p>The facility's policy titled "Abuse Prevention Program" dated March 1, 2021, showed "Policy: It is the policy of this facility to prohibit and prevent resident abuse, neglect, exploitation, mistreatment, and misappropriation of resident property and a crime against a resident in the facility. The following Procedures shall be implemented when an employee or agent becomes aware of abuse or neglect of a resident, or of an allegation of suspected abuse or neglect of a resident by a third party. Procedure: I. Pre-employment Screening of Potential Employees: This facility will not knowingly employ any individual convicted of resident abuse,</p>	S9999		

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S9999	Continued From page 18  neglect, exploitation, mistreatment, or misappropriation of resident property. This facility will not knowingly employ any direct care staff convicted of any of the crimes listed in the Illinois Healthcare Workers Background Check Act (unless waived under the provision of the act), or with findings listed on the Illinois Nurse Aide registry. This facility will not knowingly hire any staff with a disciplinary action in effect against their license by a state licensing body that results from a finding of abuse, neglect, exploitation, mistreatment, or misappropriation of resident property. Prior to a new employee starting a working schedule: Initiate a reference check from previous employer(s), in accordance with facility policy. Obtain a copy of the state license of any individual being hired for a position requiring a professional license. Check the Illinois Health Care Worker Registry on any individual being hired for prior reports of abuse, previous fingerprint results, and the sex offender Website links on the registry; and initiate an Illinois State Police livescan fingerprint check of any unlicensed individual being hired without a previous fingerprint check ..." (C)	S9999		