

Illinois Department of Public Health

| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6016935 | (X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____ | (X3) DATE SURVEY COMPLETED 06/13/2025 |
|---|--|---|--|--|
| NAME OF PROVIDER OR SUPPLIER BELMONT VILLAGE LINCOLN PARK | | STREET ADDRESS, CITY, STATE, ZIP CODE 700 WEST FULLERTON AVENUE CHICAGO, IL 60614 | | |
| (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 Violation: 330.715a) 330.715b) 300.760d) 330.1160c) 330.1160d) 330.1160e) 330.1160f) 330.2000 1 of 4 330.715a) 330.715b) Section 330.715 Request for Resident Criminal History Record Information a) A facility shall, within 24 hours after admission of a resident, request a criminal history background check pursuant to the Uniform Conviction Information Act for all persons 18 or older seeking admission to the facility, unless a background check was initiated by a hospital pursuant to the Hospital Licensing Act. Background checks shall be based on the resident's name, date of birth, and other identifiers as required by the Department of State Police. (Section 2-201.5(b) of the Act) b) The facility shall check for the individual's name on the Illinois Sex Offender Registration website at www.isp.state.il.us and the Illinois Department of Corrections sex registrant search | 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>page at www.idoc.state.il.us to determine if the individual is listed as a registered sex offender.</p> <p>This requirement was NOT MET as evidenced by:</p> <p>Based on interview and record review, the facility failed to initiate background checks within 24 hours after admission for three (R4, R5, R11) out of three residents reviewed for the Identified Offenders Program.</p> <p>Findings include:</p> <p>On 6/11/25 At 12:44PM V19 (Community relation manager for outside sale) stated she has been working in the facility for almost 3 years. She said background check is done prior to admission or within 24hours of admission. V19 stated the purpose of the background check is to know if there is any criminal background the resident had before coming into the facility for the safety of other residents and employees. She said there are 3 residents who were admitted this month and last month. Surveyor reviewed the following residents with V19 and stated:</p> <ol style="list-style-type: none"> 1. R5 was admitted to the facility on 6/5/25 CHIRP (Criminal History Information Response Process) and ISO (Illinois Sex Offender) were done on 6/10/25. She said it should be done within 24 hours but was not done due to short of help. Unable to determine IDOC (Illinois Department of Corrections) if it was done or not. No copy of result or information on R5's record. 2. R4 was admitted to facility on 6/6/25. CHIRP and ISO were done on 6/10/25. Unable to determine if DOC was done or not. No result or information on R4's record. 3. R11 was admitted to facility on 5/5/25. CHIRP was done on 5/7/25 and ISO was done on | S9999 | | |

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| S9999 | <p>Continued From page 2</p> <p>6/11/25. Unable to determine if DOC was done or not. No result or information on R11's record.</p> <p>On 6/12/25 at 10AM V1 (Administrator) said they don't have policy and procedures for criminal background check. Facility was not able to provide policy and procedure for criminal background check despite several requests.</p> <p>Administrative code: Request for Resident Criminal History Record Information effective June 29, 2011 documented in part: A facility shall, within 24 hours after admission of a resident, request a criminal history background check pursuant to the Uniform Conviction Information Act for all persons 18 or older seeking admission to the facility, unless a background check was initiated by a hospital pursuant to the Hospital Licensing Act. Background checks shall be based on the resident's name, date of birth, and other identifiers as required by the Department of State Police. The facility shall check for the individual's name on the Illinois Sex Offender Registration website at www.isp.state.il.us and the Illinois Department of Corrections sex registrant search page at www.idoc.state.il.us to determine if the individual is listed as a registered sex offender.</p> <p>(C)</p> <p>2 of 4 330.760d)</p> <p>Section 330.760 Personnel Policies</p> <p>d) The facility shall check the status of all applicants with the Health Care Worker Registry prior to hiring.</p> <p>This requirement was NOT MET as evidenced</p> | S9999 | | |

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| S9999 | <p>Continued From page 3</p> <p>by:</p> <p>Based on interview and record reviews, the facility failed to perform a Health Care Worker Registry check prior to hiring for two employees (V17, V18) out of ten reviewed for healthcare worker background checks.</p> <p>Findings Include:</p> <p>On 6/11/25 at 9:33 AM, surveyor interviewed V7 (Human Resources Generalist) and went over employee files. V18's (Personal Assistant Liaison/PAL) hire date was 12/20/24 and V18's healthcare worker registry was not found in V18's file. V17's (Housekeeping) hire date was 4/16/25 and V17's healthcare worker registry dated 4/30/25. V7 stated that the facility's policy is to check the applicant's licenses, background checks, and healthcare worker registries prior to hiring.</p> <p>Surveyor requested a copy of their policy on healthcare worker background check, but facility did not provide. (C)</p> <p>3 of 4 330.1160c) 330.1160d) 330.1160e) 330.1160f)</p> <p>Section 330.1160 Vaccinations</p> <p>c) A facility shall administer or arrange for administration of a pneumococcal vaccination to each resident in accordance with the recommendations of the</p> | S9999 | | |

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| S9999 | <p>Continued From page 4</p> <p>Advisory Committee on Immunization Practices of the Centers for Disease Control and Prevention, who has not received this immunization prior to or upon admission to the facility unless the resident refuses the offer for vaccination or the vaccination is medically contraindicated. (Section 2-213(b) of the Act)</p> <p>d) A facility shall document in each resident's medical record that a vaccination against pneumococcal pneumonia was offered and administered, arranged, refused, or medically contraindicated. (Section 2-213(b) of the Act)</p> <p>e) A facility shall distribute educational information provided by the Department on all vaccines recommended by the Centers for Disease Control and Prevention's Advisory Committee on Immunization Practices, including, but not limited to the risks associated with shingles and how to protect oneself against the varicella-zoster virus. The facility shall provide the information to each resident who requests the information and each newly admitted resident. The facility may distribute the information to residents electronically. (Section 2-213(e) of the Act)</p> <p>f) A facility shall document in the resident's medical record that he or she was verbally screened for risk factors associated with hepatitis B, hepatitis C, and HIV, and whether or not the resident was immunized against hepatitis B. (Section 2-213(c) of the Act)</p> | S9999 | | |

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| S9999 | <p>Continued From page 5</p> <p>This requirement was NOT MET as evidenced by:</p> <p>Based on interview and record reviews, the facility (a) failed to provide evidence that they educated residents and their representatives regarding the risks associated with shingles and how to protect the residents against the varicella-zoster virus, (b) failed to document in each resident's medical record that a vaccination against pneumococcal pneumonia was offered and administered, arranged, refused, or medically contraindicated, (c) failed to screen and document risk factors associated with hepatitis B, hepatitis C, and Human Immunodeficiency Virus (HIV), and (d) failed to offer immunization within ten days after admission for residents who are susceptible to hepatitis B for five (R1, R2, R3, R4, and R5) out of five residents reviewed for vaccinations. These failures could potentially affect all 118 residents residing in the facility.</p> <p>Findings include:</p> <p>On 6/10/25 at 12:45 PM, V2 (Director of Nursing/Infection Preventionist) stated that the facility does not screen residents for hepatitis and HIV. V2 stated that the facility does not offer immunizations for shingles and hepatitis B. V2 said it's not the facility's policy to screen residents for hepatitis and HIV. V2 also said that the facility has no policy on shingles and hepatitis B vaccinations.</p> <p>R1, R2, R3, R4, and R5's immunization records in their clinical charts did not include shingles and hepatitis B vaccines information/education. R1, R2, R3, R4, and R5's records have no documentation to show that the facility screened them for hepatitis B, hepatitis C, and HIV. R1, R4,</p> | S9999 | | |

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| S9999 | <p>Continued From page 6</p> <p>and R5's records have no documentation to show that a vaccination against pneumococcal pneumonia was offered and administered, arranged, refused, or medically contraindicated.</p> <p>On 6/10/25 at 12:00 PM, R5 stated he does not remember the facility screening him for hepatitis and HIV.</p> <p>On 6/10/25 at 12:16 PM, R1 stated the facility did not do any HIV or hepatitis screenings for her. R1 stated she does not remember if any education was provided for the vaccinations.</p> <p>On 6/10/25 at 12:26 PM, R3 stated he does not recall if the facility screened him for hepatitis and HIV.</p> <p>Surveyor requested for R1, R4, and R5's Pneumococcal vaccinations information. Facility did not provide the requested documents.</p> <p>The facility's "IPC Infection Prevention and Control" policy and procedures dated 9/24 documents in part: Immunizations for Respiratory Virus Reduction. Encourage individuals to stay informed about and receive all recommended vaccinations for which they are eligible. Vaccines are recommended to prevent infections and associated complications, including severe illness and death. Vaccination is voluntary.</p> <p>The facility did not provide policies and procedures related to screenings for hepatitis B, hepatitis C, and HIV, and immunizations for shingles and hepatitis B.</p> <p>The facility's residents' roster provided on 6/10/25 shows a total of 118 residents residing in the facility. (B)</p> | S9999 | | |

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| S9999 | <p>Continued From page 7</p> <p>4 of 4 330.2000</p> <p>Section 330.2000 Food Handling Sanitation</p> <p>Every facility shall comply with the Department's rules entitled "Food Code."</p> <p>This requirement was NOT MET as evidenced by:</p> <p>Based on observations, interview, and record review the facility failed to ensure a.) food items were properly labeled and dated, b.) expired foods were discarded, c.) kitchen staff were wearing appropriate hair restraints, d.) garbage was properly covered and dispose of to prevent the harborage and feeding of pests, insects, and rodents. This deficient sanitation practices has the potential to affect all 118 residents who receive food prepared in the facilities kitchen and reside in the facility.</p> <p>The findings include:</p> <p>On 06/10/25 at 10:30 AM, during the initial kitchen tour with V12 (Chef Manager) observed the following items in the walk-in refrigerator:</p> <ol style="list-style-type: none"> 1.) Opened 1-gallon container of Asian Sesame Dressing dated 12/27. 2.) Plastic container containing canned halved peaches dated 5/28. <p>V12 stated everything in the refrigerator that is opened should be labeled with an open or prepared date and discarded within seven days of that date. V12 stated the opened refrigerator items do not need to be labeled with a use by or expiration date and that the staff should know to</p> | S9999 | | |

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| S9999 | <p>Continued From page 8</p> <p>toss the item(s) after seven days. V12 stated some opened refrigerator items can be stored longer than seven days but he would need to check the policy for those storage time frames. When V12 viewed the opened 1-gallon container of Asian Sesame Dressing dated 12/27 and the container of canned halved peaches dated 5/28 he stated those items will be tossed because the dates are too old.</p> <p>On 06/10/25 at 10:52 AM, observed in the dry storage room on the shelf the following items:</p> <ol style="list-style-type: none"> 1.) Opened 2-quart container of Less Sodium Soy Sauce on shelf with no opened date. On the container the manufacturer printed "Refrigerate After Opening." 2.) Opened 4-pound glass jar of Mint Jelly with no opened date. On the container the manufacturer printed "Refrigerate After Opening." 3.) Opened 1-gallon container Worcestershire Sauce dated with opened date 4/14. <p>Manufacturer guidelines printed on the bottle read "Best by May 12, 2025."</p> <p>V12 stated the kitchen follows manufacturer guidelines for storage. V12 stated the opened Less Sodium Soy Sauce and opened glass jar of Mint Jelly should have been labeled with an opened date and stored in the refrigerator after opening per the manufacturer guidelines. V12 stated the opened Worcestershire Sauce should have been discarded on or before 05/12/25 per the manufacturer guidelines.</p> <p>On 06/10/25 at 11:25 AM, observed in the reach-in refrigerator the following items:</p> <ol style="list-style-type: none"> 1.) Opened 1-gallon container of Blue Cheese Dressing with no opened or use by date. 2.) Opened 1-gallon container of Lite Raspberry Dressing with no opened or use by date. 3.) Opened 1-gallon container of Creamy Caesar | S9999 | | |

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| S9999 | <p>Continued From page 9</p> <p>Dressing with no opened or use by date. V12 stated each of salad dressings should have been labeled with an opened date and that labeling is important so that the kitchen staff knows when the items were opened and when they need to be discarded or used by. V12 stated that way the kitchen would not make someone sick by serving an expired items to a resident especially since the facility serves an elderly population because they are at higher risk for illness.</p> <p>On 06/10/25 at 11:03 AM, observed V16 (Dish Washer) washing kitchen equipment using the 3-compartment sink. V16 had a full beard and mustache. He was not wearing any type of hair restraint or covering over his face.</p> <p>On 06/10/25 at 11:10 AM, observed two cooks (V14 and V15) preparing food in the kitchen. V14 (Cook) had a mustache and beard stubble with no hair covering or restraint over his face. V15 (Cook) had a mustache and goatee (hair on chin, not cheeks) with no hair restraint covering his face. V12 stated the staff are required to wear hairnets to cover their hair on their head, but do not have to wear hair restraints covering their facial hair. V12 stated the purpose of wearing hair covering is so the employee's hair does not fall into the food during preparation.</p> <p>On 06/10/25 at 11:35 AM, observed dumpster area inside the facility in a closed room off the back hallway. The lid to the dumpster labeled for kitchen staff was wide open and inside viewed a large amount of cooked spaghetti and fresh strawberries that had white and light green puffy looking material on them partially covering the bottom of the dumpster, not contained in a garbage bag. Flies were seen flying around inside</p> | S9999 | | |

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| S9999 | <p>Continued From page 10</p> <p>the dumpster. V12 stated the dumpster lids should be closed to keep pests out and all the food should be put into garbage bags instead of food thrown directly into the dumpster to keep flies away and not attract other pests. Observed large grease dumpster with lid wide opened and could see pieces of fried food on top of the screen on the dumpster which were not covered. V12 stated when old oil is thrown out into the grease dumpster there is a screen on top of the grease dumpster which catches any old pieces of food which were in the oil being discarded. V12 stated the food seen in the screen are fried potatoes, fish, and chicken. V12 stated the lid of grease dumpster should be closed so as not to attract pests.</p> <p>On 06/10/25 at 11:40 AM, observed large, uncovered gallon garbage contained filled with trash in the prep and area and two uncovered garbage cans in the cooking area. V12 stated there are not lids for the garbage cans/containers in the kitchen.</p> <p>On 06/12/25 at 12:16 PM, V21 (Consultant Registered Dietitian) stated via telephone interview that hair restraints should be worn in the kitchen by all staff. V21 stated if an employee has a beard or mustache or any type of facial hair it must be covered with a hair net or beard covering. V21 stated even if the facial hair is well-groomed and/or trimmed it should be covered. V21 stated it is important for all kitchen staff to wear hair restraints for food safety to ensure no foreign object such as hair falls into the food that is being prepared and served to the residents.</p> <p>On 06/12/25 at 12:20 PM, V21 stated all food items stored in the refrigerator should be labeled</p> | S9999 | | |

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| S9999 | <p>Continued From page 12</p> <p>On 06/10/25, facility provided resident census indicating there are 118 residents living in the facility. Facility provided document indicating there are no residents on NPO (nothing by mouth) diet.</p> <p>Facility provided policy titled Labeling and Dating Food undated documents in part, if food subject to spoilage is removed from its original container, it shall be kept sealed, dated, and labeled.</p> <p>Facility provided document titled Use By Date Recommendations dated 2021 which documents in part, commercial salad dressing recommended maximum storage period if opened 3 months refrigerated; Worcestershire Sauce expiration date per manufacturer; Soy Sauce recommended 1 year refrigerated, jams/jellies recommended 6 months refrigerated; canned goods - low acid recommended maximum storage period if opened 3-4 days refrigerated and canned goods - high acid recommended maximum storage period if opened 5-7 days.</p> <p>Facility provided policy titled Trash and Garbage Service undated which documents in part, containers used in food preparation and utensil-washing areas shall be kept covered after they are filled; containers both outside and inside the kitchen will be cleaned per the cleaning scheduled, doors, where applicable and covers will be kept closed when not in use; and garbage and refuse on the premises shall be stored in a manner to make it inaccessible to insects and rodents.</p> <p>State of Illinois Food Service Sanitation Code documents in part,</p> <p>Section 750.520 General-Clothing (b) Employees shall use effective hair restraints (such as hats,</p> | S9999 | | |

Illinois Department of Public Health

| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6016935 | (X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____ | (X3) DATE SURVEY COMPLETED 06/13/2025 |
|---|---|---|--|--|
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| S9999 | <p>Continued From page 13</p> <p>hair coverings or nets, beard restraints, and clothing that covers body hair) that are designed and worn to effectively keep their hair from contacting exposed food; clean equipment, utensils, and linens; and unwrapped single-service.</p> <p>Section 750.1130 Containers - Garbage and Refuse (b) Containers used in food preparation and utensil washing areas shall be kept covered after they are filled, (c) Containers stored outside the establishment, and dumpsters, compactor and compactor systems shall be easily cleanable, shall be provided with a tight-fitting lids, doors or covers, and shall be kept covered when not in actual use.</p> <p>Section 750.1140 Garbage and Refuse Storage (a) Garbage and refuse on the premises shall be stored in a manner inaccessible to insects and rodents. When stored outside, plastic bags or high wet strength bags or bale units containing garbage and refuse must be stored in a manner inaccessible to insects and rodents.</p> <p>Section 750.1160 General - Insect and Rodent Control - Effective measures intended to minimize the presence of rodents and flies, roaches, and other insects on the premises shall be utilized. The premises shall be kept in such condition as to prevent the harborage or feeding of insects or rodents.</p> <p style="text-align: center;">"C"</p> | S9999 | | |