

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6009591	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 07/09/2025
NAME OF PROVIDER OR SUPPLIER CITADEL AT CASA SCALABRINI		STREET ADDRESS, CITY, STATE, ZIP CODE 480 NORTH WOLF ROAD NORTHLAKE, IL 60164		
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S 000	Initial Comments Annual Licensure Survey	S 000		
S9999	Final Observations Statement of Licensure Violations 1 of 3 300.615e) 300.615f) 300.615 Determination of Need Screening and Request for Resident Criminal History Record Information e) In addition to the screening required by Section 2-201.5(a) of the Act and this Section, 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) f) 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. These requirements are not met as evidenced by: Based on interview and record review, the facility failed to request residents criminal history	S9999		

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

TITLE

(X6) DATE

Electronically Signed

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S9999	<p>Continued From page 1</p> <p>background check within 24 hours of their admission and failed to check for the individuals' name on the Department of Corrections sex registrant website as part of the new admission criminal background checks.</p> <p>This also applies to 10 of 10 residents (R12, R13, R18, R19, R20, R21, R22, R23, R24, R25) reviewed for background checks.</p> <p>These REQUIREMENTS were not met as evidenced by:</p> <ol style="list-style-type: none"> 1. R12's EMR (Electronic Medical Record) showed R12 was admitted to the facility on July 3, 2025. The facility was unable to provide documentation that they had checked the Illinois Department of Corrections sex registrant website. 2. R13's EMR showed R13 was admitted to the facility on July 5, 2025. R13's CHIRP (Criminal History Information Response Process) was completed three days prior to admission to the facility. The facility was unable to provide documentation that they had checked the Illinois Department of Corrections sex registrant website. 3. R18's EMR showed R18 was admitted to the facility on July 4, 2025. The facility was unable to provide documentation that they had checked the Illinois Department of Corrections sex registrant website. 4. R19's EMR showed R19 was admitted to the facility on July 4, 2025. The facility was unable to provide documentation that they had checked the Illinois Department of Corrections sex registrant website. 5. R20's EMR showed R20 was admitted to the 	S9999		

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S9999	<p>Continued From page 2</p> <p>facility on June 30, 2025. R20's CHIRP was completed 20 days prior to admission to the facility. The facility was unable to provide documentation that they had checked the Illinois Department of Corrections sex registrant website.</p> <p>6. R21's EMR showed R21 was admitted to the facility on June 30, 2025. The facility was unable to provide documentation that they had checked the Illinois Department of Corrections sex registrant website.</p> <p>7. R22's EMR showed R22 was admitted to the facility on July 1, 2025. The facility was unable to provide documentation that they had checked the Illinois Department of Corrections sex registrant website.</p> <p>8. R23's EMR showed R23 was admitted to the facility on July 2, 2025. The facility was unable to provide documentation that they had checked the Illinois Department of Corrections sex registrant website.</p> <p>9. R24's EMR showed R24 was admitted to the facility on July 2, 2025. The facility was unable to provide documentation that they had checked the Illinois Department of Corrections sex registrant website.</p> <p>10. R25's EMR showed R25 was admitted to the facility on July 2, 2025. R25's CHIRP was completed seven days prior to admission to the facility. The facility was unable to provide documentation that they had checked the Illinois Department of Corrections sex registrant website.</p> <p>On July 9, 2025, at 10:28 AM, V16 (Admission Director) said when she is informed the facility will be admitting a resident, she runs the CHIRP,</p>	S9999		

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S9999	<p>Continued From page 3</p> <p>DOC (Illinois Department of Corrections) inmate search, Illinois Sex Offender, and the National Sex Offender. She was not aware that she had to check the Illinois Department of Corrections sex registrant website. V18 said she is supposed to run the CHIRP within 24 hours of admission, but she said she will run the CHIRP in advance and does not run them again once the resident has been admitted.</p> <p>The facility provided their undated policy titled, "Identified Offender Facility Policy and Procedure". The policy showed, "Identifying Offenders ...3. Check for the resident's name on the Illinois Department of Parolee sex registrant search page www.idoc.illinois.gov > offender > paroleesexregistrantsearch. 4. Conduct a Criminal History Background Check: Within 24 hours of admission ..."</p> <p>"C"</p> <p>Statement of Licensure Violations 2 of 3</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 evidenced by:</p> <p>Based on interview and record review, the facility failed to complete required background checks on newly hired Certified Nursing Assistants (CNAs) and unlicensed employees before they started working in the facility.</p>	S9999		

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S9999	<p>Continued From page 4</p> <p>This applies to all 178 residents residing in the facility.</p> <p>Findings include:</p> <p>V3 (Certified Nursing Assistant, CNA), V4 (CNA), V5 (CNA), V6 (CNA), V7 (CNA), V8 (Housekeeping), V9 (Dietary Aide) were reviewed for employee backgrounds checks.</p> <p>Employee hire dates are as follows:</p> <p>V3 was hired on September 3, 2024</p> <p>V4 was hired on September 3, 2024</p> <p>V5 was hired on February 26, 2025</p> <p>V6 was hired on March 5, 2025</p> <p>V7 was hired on July 2, 2025</p> <p>V8 was hired on November 25, 2024</p> <p>V9 hired on November 5, 2024</p> <p>As of July 7, 2025, at 11:36 AM, the facility did not have any documentation to show that V3, V4, V5, V6, V7, V8, and V9 backgrounds were checked on the following required websites: Illinois sex offender website, the Department of Corrections Sex Offender website, the Department of Corrections inmate search, the Department of Corrections fugitive search, the National Sex offender website, and the Health and Human Services Office of Inspector General website.</p> <p>On July 7, 2025 at 11:36 AM, V4 (Human Resources Generalist) stated she is responsible for doing background checks on all staff. V4 stated she does not check employee names on the Illinois sex offender website, the Department of Corrections Sex Offender website, the Department of Corrections inmate search, the Department of Corrections fugitive search, the National Sex offender Website, and the Health</p>	S9999		

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S9999	<p>Continued From page 5</p> <p>and Human Services Office of Inspector General website.</p> <p>The facility's Employee Background Checks policy and procedure showed the following: Prior to a new employee starting a working schedule the following process will be initiated: 4. Check the IDOC (Illinois Department of Corrections) Website to verify that the employee is not a parolee or inmate. 5. Check the Illinois sex offender website to verify that the employee is not a registered sex offender. 8. Check the Office of inspector General website to verify the employee has participated in no fraud.</p> <p style="text-align: center;">"C"</p> <p>Statement of Licensure Violations 3 of 3</p> <p>300.2100</p> <p>Section 300.2100 Food Handling Sanitation</p> <p>Every facility shall comply with the Department's rules entitled "Food Service Sanitation" (77 IL Adm Code 750). (Source: Amended at 49 Ill. Reg. 760, effective December 31, 2024)</p> <p>This REQUIREMENT was not met as evidenced by:</p> <p>Based on observations, interview and record review, the facility failed to follow sanitary practices during food preparation and storage.</p> <p>This applies to all 175 residents that receive food prepared in the facility kitchen.</p> <p>Findings include:</p> <p>Facility midnight census report dated July 7,</p>	S9999	

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S9999	<p>Continued From page 6</p> <p>2025, showed that the facility census was 178 residents. The facility provided additional information that 3 residents were on NPO (Nothing by mouth) status.</p> <p>On July 7, 2025, at 9:40 AM the food storage bins in the dry storage room had dust and unknown food particles on top of container. On one of the bins that stored raw rice, there was a scoop stored on top of the bin that also had unknown food particles, dust and grime.</p> <p>On July 7, 2025, at 9:42 AM, V12 (Cook) was seen preparing pureed foods in a blender at a food prep station near a sink. The sink contained two tall and deep containers holding raw meat steeped in water. V12 stated that it was under running water earlier. In another adjacent compartment of the same sink there was an open slotted pan containing mushrooms. V12 then discarded his gloves on the counter and drained the water from the two pans containing the raw meat and set it next to the blender of pureed food. The water inside the pan was seen falling directly on to V12's hands as he drained the pan and spilling over the outside of the container. The drained water was also seen come up into the sink that held the mushrooms in the pan, and seeping into the mushrooms from the slots at the base of the pan. Without washing his hands, V12 took the pan of mushrooms and set it on another clean container that was next to an open box of peas on a counter. V12 stated that he is going to use that same container for the peas. Without washing his hands, V12 then went to handle the blender that he was earlier preparing pureed foods.</p> <p>On July 7, 2025, at 9:49 AM, the walk-in cooler #1 had an unlabeled container with contents with the</p>	S9999		

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S9999	<p>Continued From page 7</p> <p>appearance of tuna salad.</p> <p>On July 7, 2025, at 9:50 AM, in the dry storage, there were two dented cans stored with other cans on slanted shelving and was identified as Diced Peaches (6 pounds/9 ounce) and Diced Beets (6 pounds, 8 ounces).</p> <p>On July 7, 2025, at 9:52 AM and at 10:05 AM, dirty dish rags were scattered on the food prep counter where there were sandwiches made by V14 (dietary Aide) and at the coffee station.</p> <p>On July 7, 2025, at 10:06 AM, and at 12:14 PM, V11 (Dietary Manager) stated that the dirty rags should be stored in sanitizer buckets. V11 stated that the surface areas on the food bins should be clean and that the scoop should be stored in a holder at the side of the bin.</p> <p>On July 7, 2025, at 12:18 PM, the walk-in freezer was checked in presence of V11 (Dietary Manager) and V10 (Assistant Administrator). Multiple boxes containing food items were seen piled on top of each other covering around 2/3rd of the floor of the freezer. The boxes on the bottom were noted bulging with the weight of the boxes piled on top with some of the contents spilling on the floor. V10 stated that some of these boxes may have been moved from another freezer as it was not working. The adjacent walk-in freezer was noted to be out of order. V11 added that foods should not be stored on the floor.</p> <p>On July 8, 2025, at 10:23 AM, V15 (Dietitian) stated that foods in the freezer should be stored six inches off the floor and hands should be washed in between tasks to prevent cross contamination.</p>	S9999		

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S9999	<p>Continued From page 8</p> <p>Facility Dietary Policy and Procedure Manual (2018) for "Storage of dry goods/foods" included that foods stored in bins is removed from original packaging and scoops are stored in scoop holders or in a clean designated place. Dented cans are stored in a designated area to be returned to vendors.</p> <p>Facility Dietary Policy and Procedure Manual (2018) for "Handwashing" included as follows:</p> <p>Policy: Food and nutrition services will practice safe food handling to prevent food borne illness.</p> <p>Procedure: Food and nutrition services employees will thoroughly wash their hands and exposed areas of their arms with soap and water in the designated hand-washing sink at the following times: ...Whenever necessary to remove soil or contamination. When switching between working with raw food and working with ready to eat foods.</p> <p>Facility Dietary Policy and Procedure Manual (2018) for "Sanitation bucket and wiping clothes" included as follows: Policy: Wiping cloths kept in a sanitation bucket containing solution of water and chemical sanitizer are used to sanitize food contact surfaces and equipment too large to immerse in three-compartment sink.</p> <p>Facility Dietary Policy and Procedure Manual (2018) for "Storage of Foods" included as follows:</p> <p>Procedure: Appropriate storage procedures are followed: Food is stored six inches above the floor. Food is stored to allow air circulation....</p> <p>"C"</p>	S9999		