

Illinois State Department of Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTIONS		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 0054841		(X2) MULTIPLE CONSTRUCTION A. BUILDING B. WING		(X3) DATE SURVEY COMPLETED 09/04/2025	
NAME OF PROVIDER OR SUPPLIER BRIAR PLACE NURSING				STREET ADDRESS, CITY, STATE, ZIP CODE 6800 WEST JOLIET , INDIAN HEAD PARK, Illinois, 60525			
(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) COMPLETION DATE	
S0000	Initial Comments		S0000			09/10/2025	
	Complaint Investigation FRI OF 8/15/25 – IL2604048						
S9999	Final Observations		S9999			09/10/2025	
	Statement of Licensure Violation:						
	300.610a)						
	300.1210b)						
	Section 300.3210t)						
	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 and shall be reviewed at least annually by this committee, documented by written, signed and dated minutes of the meeting.						
	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.						
	Section 300.3210 General						

Office of Primary Care and Health Systems Management

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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S9999	Continued from page 1 t) The facility shall ensure that residents are not subjected to physical, verbal, sexual or psychological abuse, neglect, exploitation, or misappropriation of property. These requirements were not met as evidenced by: Based on observation, interview, and record review, the facility failed to follow its abuse prevention policy by not protecting a resident from financial exploitation. This failure resulted in mental anguish and helplessness among 1 of 4 residents (R2) reviewed for theft and abuse in a sample of 4. The findings include: R2 is a 59-year-old female who was admitted on July 8, 2025, and is independent in cognitive skills for daily decision-making, as per the Minimum Data Set (MDS) dated July 12, 2025. On 9/2/25 at 12:05 PM, R2 stated, "I originally had \$1200 in my account, and I ran out \$800 out of \$1,200. I didn't give my bank card to anyone. Someone stole my card. The facility received my card through the mail, and I don't know why they left my mail under my pillow while I was admitted to the hospital. Somebody stole my card and used it in the neighborhood store. I am worried about my financial security here, and I don't know what to do. I didn't authorize anybody to buy stuff for me. When I returned from the hospital, I noticed charges on my card that I did not recognize. I called my bank, and they assisted me in making a report on these fraudulent charges. It was so stressful for me to call the bank and file a police report." A review of the facility's reportable incident dated August 15, 2025, showed that on August 22, 2025, police brought a picture of a person leaving a store where R2's card was used. The person in the picture appeared to be V5 (Certified Nursing Assistant/CNA), an employee of the facility. The police and facility administrator questioned V5 about taking the card, which V5 denied having done. As a result, V5 was immediately suspended pending the outcome of the investigation. A review of the police report with status date 8/20/25 documents that the police contacted the bank, and the bank confirmed multiple unauthorized transactions and withdrawals on R2's bank card by V5. On 9/2/25 at 11:45 AM, V6 (Social Service Director) stated, "Our investigation found a significant amount		S9999				

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S9999	Continued from page 2 of money missing from R2's credit card. We interviewed V5 (CNA), who claimed that R2 had requested him to purchase items at the store, but R2 reported unrecognized charges. Even if a resident request such purchases, staff are not authorized to make them. Based on this, V5 was suspended, though I am not certain about his current termination status." On 9/2/25 at 11:50 AM, V7 (Human Resource Director) stated, "V5 was previously reprimanded for violating the uniform code. In this incident, V5 purchased items at a store using R2's card, allegedly at R2's request, but this was outside his job duties. As a result, we decided to terminate V5. I have been trying to reach him by phone to complete the termination, but he has not responded. Originally, he was suspended, and we are now moving to terminate him." On 9/3/25 at 12:20 PM, V9 (Activity Director) stated, "Honestly, I don't remember the date I delivered R2's mail under her pillow. We usually deliver mail to residents' hands. In this specific scenario, I didn't know that R2 was out of the facility, and that's why I left it under the pillow. If the resident is not there, I should have given it to social services to securely store." On 9/3/25 at 11:25 AM, V1 (Administrator/Abuse Coordinator) stated, "We provide abuse in-service on a quarterly and as needed. The residents have the right to be free from abuse." A review of the facility presented an abuse prevention policy dated 01/24 document: Residents have the right to be free from abuse, neglect, exploitation, misappropriation of property, or mistreatment. B		S9999				