

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6014781	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 10/22/2021
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NAME OF PROVIDER OR SUPPLIER SOUTHPOINT NURSING & REHAB CENTER	STREET ADDRESS, CITY, STATE, ZIP CODE 1010 WEST 95TH STREET CHICAGO, IL 60643
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S 000	Initial Comments	S 000		
S9999	<p>ANNUAL LICENSURE</p> <p>Final Observations</p> <p>Statement of Licensure Violations Violation 1 of 2</p> <p>300.2010a)1)</p> <p>Section 300.2010 Director of Food Services</p> <p>a) A full-time person, qualified by training and experience, shall be responsible for the total food and nutrition services of the facility. This person shall be on duty a minimum of 40 hours each week.</p> <p>1) This person shall be either a dietitian or a dietetic service supervisor.</p> <p>This requirement was not met as evidenced by:</p> <p>Based on interview and record review, the facility failed to ensure the Food Service Supervisor is qualified to be a Food Service Supervisor/Dietary Manager for the facility. This failure has the potential to affect all 166 residents who receive an oral diet in the facility.</p> <p>The findings include:</p> <p>On 10/19/21 at 10:25 AM, V5 (Food Service Supervisor/F.S.S.) stated she has the food service sanitation certificate but not the dietary manager's certificate which is a 90 hour course. V5 stated she is suppose to be enrolled but provided no documentation that V5 is in a dietary manager's course. V5 stated she has worked in the kitchen for 2 years with the last year being the</p>	S9999	<p>Attachment A Statement of Licensure Violations</p>	

Illinois Department of Public Health
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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S9999	<p>Continued From page 1</p> <p>F.S.S. V5 stated that V6 (Registered Dietician), the facility's consultant, comes to the facility now and then and that most of V6's work is done remotely.</p> <p>On 10/20/21 at 2:20 PM, V6 stated she usually comes to the facility 4 times a month and spends 3 hours or less in the facility. At 3 PM, V6 and V5 stated that there are 174 residents in the facility currently and of that, 166 residents receive an oral diet from the kitchen.</p> <p>300.2090)a 300.2090)b</p> <p>Section 300.2090 Food Preparation and Service</p> <p>a) Foods shall be prepared by appropriate methods that will conserve their nutritive value, enhance their flavor and appearance. They shall be prepared according to standardized recipes and a file of such recipes shall be available for the cook's use.</p> <p>b) Foods shall be attractively served at the proper temperatures and in a form to meet individual needs.</p> <p>This requirement was not met as evidenced by:</p> <p>Based on observation, interview and record review, the facility failed to follow the recipes in order to conserved their nutritive value, failed to follow the posted menu, failed to take cooking temperature during the noon meal, failed to prepare cold food items in advance to ensure enough time to cool down and failed to have enough working ovens to prepare, cook and maintain temperatures of all food products and failed to follow their kitchen policies and a kitchen policy lacking required amount of sanitizing</p>	S9999		

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S9999	<p>Continued From page 2</p> <p>solution. These failures have the potential to affect 166 residents in the facility who receive an oral diet.</p> <p>The findings include:</p> <p>In the main kitchen on 10/20/21 at 9:06 AM, V8 (Cook) was finishing the pureed mostaccioli noodles. V8 stated she is adding water to obtain a mashed potato consistency. V8 stated she has prepared the noon meal and is just finishing this last pureed product. V8 stated that the noon meal will be Mostaccioli with Meat sauce, Italian Blend Vegetable, Blonde Brownie, Garlic Texas Toast and coffee/tea. V8 was asked to say what and how the food was prepared since it was all done before 9 AM and the noon meal is served at 11:15 AM. V8 stated that she started with 25 pounds of ground beef which came in 5 pound packages that was defrosted over-night in the refrigerator. V8 stated she browned the meat and added half cup of garlic powder, half cup of onion powder, half cup of red bell peppers, half cup of green bell peppers, half cup of seasoning salt, 4 cans (106 ounces each) of tomato sauce and 2 cans (102 ounces) of diced tomatoes which she saute for a hour on the stove. V8 stated as the meat saute, the mostaccioli was boiled. The cooked mostaccioli was added to the meat mixture for the regular consistency diets and placed in 3 large (13 inch by 18 inch and 6 inches deep) pans and placed on steam table. There were no recorded temperatures for the prepared items at 9:28 AM. V8 stated the Italian Blend Regular consistency vegetables are in the oven at holding temperature of 175 degrees Fahrenheit (F.) since 8:55 AM. At 9:28 AM, V5 was asked to take a temperature of the prepared mostaccioli on the steam-table. V5 used the facility's digital</p>	S9999		

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S9999	<p>Continued From page 3</p> <p>thermometer and got a temperature of 120 degrees F.. V8 stated the kitchen has 2 convection ovens to use. The 2 stoves with 2 ovens each are inoperable and have been for close to one year. The range portion of one of the two stoves worked. V5 (Food Service Supervisor) stated that the stove needs parts that the facility has been unable to acquire. V5 was asked for the paper work trail on trying to get parts or a new stove. The only paper provided was a quote on a new stove dated 10/5/2021. There was no indication that the stove was going to be purchased. V8 stated the pureed vegetable were prepared with chicken base, garlic salt and seasoning salt and placed on the steam table at 9:40 AM. These ingredients are not listed in the recipe. See recipe below.</p> <p>Returned back to kitchen at 10:25 AM and the beef patties are being cooked on stove range for the renal diet along with the grilled cheese sandwiches for the substitute. The pans of the mostaccioli were placed back in the convection ovens at 10:20 AM at 300 degrees F. per V8. There were 2 large (13 inch by 18 inch and 6 inch deep each) pans of regular consistency vegetables on stove with flames under the pans for about 10 minutes and the flame turned off at 10:35 AM. No temperature was taken of the vegetable when the flame was turned off nor was there a temperature taken from when it was in the convection oven earlier. At 10:45 AM, V5 (FSS) melts butter and garlic in a pan to brush over the breadsticks. The menu calls for Texas Garlic Bread not bread sticks. V5 asks V10 (Dietary Technician) to get a basting brush. The basting brush handed to V5 was noted with 1 inch in length black, permanent discoloration of the white bristles at the base of the brush. V5 went ahead and used the brush to apply the melted</p>	S9999		
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S9999	<p>Continued From page 4</p> <p>butter/garlic to the bread sticks. At 10:49 AM, the 2 pans of mostaccioli were removed from the oven along with a pan (13 inch by 6 inch by 6 inch deep) of puree vegetable and a pan of pureed meat sauce to the steam table. There were no temperatures taken of any cooked food product before placing it on the steam table. At 10 :53 A.M., the 6 large sheet pans of garlic bread sticks are placed in oven at 300 degrees F. V8 stated they will be baked for 7 to 8 minutes. When the oven alarm went off, the bread sticks were not removed immediately so the bottoms of the bread sticks were over cooked with a dark brown discoloration. It is 11 AM and V8 is preparing the pureed bread and V10 is preparing the pureed brownies. The noon meal is served at 11:15 AM. As V8 was preparing the bread crumbs with tap cool water, V8 stated she almost forgot to prepare the pureed bread. The pureed bread was noted soupy. V10 was preparing the pureed brownies with 2% milk and thickener. Both the pureed bread and brownies are to be cooled to 41 F. degrees before serving per the facility's recipes. No temperature was taken of either product and not enough time was given for both products to cool to 41 degrees F. before the noon meal.</p> <p>At 11:08 AM, the pureed meat was tasted and found to be very bland with no distinct meat flavor found. The pureed vegetable was found to be very bland with no distinct flavor except maybe a slight carrot flavor.</p> <p>At 11:14 AM, V8 was using the facility's digital thermometer to take temperatures of the foods on the steam table. V8 was putting the whole stem (4.75 inches long) of the thermometer into the food product touching the food product with her gloved hand. V8 stated "I am burning my</p>	S9999		
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S9999	<p>Continued From page 5</p> <p>finger". V8 was instructed that the whole stem does not need to be inserted so that the thermometer is not touching the bottom of the metal pan. V8 continued to take the temperature of the food this way. The thermometer temperature was slow in rising (one minute) to the appropriate temperature. V8 read off the temperatures to V5 who recorded the temperatures. This was the only time that food temperatures were taken.</p> <p>The facility's policy labeled MONITORING FOOD TEMPERATURES FOR THE MEAL SERVICE documents that food temperatures will be taken and recorded for all hot and cold foods prior to placing them on the serving line. The temperature for each food item shall be recorded on the Food Temperature Log. Proper procedure are used to ensure measured temperatures are accurate and contamination is avoided. When taking temperatures, the thermometer is inserted into the thickest part of the food, not touching any part of the container and held to maximum or minimum temperature is reached.</p> <p>On 10/20/21 at 3 PM, V6 (Registered Dietician) stated there are 166 residents receiving an oral diet in the facility and of that, seven residents receive a pureed diet and 8 residents receive no oral diet in the facility.</p> <p>The recipe for the meat sauce documents for 200 servings that 25# of thawed ground beef is used. Start with a large stock pot and add half cup and 11 teaspoons of vegetable oil into the pot and heat. Then add 6 and half cups of chopped onion and saute for 5 minutes or until tender, Add 2 and half teaspoon of chopped garlic and saute another 2 minutes. Add the ground beef to the onions and garlic. Brown meat over a medium</p>	S9999		
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S9999	<p>Continued From page 6</p> <p>heat until the meat is browned and no pink color remains. Drain excess liquid and grease. Add all remaining ingredients which includes 11 and half cups of chicken broth, 8 teaspoons of garlic powder, 1 and a quarter teaspoon of black pepper and 2 and half teaspoon of salt. Cook the sauce on a low heat for at least 45 minutes to an hour. If sauce too thick, add some additional chicken broth to thin out. Transfer to steam table. The cooked ground beef should of reached a temperature 155 degrees F. for at least 17 seconds when cooked and 165 degrees F. for 15 seconds when added to another product. This recipe was not followed per V8's interview.</p> <p>The recipe for the pureed mostaccioli documents that the cooked noodles are placed in food processor and the pureed sauce or broth is added in food processor until smooth. Re-heat to a minimum of 165 degrees F. and keep at or above 145 degrees F throughout meal service. This was not followed. V8 kept the pureed noodle and pureed meat sauce separate on steam table.</p> <p>The recipe for the pureed Italian blend vegetables documents place prepared vegetables in food processor, blend, adding cooking liquid from the regular vegetables until smooth and correct consistency is reached. Reheat to 165 degrees F. or higher and hold at 135 degrees F. or higher on the steam table. The recipe for the regular consistency vegetable documents to boil or steam vegetables for 5 to 7 minutes until a internal temperature of 135 degrees F. is reached. Do not over cook vegetables because they will be mushy. Transfer to steam table pans. Melt margarine. Mix margarine, lemon juice, salt, pepper and parsley and drizzle mixture over cooked and drained vegetables and toss lightly.</p>	S9999		

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S9999	<p>Continued From page 7</p> <p>This recipe was not followed. The vegetables were in the oven at 175 degrees F. at 9:06 AM for at least 30 minutes then placed on stove top to sit until re-heated again between 10:25 AM to 10:35 AM.</p> <p>300.2100</p> <p>Section 300.2100 Food Handling Sanitation Every facility shall comply with the Department's rules entitled "Food Service Sanitation" (77 Ill. Adm. Code 750).</p> <p>This requirement was not met as evidenced by:</p> <p>Based on observation, interview and record review, the facility failed to maintain the the floors, walls, equipment and utensils in a sanitary, clean condition and failed to ensure all equipment in the kitchen is in good working condition in the Main Kitchen. These failures have the potential to affect all 166 residents receiving an oral diet in the facility.</p> <p>The findings include:</p> <p>In the main kitchen on 10/19/21 between 10:25 AM to 11:05 AM. accompanied by V5 (Food Service Supervisor/F.S.S.), the drop ceiling tiles, the walls, a metal rack that hangs from the ceiling for hanging pots are heavily coated with a build-up of brown, black, sticky substances and black dust. V5 stated that the ceiling tiles are going to be replaced. V5 was instructed that in the meantime, all areas need to remain clean. In the Dry Food Storage Room, the walls and floor were splattered with food spills and splatters. The ceiling tiles were discolored with dried stains.</p> <p>The exterior of the reach in refrigerator for the</p>	S9999		
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S9999	<p>Continued From page 8</p> <p>milk was extensively rusted and pitted.</p> <p>Inside the microwave, the ceiling portion was heavily coated (quarter inch thick) with dried-on, sticky black food debris of a long standing nature.</p> <p>The floor mixer is inoperable and not used per V5 and V8 (Cook). The mixer is open to air with a heavy accumulation of rust particles in the large metal bowl and the exterior is rusted and pitted and encrusted with food splatters.</p> <p>In the walk-in refrigerator and freezer, the floors are covered with thick, black, tar-like substances and spills under the shelving. The walls have dried streaks and splatters. The plastic flap is coated with black tar-like substances in the walk-in freezer. The walk-ins fan grids are coated with black, sticky substances and dust.</p> <p>All the exterior of the kitchen equipment is heavily encrusted with dried sticky spills and substances of a long standing nature and/or heavily pitted and rusted.. The equipment includes the stoves, convection ovens, the steam-table, carts for holding the dish ware, the meal carts and the drying racks for storing the dishes. The electrical junction and pipes under the steam table are coated with heavy accumulation of black, sticky dried substance of a long standing nature. The burners were coated with black, burnt food debris and sticky substances.</p> <p>The steam-table wells were filled with brown water that had floating food debris in it along with black burnt food substances build-up inside the bottom of the pans. The water was not dumped before putting the noon meal on the steam-table. This was noted on 10/19/21 and again on 10/20/21 for all 3 meals. On 10/20/21 at 3 PM, V5</p>	S9999		

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S9999	<p>Continued From page 9</p> <p>stated that the well water is to be dumped after every meal but this was not done. The wells were still in the same condition.</p> <p>Dishes were coming out wet and stacked inverted preventing them from air drying.</p> <p>V5 stated that the cleaning days are Tuesday and Friday of every week. V5 was informed that the dirt and debris in the kitchen is deplorable and is of a long standing nature and cleaning is not being done weekly as V5 stated..</p> <p>V9 (Dietary technician) stated the sanitizer is a quaternary ammonia and V9 tested the 3 compartment sink with facility's quaternary test (litmus) kit and stated the sanitizer should read 200 ppm (parts per million) and the litmus test strip showed the sanitizer is over 400 ppm. V9 stated that there is too much sanitizer.</p> <p>A policy labeled Three and Two Compartment Sinks has another entities name on it. The policy documents to fill the 3rd sink with water and sanitizer to the correct concentration according to the manufacturer's guidelines (record ppm). The policy is not detailed to this facility and it does not document what the manufacturer's guidelines are to be followed. Nor were the guidelines posted by the 3 compartment sink.</p> <p>On 10/20/21 at 2:20 PM, V6 (Registered Dietician) stated she does do quarterly sanitation inspections and stated she has the documentation which is from about 2 months ago. On 10/20/21 at 3 PM, V6 (Registered Dietician) stated there are 166 residents receiving an oral diet in the facility and of that, seven residents receive a pureed diet and 8 residents receive no oral diet in the facility. The information</p>	S9999		
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S9999	<p>Continued From page 10</p> <p>on the number of diets and type of diets provided by V5 on 10/19/21 was inaccurate and based on 197 residents. V6 was having trouble with Internet so V6 was told she could email her sanitation findings from 2 months ago.</p> <p>V6 emailed a undated federal sanitation check list form that fails to documents any issues with sanitation, broken equipment, following the menus and/or recording food temperatures. The sanitation check list documents the Dietary/Food Service Supervisor is qualified which is untrue.</p> <p>The facility's cleaning policies and work orders were requested on 10/19/21 and 10/20/21 from V5 and V7 (Maintenance Director). The policies and work orders were never provided.</p> <p>(B)</p> <p>Violation 2 of 2</p> <p>300.675a) 300.675b) 300.675c)1)3)4) 300.375d)3)4) Section 300.675 - COVID-19 Training Requirements</p> <p>Universal Citation: 77 IL Admin Code § 300.675</p> <p>a) Definitions. For the purposes of this Section, the following terms have the meanings ascribed in this subsection (a): 1) "CMMS Training" means CMMS Targeted COVID-19 Training for Frontline Nursing Home Staff and Management, available at https://QSEP.cms.gov. 2) "Frontline clinical staff" means the medical director of the facility, facility treating physicians, registered nurses, licensed practical nurses, certified nurse</p>	S9999		

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S9999	<p>Continued From page 11</p> <p>assistants, psychiatric service rehabilitation aides, rehabilitation therapy aides, psychiatric services rehabilitation coordinators, assistant directors of nursing, directors of nursing, social service directors, and any licensed physical, occupational or speech therapists. Any consultants, contractors, volunteers, students in any training programs, and caregivers who provide, engage in, or administer direct care and services to residents on behalf of the facility are also considered frontline clinical staff. 3) "Management staff" means any facility staff who: A) Assign and direct nursing activities; B) Oversee comprehensive assessment of residents' medical needs and care planning; C) Recommend numbers and levels of nursing personnel; D) Plan nursing service budgeting; E) Develop standards of nursing practice; F) Supervise in-service education and skill training for all personnel; or G) Participate in the screening of prospective residents and resident placement. b) Required Frontline Clinical Staff Training 1) All frontline staff employed by facilities shall complete the following portions of CMMS Training: A) Module 1: Hand Hygiene and PPE; B) Module 2: Screening and Surveillance; C) Module 3: Cleaning the Nursing Home; D) Module 4: Cohorting; and E) Module 5: Caring for Residents with Dementia in a Pandemic 2) Facilities shall ensure at least 50% of frontline clinical staff have completed the CMMS Training by January 31, 2021. 3) Facilities shall ensure 100% of the frontline clinical staff have completed the CMMS Training by February 28, 2021. 4) Facilities shall require, within 14 days after hiring, CMMS Training for all frontline clinical staff hired after January 31, 2021. c) Required Management Staff Training 1) All management staff employed by facilities shall complete the following portions of CMMS Training: A) Module 1: Hand Hygiene</p>	S9999		
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Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6014781	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 10/22/2021
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NAME OF PROVIDER OR SUPPLIER SOUTHPOINT NURSING & REHAB CENTER	STREET ADDRESS, CITY, STATE, ZIP CODE 1010 WEST 95TH STREET CHICAGO, IL 60643
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(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
S9999	<p>Continued From page 12</p> <p>and PPE; B) Module 2: Screening and Surveillance; C) Module 3: Cleaning the Nursing Home; D) Module 4: Cohorting; E) Module 5: Caring for Residents with Dementia in a Pandemic; F) Module 6: Infection Prevention and Control; G) Module 7: Emergency Preparedness and Surge Capacity; H) Module 8: Addressing Emotional Health of Residents and Staff; I) Module 9: Telehealth for Nursing Homes; and J) Module 10: Getting Your Vaccine Delivery System Ready.</p> <p>3) Facilities shall ensure 100% of management staff have completed the CMMS Training by February 28, 2021. 4) Facilities shall require, within 14 days after hiring, CMMS Training for all management staff hired after January 31, 2021. d) By January 31, 2021, all facilities shall certify compliance, in the form and format specified by the Department, with subsections (b)(2) and (c) (2). e) By February 28, 2021, all facilities shall certify compliance, in the form and format specified by the Department, with subsections (b) (3) and (c)(3). (Added by emergency rulemaking at 44 Ill. Reg. 19551, effective December 2, 2020, for a maximum of 150 days Emergency rule amended by emergency rulemaking at 45 Ill. Reg. 393, effective December 18, 2020, for the remainder of the 150 days Added by emergency rulemaking at 45 Ill. Reg. 6354, effective May 1, 2021, for a maximum of 150 days)</p> <p>Ill. Admin. Code tit. 77, § 300.675</p> <p>This requirement was NOT MET as evidenced by:</p> <p>Based on interview and record review, the facility failed to ensure the COVID-19 (Coronavirus) Training requirements were met for frontline and management staff.</p>	S9999		

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6014781	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 10/22/2021
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NAME OF PROVIDER OR SUPPLIER SOUTHPOINT NURSING & REHAB CENTER	STREET ADDRESS, CITY, STATE, ZIP CODE 1010 WEST 95TH STREET CHICAGO, IL 60643
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(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
S9999	<p>Continued From page 13</p> <p>Findings Include:</p> <p>On 10/20/21 at 11:36 AM V3 (Interim Director of Nursing) stated "we are a work in progress. We are doing an audit and are in the process of getting the COVID-19 (Coronavirus) Focused training back on track."</p> <p>On 10/20/21 at 02:12 PM V3 (Interim Director of Nursing) stated "right now there are only physically twenty two training certificates. Human Resources is doing an audit to see if there are any more certificates. I am not aware that the staff did not complete the training. Some people are saying that they didn't remember the email that was sent. We sent an email out yesterday to everyone in general that they need to complete or print the certificate for the CMS (Centers for Medicare & Medicaid Services) Guide line requirement for health care workers. I started the training but have no completed it. The list that was given to you is for staff that is currently employed."</p> <p>On 10/20/21 at 01:11 PM V5 (Dietary Director) stated "I completed the CMS COVID-19 Focused training." (There is no Certificate for V5 in the CMS Training binder.)</p> <p>On 10/20/21 at 01:31 PM V11 (Certified Nurse Assistant) stated "I have not completed the CMS COVID-19 Focused training. I just got an email for me to do the training."</p> <p>On 10/20/21 at 01:34 PM V12 (Licensed Practical Nurse) stated "I have not completed the CMS COVID-19 Focused training. They just sent an email today for me to do the training."</p>	S9999		

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6014781	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 10/22/2021
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NAME OF PROVIDER OR SUPPLIER SOUTHPOINT NURSING & REHAB CENTER	STREET ADDRESS, CITY, STATE, ZIP CODE 1010 WEST 95TH STREET CHICAGO, IL 60643
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S9999	<p>Continued From page 14</p> <p>Record review of the facility's CMMS Training certificates showed there is no Certificate for V3, V5, V11 or V12 in the CMS Training binder and only 22 out of 145 frontline and management staff members completed the CMMS (Centers for Medicare & Medicaid Services) Targeted COVID -19 Training Final Facility Certification.</p> <p>Record review of the list provided by the facility of frontline and management staff indicate the CMMS (Centers for Medicare & Medicaid Services) Targeted COVID -19 Training Final Facility Certification was not completed by 123 staff members.</p> <p>CMMS (Centers for Medicare & Medicaid Services) Targeted COVID -19 Training Final Facility Certification form received from V1 (Administrator) on 10/20/2021 reads: "Unable to sign due to training not being completed."</p> <p>(C)</p>	S9999		
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