

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL 6007280	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 10/05/2022
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NAME OF PROVIDER OR SUPPLIER APERION CARE HIGHWOOD	STREET ADDRESS, CITY, STATE, ZIP CODE 50 PLEASANT AVENUE HIGHWOOD, IL 60040
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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
S 000	Initial Comments Annual Licensure	S 000		
S9999	<p>Final Observations</p> <p>Statement of Licensure Violations:</p> <p>1 of 2 300.615e)</p> <p>Section 300.615 Determination of Need Screening and Request for Resident Criminal History Record Information</p> <p>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)</p> <p>This requirement was NOT MET as evidenced by:</p> <p>Based on interview and record review the facility failed to complete background checks within 24 hours of residents being admitted for 3 of 10 Residents (R52, R79, and R301) reviewed for background checks in the sample of 19.</p> <p>The findings include:</p>	S9999	<p style="text-align: center;">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>1. R52's Admission Record showed R52 was admitted on 8/9/22.</p> <p>R52's background check was dated 8/19/22 (10 days after being admitted).</p> <p>2. R301's Admission Record showed R301 was admitted on 9/9/22.</p> <p>R301's background check was dated 9/19/22 (10 days after being admitted).</p> <p>3. R79's Admission Record showed R79 was admitted on 9/2/22.</p> <p>R79's background check was dated 9/6/22 (4 days after being admitted).</p> <p>On 10/4/22 at 12:58 PM, V3 (Assistant Administrator) said background checks were to be done on admission and the facility follows the state guidance regarding background checks. V3 could not provide information regarding when R52, R79, and R301's background checks were requested.</p> <p>(C)</p> <p>2 of 2 300.610a) 300.1020c)</p> <p>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</p>	S9999		

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S9999	<p>Continued From page 2</p> <p>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.</p> <p>Section 300.1020 Communicable Disease Policies</p> <p>c) All illnesses required to be reported under the Control of Communicable Diseases Code and Control of Sexually Transmissible Diseases Code (77 Ill. Adm. Code 693) shall be reported immediately to the local health department and to the Department. The facility shall furnish all pertinent information relating to such occurrences. In addition, the facility shall inform the Department of all incidents of scabies and other skin infestations.</p> <p>This requirement WAS NOT met as evidenced by:</p> <p>Based on observation, interview and record review the facility failed to notify the Illinois Department of Public Health (IDPH) of a scabies outbreak. This applies to 2 of 2 residents (R9 & R40) reviewed for scabies outbreak in the sample of 19.</p> <p>The findings include:</p> <p>On October 3, 2022 at 9:51 AM, R9's door was closed with two signs showing resident was on contact isolation. At 11:20 AM, V4 Licensed Practical Nurse (LPN) stated, R40 and R9 both were treated for scabies. R40 was on isolation because she was positive for scabies.</p> <p>R9's electronic medical records (EMR) shows, she was positive for scabies on September 21,</p>	S9999		

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S9999	Continued From page 3 2022. R40's EMR shows, she was positive for scabies on September 21, 2022. On October 4, 2022 at 11:23 AM, V2 Director of Nursing stated, she did not report the scabies outbreak to IDPH. She did not know she had to report it to IDPH. The facility's outbreak investigation and reporting-infection control policy dated February 15, 2018 shows, "Purpose: It is the policy of this facility that outbreak measure will be instituted whenever there is an incidence of infections above what would normally be expected, considering seasonal variations. Guidelines: ...Appropriate notifications will be issued to the medical director, administrator, all departments, attending physicians, and family members at a minimum and to appropriate state and local agencies. Outbreak monitoring and reporting will continue until resolution. At that time, narrative reports will be completed and forwarded to appropriate state and local agencies." (C)	S9999		