STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	IL6005003	A. BUILDING: _____ B. WING _____	C 11/21/2022

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
PARKSHORE ESTATES NURSING & REHAB	6125 SOUTH KENWOOD CHICAGO, IL 60637

(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 Complaints: 2288921/IL153103 & 2288995/IL153194	S 000		
S9999	Final Observations	S9999		
	Statement of Licensure Violations: 300.610a) 300.3240b) 300.3240d) Section 300.610 Resident Care Policies a) The facility shall have written policies and procedures, governing all services provided by the facility which 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. These policies shall be in compliance with the Act and all rules promulgated thereunder. These written policies shall be followed in operating the facility and shall be reviewed at least annually by this committee, as evidenced by written, signed and dated minutes of such a meeting. Section 300.3240 Abuse and Neglect b) A facility employee or agent who becomes aware of abuse or neglect of a resident shall immediately report the matter to the facility administrator. (Section 3-610 of the Act) d) A facility administrator, employee, or agent who becomes aware of abuse or neglect of a resident		**Attachment A** **Statement of Licensure Violations**	

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S9999	Continued From page 1 shall also report the matter to the Department. (Section 3-610 of the Act) These requirements were not met as evidenced by Based upon record review and interview the facility failed to report (R3's) actual injury to IDPH (Illinois Department of Public Health), failed to report (11/3/22) verbal and/or physical abuse to the Administrator, and failed to report (11/3/22) resident to resident and/or resident to staff abuse to IDPH within regulatory requirements for two of five residents (R1, R6) reviewed for abuse. Findings include: R1's (10/24/22) progress notes state resident (R1) allegedly hit another resident in his room. The (10/23/22) initial incident report states (R1) and (R3) were involved in an altercation. Nursing performed a full body assessment with no findings noted for (R1) and skin discoloration noted to (R3's) facial area. (R3's) physician gave order for x-ray and resident is being sent to the hospital for evaluation. R3's (10/25/22) head CT (Computed Tomography) includes left sided scalp swelling extending into the face. R3's (10/25/22) facial bones/sinus CT includes swelling at the left lateral cheek and surrounding the left parotid gland (salivary glands are located in your mouth in the upper part of either cheek. The ducts help empty saliva from mouth). Some left parotid gland edema. Left preseptal periportal swelling. Swelling at the left lateral orbital rim and left brow.	S9999		

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S9999	Continued From page 2 The (10/23/22) final report (submitted to IDPH via email on 10/28/22) states: (R3) was sent to the hospital for CT examination and "the medical records indicated no injury" [which is contrary to the findings]. On 11/17/22 at 2:12pm, surveyor inquired about R3's injuries (identified 10/25/22 via CT) V1 (Administrator/Abuse Coordinator) stated "I knew there was a CT, we (staff) actually discussed that there was a CT, and they (Radiologist) noted that there was swelling to the scalp." Surveyor inquired why R3's actual injuries were not included in the investigation and/or reportable incident V1 responded "My investigation could have been better and that's why I've been getting some training." On 11/9/22, IDPH received allegations that (R1) has aggressive behaviors at the facility. Staff are unable to address (R1's) behaviors. (R1) hit (unidentified resident) in the face. (R1) exhibited increasingly aggressive behavior towards staff and threatened to harm physically when attempted to redirect him (R1). R1's (11/3/22) progress notes state resident was petitioned to hospital for psychiatric evaluation for having a (physical) aggression towards roommate. R6's (11/3/22) progress notes state upon routine nursing rounds, staff noted resident was agitated due to roommate conflict regarding the use of bathroom. On 11/16/22 at 11:01am, surveyor inquired about the regulatory requirements for abuse V2 (Director of Nursing) replied "If you suspect or	S9999		

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S9999	Continued From page 3 witness abuse you get the patient out of immediate danger and notify the supervisor. I report it to my Administrator. We call the doctor, send the person out, or whatever that particular situation calls for at that time. The Administrator conducts an investigation. I believe it have to be reported (to IDPH) within 24 hours." Surveyor inquired about R1's (11/3/22) abuse incident V2 (Director of Nursing) stated "That wasn't an abuse" and affirmed there was no incident report and/or investigation conducted therefore the incident was not reported. Surveyor inquired why R1 required a psych evaluation (11/3/22) V2 stated "He (R1) felt like his roommate (R6) was taking too long in the bathroom. So, I went and talked with him" [R1's 11/3/22 progress notes include "physical aggression" towards roommate]. V2 stated "He (R1) said that if he (R1) had to wait for something that he (R1) was going go upside my head, he (R1) just would not calm down. So, I called the doctor and got orders to send him (R1) out." Surveyor inquired if R1 threatened to harm anyone (on 11/3/22) V2 replied "There were threats towards me not to his roommate, though he was just extremely agitated." Surveyor requested the definition of abuse V2 stated "There's different kinds of abuse like willful intent whether its verbal, physical, sexual or something that may harm an individual." The abuse prevention program (revised 1/2019) states when an alleged or suspected case of abuse, neglect, exploitation, or crime against a resident is reported to the facility Administrator, the Administrator, or DON in the Administrator's absence, will notify the following persons or agencies of such incident immediately. Abuse allegations involving one resident upon another resident will be reported to IDPH. The investigator will submit a final report of the	S9999		

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S9999	Continued From page 4 conclusion of the investigation in writing within 5 working days of the incident. The final investigation report shall contain the following: the original allegation: facts determined during the process of the investigation, review of medical record and interview of witnesses. (B)	S9999		