

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6002067	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 12/17/2023
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NAME OF PROVIDER OR SUPPLIER AUSTIN OASIS, THE	STREET ADDRESS, CITY, STATE, ZIP CODE 901 SOUTH AUSTIN BLVD CHICAGO, IL 60644
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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 Complaint Survey: #23810403/IL167762 - 300.625	S 000		
S9999	Final Observations Statement of Licensure Violations 300.625a) 300.625b) 300.625c)1)2) 300.625d) 300.625e) 300.625f)1)2) 300.6253)A)B 300.625g) Section 300.625 Identified Offenders a) The facility shall review the results of the criminal history background checks immediately upon receipt of these checks. b) The facility shall be responsible for taking all steps necessary to ensure the safety of residents while the results of a name-based background check or a fingerprint-based check are pending; while the results of a request for a waiver of a fingerprint-based check are pending; and/or while the Identified Offender Report and Recommendation is pending. c) If the results of a resident's criminal history background check reveal that the resident is an identified offender as defined in Section 1-114.01 of the Act, the facility shall do the following:	S9999	Attachment A Statement of Licensure Violations	

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) Immediately notify the Department of State Police, in the form and manner required by the Department of State Police, that the resident is an identified offender.</p> <p>2) Within 72 hours, arrange for a fingerprint-based criminal history record inquiry to be requested on the identified offender resident. The inquiry shall be based on the subject's name, sex, race, date of birth, fingerprint images, and other identifiers required by the Department of State Police. The inquiry shall be processed through the files of the Department of State Police and the Federal Bureau of Investigation to locate any criminal history record information that may exist regarding the subject. The Federal Bureau of Investigation shall furnish to the Department of State Police, pursuant to an inquiry under this subsection (c)(2), any criminal history record information contained in its files.</p> <p>d) The facility shall comply with all applicable provisions contained in the Uniform Conviction Information Act.</p> <p>e) All name-based and fingerprint-based criminal history record inquiries shall be submitted to the Department of State Police electronically in the form and manner prescribed by the Department of State Police. The Department of State Police may charge the facility a fee for processing name-based and fingerprint-based criminal history record inquiries. The fee shall be deposited into the On 12/15/23 upon entry to the facility surveyor observed no sign posting notice the right of resident , guardian or employee a written notice of his or her right to ask whether any residents in the facility are identified offenders.(Right to ask) . (300.625 f)3</p>	S9999		

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S9999	<p>Continued From page 2</p> <p>) .State Police Services Fund. The fee shall not exceed the actual cost of processing the inquiry. (Section 2-201.5(c) of the Act)</p> <p>f) If identified offenders are residents of a facility, the facility shall comply with all of the following requirements:</p> <p>1) The facility shall inform the appropriate county and local law enforcement offices of the identity of identified offenders who are registered sex offenders or are serving a term of parole, mandatory supervised release or probation for a felony offense who are residents of the facility. If a resident of a licensed facility is an identified offender, any federal, State, or local law enforcement officer or county probation officer shall be permitted reasonable access to the individual resident to verify compliance with the requirements of the Sex Offender Registration Act, to verify compliance with the requirements of Public Act 94-163 and Public Act 94-752, or to verify compliance with applicable terms of probation, parole, or mandatory supervised release. (Section 2-110(a-5) of the Act) Reasonable access under this provision shall not interfere with the identified offender's medical or psychiatric care.</p> <p>2) The facility staff shall meet with local law enforcement officials to discuss the need for and to develop, if needed, policies and procedures to address the presence of facility residents who are registered sex offenders or are serving a term of parole, mandatory supervised release or probation for a felony offense, including compliance with Section 300.695 of this Part.</p> <p>3) Every licensed facility shall provide to</p>	S9999		

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S9999	<p>Continued From page 3</p> <p>every prospective and current resident and resident's guardian, and to every facility employee, a written notice, prescribed by the Department, advising the resident, guardian, or employee of his or her right to ask whether any residents of the facility are identified offenders. The facility shall confirm whether identified offenders are residing in the facility.</p> <p>A) The notice shall also be prominently posted within every licensed facility.</p> <p>B) The notice shall include a statement that information regarding registered sex offenders may be obtained from the Illinois State Police website, www.isp.state.il.us, and that information regarding persons serving terms of parole or mandatory supervised release may be obtained from the Illinois Department of Corrections website, www.idoc.state.il.us. (Section 2-216 of the Act)</p> <p>g) Facilities shall maintain written documentation of compliance with Section 300.615 of this Part.</p> <p>These Requirements were NOT MET as evidenced by:</p> <p>Based on interview and record review the facility failed to arrange for a fingerprint-based criminal history record inquiry within 72 hours for an identified offender resident, failed to provide local police of address of a registered child sex offender, and failed to prominently post the right of resident, guardian or employee a written notice of their right to ask whether any resident in the facility are identified offenders for one (R1) out of three residents reviewed for identified offender compliance.</p>	S9999		
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S9999	<p>Continued From page 4</p> <p>Findings include:</p> <p>R1 is a 71 year old male resident who was admitted to the facility on 1/4/19. R1 has a diagnosis including Cerebral Infarction, Chronic Pain Syndrome, Central Cord Syndrome and Adjustment Disorder with depressive mood. R1 has a BIMS (Brief Interview Of Mental Status) score of 15/15 (cognitively intact). R1 is fully ambulatory. R1 is a registered child sex offender. Review of R1 documents shows R1 does not have facility community pass priveledge.</p> <p>On 12/15/23 upon entry to the facility surveyor observed no sign posting notice of the right of resident, guardian or employee a written notice of his or her right to ask whether any residents in the facility are identified offenders. (Right to ask)</p> <p>V3 (Social Service Director) was asked to provide documentation of R1 criminal background check. V3 provided State police background check dated 11/3/23. Background check shows a hit for including conviction and incarceration for aggravated Criminal Sex abuse of victim less than 13 years old. R1 was charged and convicted for failing to register as a sex offender and sex offender/ false information.</p> <p>V3 was asked to provide documentation of R1's fingerprint check. Document titled Live Scan Fingerprinting & Identity Service shows the facility first fingerprinted R1 on 2/1/22. R1 was admitted to the facility on 1/4/19.</p> <p>On 12/15/23 at 12:51PM V3 (Social Service Director) stated, R1 had a background check when admitted on 1/4/2019 . R1 had a hit with CHIRP. R1 was identified as a sex offender.</p>	S9999		
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S9999	<p>Continued From page 5</p> <p>Facility fingerprinted on 2/1/2022. The social worker here previously stated R1 refused finger print check. Once R1 started looking for housing he then wanted to become compliant with fingerprinting. The previous social service person was trying to get R1 in compliance registered. They failed to get him registered. I do not know what happened, but the state police never came out to evaluate him. At this time R1 is not evaluated as a high, medium or low risk. My question is why didn't the state police evaluate. At this time he is not evaluated by state police to my knowledge. At this time R1 is not care planned for discharge. R1 is not being discharged. I reached out to Identified Offender Program on 11/9/23 asking I.O.P. to help me with registering R1 as a sex offender. I have not had an answer.</p> <p>Review of documents showed facility document/text dated 2/7/23 from Department Public Health . Identified Offender Program Subject Rejection CSO In Violation Re IOP Confirmation 164067 : Austin Oasis The re: 17303770 states including The Illinois Department of Public Health (IDPH) Identified offenders program is in receipt of a resident admission with notification dated 2/6/22. The above listed resident is a registered and/or convicted child sex offender in violation of the Child Sex Offender Restrictions [720 ILCS 5/11-9.3]. Your facility is located proximate to sites serving persons under 18 years of age, please take immediate action; you must begin the discharge process and locate alternative placement for the resident. The Illinois State Police, the background check, the Identified Offenders Program and/or other reputable sources have identified this resident as a child sex offender.</p>	S9999		
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S9999	<p>Continued From page 6</p> <p>On 12/16/23 at 2:20PM V1 (Administrator) stated, I talked to corporate who stated we were aware of 2/7/23 text and situation. The facility attempted to discharge R1 to many other facilities who did not accept R1. That is all I know. It appears to not have gone any further. We also never had the State Police come out to evaluate R1s risk assessment. We did notify the State Police and they never came to facility .</p> <p>On 12/16/23 11:20AM V1 (Administrator) stated I do not have the notice for the right to inquire whether the facility houses identified offender.</p> <p>On 12/15/23 at 1:50 PM surveyor contacted Identified Offender Program and inquired for information on R1 status. IOP representative stated, R1 was never evaluated by State Police for risk level (high, medium, low) .</p> <p>On 12/15/23 at 2:00 PM surveyor called Chicago Police Department Detective Division, V5 (Detective). V5 reviewed data base and stated R1 is non complaint with registering his current location/address.</p> <p>Facility policy titled Identified Offender Policy & Procedure includes statement (in part) It is the policy of this facility to establish a resident sensitive and resident secure environment. In accordance with the provisions of the Nursing Home Care Act , this facility shall check the criminal history background on any resident seeking admission to the facility in order to identify previous convictions.</p> <p>(B)</p>	S9999		
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