

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6005961	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 02/09/2024
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NAME OF PROVIDER OR SUPPLIER ELMWOOD NURSING & REHAB CENTER	STREET ADDRESS, CITY, STATE, ZIP CODE 152 WILMA DRIVE MARYVILLE, IL 62062
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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 and Recertification.	S 000		
S9999	Final Observations Statement of Licensure Violations 300.661 300.625 Section 300.661 Health Care Worker Background Check A facility shall comply with the Health Care Worker Background Check Act and the health Care worker Background Check Code. This Requirement is NOT MET as evidence by: Based on interview and record review, the facility failed to obtain/conduct pre-employment screening prior to employee beginning employment. This failure has the potential to affect all the 65 residents living in the facility. Findings include: The facility's undated abuse policy, documented, "The facility prohibits mistreatment, neglect, or abuse of its residents by: conducting pre employment screening of employees and pre-admission screening of residents." On 2/9/2024 five employees' files were reviewed for pre-employment screening. The following was documented: V19, Cook, was hired on 1/29/2024. Background check dated as 2/1/24. The facility failed to initiate	S9999		

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

TITLE

(X6) DATE
02/20/24

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S9999	<p>Continued From page 1</p> <p>background check prior to employee's hire date.</p> <p>V4, Certified Nursing Assistant, (CNA), hired on 5/4/2023. Background check dated as 1/9/2024. The facility failed to initiate background check prior to employee's hire date.</p> <p>V20, CNA, hired on 3/16/2023. Background check dated as 3/23/2023. The facility failed to initiate background check prior to employee's hire date.</p> <p>V21, Housekeeper, hired on 8/31/2023. Background check dated as 9/6/2023. The facility failed to initiate background check prior to employee's hire date.</p> <p>V22, CNA, hired on 2/24/2023. Background check dated as 2/28/2023. The facility failed to initiate background check prior to employee's hire date.</p> <p>On 2/8/2024 at 2:00 PM V1, Administrator, stated, "When did that start? We've never had to do that thorough of a background check on employees. Only on residents. I didn't know it had to be done in 24 hours."</p> <p>The Resident Census and Conditions of Residents, CMS 671, dated 2/6/2024 documents that the facility has 65 residents living in the facility.</p> <p>Section 300.625 - Identified Offenders A facility shall comply with the Requirement for Background Checks for New Admissions.</p> <p>This Requirement is NOT MET as evidenced by:</p> <p>Based on interview and record review, the Facility</p>	S9999		

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S9999	<p>Continued From page 2</p> <p>failed to conduct background checks and offender registry searches of residents within 24 hours of admission. This had the potential to affect all of the 65 residents living in the facility.</p> <p>Findings include:</p> <p>1. The Facility's undated Abuse Prevention Program Policy, documented, "This facility prohibits mistreatment, neglect or abuse of its residents by: conducting pre-employment screening of employees and pre-admission screening of residents." It continues, "This facility shall check the criminal history background on any resident seeking admission to the facility in order to identify previous criminal convictions." It continues, "Check for the resident's name on the Illinois Sex Offender Registration Website." It continues, "Within 24 hours, conduct a Criminal History Background Check according to the Facility Identified Offender Policy and Procedure."</p> <p>On 2/7/24 and 2/8/24, a total of eight resident files were reviewed for background checks. The following was documented:</p> <p>R10 was admitted to the Facility on 11/28/23. R10's background check was not completed until 11/30/23. R10's offender registry search was not done.</p> <p>R58 was admitted to the Facility on 12/2/23. R58's background check was not completed until 12/11/23, and his offender registry search was not run until 2/7/24.</p> <p>R59 was admitted to the Facility on 12/16/23. R59's background check was not run until 12/28/23, and her offender registry search was not completed until 12/29/23.</p>	S9999		

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S9999	<p>Continued From page 3</p> <p>R60 was admitted to the Facility on 1/3/24. R60's background check was not run until 1/5/24 and offender registry search was not done until 2/7/24.</p> <p>R163 was admitted to the Facility on 1/30/24. R163's offender registry search was not done until 2/7/24.</p> <p>R269 was admitted to the Facility on 10/27/23. R269's background check was not run until 10/30/23, and his offender registry search was not done.</p> <p>R270 was admitted to the Facility on 1/11/24. R270's background check was not run until 1/16/24, and his offender registry search was not completed.</p> <p>R314 was admitted to the Facility on 1/22/24. R314's offender registry search was not done until 2/7/24.</p> <p>On 2/8/24 at 1:25 PM, V16, Social Services and Activities Director stated that she conducts the background checks for residents, but was unaware they had to be done within 24 hours of admission.</p> <p>On 2/8/24 at 1:27 PM, V1, Administrator stated that she was unaware the background checks and offender registry searches had to be done within 24 hours of admission.</p> <p>The Long-Term Care Facility Application for Medicare and Medicaid (CMS 671) dated 2/6/24 documents there are 65 residents living in the facility.</p>	S9999		

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