

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>IL6014617</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>05/02/2024</b>
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NAME OF PROVIDER OR SUPPLIER  <b>APERION CARE INTERNATIONAL</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>4815 SOUTH WESTERN AVE CHICAGO, IL 60609</b>
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S 000	Initial Comments  Annual Health Survey	S 000		
S9999	Final Observations  Statement of Licensure Violations:  ONE of TWO  300.625c)2 300.625j) 300.625k) 300.625n)  Section 300.625 Identified Offenders 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: 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. j) Upon admission of an identified offender to a facility or a decision to retain an identified offender in a facility, the facility, in consultation with the medical director and law enforcement,	S9999		

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

TITLE

(X6) DATE  
05/24/24

Illinois Department of Public Health

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S9999	<p>Continued From page 1</p> <p>shall specifically address the resident's needs in an individualized plan of care.</p> <p>k) The facility shall incorporate the Identified Offender Report and Recommendation into the identified offender's care plan. (Section 2-201.6(f) of the Act).</p> <p>n) The facility shall evaluate care plans at least quarterly for identified offenders for appropriateness and effectiveness of the portions specific to the identified offense and shall document such review. The facility shall modify the care plan if necessary in response to this evaluation. The facility remains responsible for continuously evaluating the identified offender and for making any changes in the care plan that are necessary to ensure the safety of residents.</p> <p>This REQUIREMENT is not met as evidenced by:</p> <p>Based on interview and record review, the facility failed to perform criminal background checks for new residents within 24 hours of admission; failed to obtain fingerprint order within 72 hours of a hit on the preliminary criminal history search and failed to care plan a criminal psychologist assessment's risk level for an identified offender resident. These failures affected R35, R198, R199, R200, R201 and R202 in the sample of 88 residents reviewed and have the potential to affect 192 residents in the facility reviewed for abuse.</p> <p>Findings include:</p> <p>Identified Offenders Program document, dated 4/25/24 and titled "Facility Report," documents, in part, a list of "Identified Offenders - Current Residents" with a total of 29 residents which includes R35.</p>	S9999		

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S9999	<p>Continued From page 2</p> <p>On 4/29/24 at 12:25 pm, V13 (Admissions Director) stated that resident criminal background checks are done for residents when "they come in within 24 hours." When asked if a resident is admitted at 9:00 am, should the criminal background check be done by 9:00 am on the following day, V13 stated, "Yes." V13 stated that V13 will initiate the Criminal History Information Response Process (CHIRP) request by filling out the "Resident Background Check" with the new resident's first and last names, gender, birthdate and race and email the request to the facility's corporate office to process the CHIRP request. This surveyor requests, in part, the criminal background checks for R35, R198, R199, R200, R201 and R202.</p> <p>On 4/30/24 at 11:23 am, V13 (Admissions Director) stated that when a new resident's CHIRP result returns with a "hit" which indicates that the resident has a criminal record, then V13 emails the CHIRP to V44 (Social Services Director, SSD) who takes over the process. V13 stated that V44 is off of work and that V29 (Social Services Assistant) may be able to answer this surveyor's questions. V13 stated that the CHIRP results usually come back within 1 to 2 days of V13 sending the "Resident Background Check" CHIRP request. V13 stated that V13 does the new resident's criminal background checks "within 24 hours of admission. I (V13) don't do them on the weekends. I (V13) don't know if anyone is here to run the CHIRPS." When asked the purpose of checking residents' criminal background checks within 24 hours of admission, V13 stated, "To know who we have in the facility, so there's not injury to staff or patients. We need to know these types of individuals. For the overall safety of the building."</p>	S9999		

Illinois Department of Public Health

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S9999	<p>Continued From page 3</p> <p>On 4/30/24 at approximately 1:15 pm, V13 (Admissions Director) and this surveyor reviewed the requested criminal background checks for R35, R198, R199, R200, R201 and R202 as follows:</p> <p>R35: V13 stated that R35 was admitted to the facility a while ago (6/21/22) when V13 was not working in admissions and that a CHIRP request was sent to the facility's corporate office on 6/23/22.</p> <p>R198: V13 confirmed that R198 was admitted on 4/27/24 and that the "Resident Background Check" form was initiated by V13 for a CHIRP on 4/29/24 which is greater than 24 hours from R198's admission.</p> <p>R199: V13 confirmed that R199 was admitted on 4/26/24 and that the "Resident Background Check" form was initiated by V13 for a CHIRP on 4/29/24 which is greater than 24 hours from R199's admission.</p> <p>R200: V13 confirmed that R200 was admitted on 4/26/24 and that the "Resident Background Check" form was initiated by V13 for a CHIRP on 4/29/24 which is greater than 24 hours from R198's admission.</p> <p>R201: V13 stated that R201 was admitted to the facility on 4/23/24, and R201's CHIRP results, dated 4/25/24, came back with "Multiple Hits." V13 stated that emailed V44 (SSD) the results of R201's CHIRP. V13 stated, "I (V13) am not sure that (V44) acted on it. I did send it as an attachment in an email to (V44)." When requesting if R201's fingerprint consent form and appointment, V13 stated that R201 went to the hospital on 4/30/24.</p> <p>R202: V13 stated that R202 was admitted to the facility on 4/20/24, and R202's CHIRP results, dated 4/25/24, came back with "Hit." V13 stated that V13 emailed R202's CHIRP results to V44</p>	S9999		

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S9999	<p>Continued From page 4</p> <p>(SSD) and does not know what has been done since V13 emailed V44.</p> <p>On 4/30/24 at 3:05 pm, when asked about criminal background checks for potential residents, V29 (Social Services Assistant) stated, "Admissions (V13) will send to V44 (SSD) the results of the background check and she (V44) will report to me (V29) what the results are. If it comes back as X, Y, Z, then we know to care plan for it and how to care plan to make sure it's documented." When asked what would go in the resident's care plan, V29 stated, "So if there's a history of murder, theft or aggravated battery, then I (V29) will go and speak with the resident to get a brief story, like did they serve time, on probation, on parole or have any upcoming court dates, then I will take this information from their story and develop a care plan."</p> <p>On 4/30/24 at 3:30 pm, V3 (Regional VP of Operations) stated that new resident's criminal background checks within 24 hours of admission, and when there is a hit with the CHIRP, then V13 (Admissions Director) will email the results to V44 (SSD). When asked if V44 is not available (as currently off of work), who is responsible for reviewing the CHIRP results, V3 stated, "Well, I would hope that the other social services staff will fill in." When asked what is being done to ensure that residents are safe with having identified offenders in the facility, V3 stated that "it depends on what it is. If it's retail theft or battery. We may need private room or alternative placement. We want to keep away identified offender resident from others for no harm." When asked the purpose of running criminal background checks within 24 hours of new residents, V3 stated, "To make sure there's no dangerous person here." V3 stated that they would have assessment from</p>	S9999		

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S9999	<p>Continued From page 5</p> <p>the psychologist for the risk level of the identified offender resident and work in conjunction with local police district. When asked if a resident identified as an identified offender, should the resident be care planned as with the risk level assessment, V3 stated, "Yes. If it's not, it should be."</p> <p>On 5/1/24 at 2:31 pm, V1 (Administrator) stated that V44 (SSD) is not interviewable by phone.</p> <p>On 5/1/24 at 2:44 pm V1 (Administrator) stated that V1 is the abuse coordinator for the facility. When asked what V1's general responsibilities are as an abuse coordinator, V1 stated that V1 is to report and investigate all allegations of abuse in the facility to "ensure that no abuse is being done." When asked what is the purpose of performing new residents' criminal background checks, V1 stated, "So that all residents are free from abuse." When asked when are the new residents' criminal background checks to be performed, V1 stated, "Upon admission" and that they'd typically perform the background checks prior to admission usually the day before. When asked is it acceptable for facility staff to perform a criminal background check greater than 24 hours of a resident admission, V1 stated, "No." When asked why a resident criminal background check is performed within 24 hours of a resident's admission, V1 stated, "To make sure the status comes back from the background check. To ensure that residents are free from abuse." When asked about types of criminal background checks are performed by the facility, V1 stated that there are multiple checks done on a state for sex offenders, state department of corrections and the name-based background check (CHIRP). V1 stated that V1's facility staff, usually admissions (V13), is able to access the registries to</p>	S9999		

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S9999	Continued From page 6  immediately run the state level for sex offender and department of corrections for new admission residents as part of the criminal background checks, but V13 will send the "Resident Background Check" form to the facility's regional corporate office to request the CHIRP. V1 stated that the CHIRP results usually "turn around within one day." V1 stated that the "Resident Background Check" is sent by V13 to the regional corporate office to initiate the CHIRP "at the same time" the registries are accessed for the state level sex offender and state department of corrections results. V1 stated that V13 (Admissions Director) is responsible for receiving and reviewing the CHIRP results from the CHIRP web portal or emailed from the regional corporate office. V1 stated that when V13 sees a hit result on the CHIRP, then V13 "refers" the hit results "to social services to follow up and initiate" a consent for fingerprinting appointment. V1 stated that V44 (SSD) will obtain the fingerprinting consent from the resident and will submit this on the fingerprinting company's website to schedule the fingerprinting appointment in the facility. V1 stated that V44 (SSD) is "exclusively" responsible for this fingerprinting process after a hit is revealed on a CHIRP. When asked who is responsible for performing this fingerprinting appointment process is assigned to V44 in V44's absence in the facility, V1 stated, "Myself (V1)." V1 stated that results of a hit on the CHIRP means that the facility must perform fingerprinting of the resident to obtain the specific criminal history. When asked the time frame between V44 viewing the hit CHIRP results and obtaining fingerprint consent and order for appointment, V1 stated, "ASAP (as soon as possible)." When asked once the resident fingerprinting consent is obtained and appointment made for fingerprinting by V44, is the Identified Offender Program notified, and V1	S9999		

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S9999	<p>Continued From page 7</p> <p>stated, "That's a good question. I am not sure." V1 stated that when the facility receives the criminal history of the resident from the processed fingerprints, they will notify the police and will perform an analysis of the resident's criminal history. This surveyor asked V1 that after the criminal background check process indicates the recently admitted resident's criminal history, should this criminal history be care planned, and V1 stated, "Yes." When asked why, V1 stated, "To ensure resident safety."</p> <p>On 5/2/24 at 4:11 pm, V1 (Administrator) stated that once a resident is classified as an identified offender, the resident will remain an identified offender until the resident is discharged from the facility. V1 stated that fingerprinting is done for any resident who has a hit or multihit on the CHIRP. When asked what the time is from the facility staff receiving the hit CHIRP results and ordering fingerprinting appointment for the resident, V1 stated, "Within 72 hours." V1 stated that a criminal history analysis is then performed by a clinical psychologist for identified offender residents. When asked the purpose of this criminal history analysis for a resident in the facility, V1 stated, "So we can identify the level of risk of that resident" as a resident living in the facility. V1 stated that the risk level of an identified offender is assessed as low, moderate or high which gives the staff recommendations of how to supervise and care for the identified offender resident. When asked if staff are expected to follow the clinical psychologist's recommendation risk level for the identified offender resident, V1 stated, "We follow it." V1 stated that the identified offender resident's risk level recommendations are placed in the resident's chart in the care plan.</p> <p>1)R35's Admission Record, documents, in part,</p>	S9999		



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S9999	<p>Continued From page 8</p> <p>diagnoses of mood disorder, chronic obstructive pulmonary disease, schizophrenia and personality and behavioral disorders, and R35's admission date into the facility is 6/21/22. R35's "Resident Background Check" form for a CHIRP request, documents, in part, that R35's CHIRP request was initiated on 6/23/22, and R35's CHIRP results, dated 11/21/22, documents, in part, a "hit" with a criminal background of battery, armed robbery, and robbery. R35's Criminal History Analysis Security Recommendation Report, signed by V49 (Clinical Psychologist) and V50 (Clinical Psychologist) on 12/30/22, documents, in part, that R35 is at "Moderate Risk: The resident (R35) requires closer supervision and more frequent observation than standard or routine for most residents in an open facility. Regular monitoring should be attentive to behavioral changes that may signal a need for closer observation or sustained visual monitoring on a time-limited basis ... In view of incidents of verbal aggression since (R35's) admission, a moderate risk supervision status is recommended."</p> <p>R35's Care Plan, initiation date of 12/15/22 and a target date of 6/6/24, documents, in part, a focus of "(R35) have a history of criminal behavior. (R35) have demonstrated stability during the admission screening process, and does not appear to present at risk. Low risk."</p> <p>2) R198's Admission Record, documents, in part, diagnoses of rheumatoid arthritis, pulmonary hypertension and fracture of sacrum, and R198's admission date into the facility is 4/27/24. R198's "Resident Background Check" form for a CHIRP request, documents, in part, that R198's CHIRP request was performed by V13 on 4/29/24 which is greater than 24 hours after R198's admission into the facility on 4/27/24.</p>	S9999		

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S9999	<p>Continued From page 9</p> <p>3) R199's Admission Record, documents, in part, diagnoses of type 2 diabetes mellitus, hyperlipidemia, systolic (congestive) heart failure, and hypertension, and R199's admission date into the facility is 4/26/24. R199's "Resident Background Check" form for a CHIRP request, documents, in part, that R199's CHIRP request was performed by V13 on 4/29/24 which is greater than 24 hours after R199's admission into the facility on 4/26/24.</p> <p>4) R200's Admission Record, documents, in part, diagnoses of malignant neoplasm of duodenum, hypertension and systolic (congestive) heart failure, and R200's admission date into the facility is 4/26/24. R200's "Resident Background Check" form for a CHIRP request, documents, in part, that R200's CHIRP request was performed by V13 on 4/29/24 which is greater than 24 hours after R200's admission into the facility on 4/26/24.</p> <p>5) R201's Admission Record, documents, in part, diagnoses of type 2 diabetes mellitus, osteoarthritis, anemia, hyperlipidemia, hypertension, chronic kidney disease and abnormalities of gait and mobility, and R202's admission date into the facility is 4/23/24. R201's "Resident Background Check" form for a CHIRP request, documents, in part, that R201's CHIRP request was performed by V13 on 4/24/24. R201's CHIRP results, dated 4/25/24, documents, in part, results of "multiple hits - fee fingerprints requested." R201's Census documents, in part, that R201 remained in the facility from 4/23/24 to 4/30/24, and was transferred to the hospital on 4/30/24, which is greater than 72 hours from R201's</p>	S9999		

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S9999	<p>Continued From page 10</p> <p>CHIRP results (multiple hits) dated 4/25/24.</p> <p>6) R202's Admission Record, documents, in part, diagnoses of chronic obstructive pulmonary disease, combined systolic (congestive) and diastolic (congestive) heart failure, bronchitis, hypertension, and abnormalities of gait and mobility, and R202's admission date into the facility is 4/20/24.</p> <p>On 4/29/24 at 12:35 pm, R202 stated that R202 has not been fingerprinted for criminal background check since admission into the facility.</p> <p>R202's Minimum Data Set (MDS), dated 4/23/24, documents, in part, that R202's Brief Interview for Mental Status (BIMS) score is 15 which indicates that R202 is cognitively intact.</p> <p>R202's "Resident Background Check" form for a CHIRP request, documents, in part, that R202's CHIRP request was performed by V13 on 4/24/24, which is 4 days after R202's admission into the facility.</p> <p>R202's Criminal History Information Response Process (CHIRP) results, dated 4/25/24, documents, in part, a "hit" with a criminal background of theft, residential burglary, and possession controlled substance.</p> <p>R202's Nursing Home Resident Fingerprint Consent Form, prepared by V29 (Social Services Assistant), documents, in part, that R202 signed on 5/1/24 to consent for fingerprinting appointment, which is greater than 72 hours after R202's CHIRP results from 4/25/24.</p> <p>On 5/1/24 at 2:20 pm, V1 (Administrator) informed this surveyor that R201's fingerprint consent and order was not performed prior to R201's hospitalization on 4/30/24.</p> <p>Facility policy titled "Abuse Prevention and</p>	S9999		

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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 11</p> <p>Reporting - Illinois" and dated 10/24/22 documents, in part, "Guidelines: This facility affirms the right of our residents to be free from abuse, neglect, exploitation, misappropriation of property, deprivation of goods and services by staff or mistreatment. This facility therefore prohibits the abuse, neglect, exploitation, misappropriation of property, and mistreatment of residents. In ordered to do so, and the facility has attempted to establish a resident sensitive and resident secure environment. The purpose of this policy is to assure that the facility is doing all that is what in its control occurrences of abuse, neglect, exploitation, misappropriation of property, deprivation of goods and services by staff and mistreatment of residents. This will be done by: Conducting ... pre-admission screening of residents ... establishing an environment that promotes resident sensitivity, resident security and prevention of mistreatment ... Abuse Prevention: ... Pre-Admission Screening of Potential Residents: This facility shall check the criminal history background on any resident seeking admission to the facility in order to identify previous criminal convictions. This facility will: Request a Criminal History Background Check within 24 hours after admission of a new resident ... Establishing a Resident Sensitive Environment: ... For residents who are identified offenders, the facility shall incorporate the Identified Offender Report and Recommendations Report into the identified offender's plan of care including the security measures listed."</p> <p>Facility policy titled "Residents' Rights for People in Long-Term Care Facilities" and dated November 2018, documents, in part, " ... Your rights to safety: You must not be abused ... Your facility must provide services to keep your</p>	S9999		

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>IL6014617</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>05/02/2024</b>
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S9999	<p>Continued From page 12</p> <p>physical and mental health, at the their highest practical levels."</p> <p>Facility policy titled "Comprehensive Care Plan" and dated 11/17/17, documents, in part, "Purpose: To develop a comprehensive care plan that directs the care team and incorporates the resident's goals, preferences, and services that are to be furnished to attain or maintain the resident's highest practicable physical, mental, and psychological well-being. Guidelines: The facility will develop and implement a comprehensive person-centered care plan for each resident, consistent with resident rights, that includes measurable objective and timeframes to meet a resident's medical, nursing, and mental and psychosocial needs ... A comprehensive care plan must be: ... Prepared by an intradisciplinary team, that includes but is not limited to: ... Other appropriate staff or professional in disciplines as determined by the resident's needs."</p> <p>On 4/28/24, V1 (Administrator) and V3 (Regional Vice President of Operations) stated that there are 192 active residents in the facility.</p> <p>(C)</p> <p>TWO OF TWO</p> <p>300.626c)</p> <p>Section 300.626: Discharge Planning for Identified Offenders c) When a resident who is an identified offender is discharged, the discharging facility shall notify the Department.</p>	S9999		

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S9999	<p>Continued From page 13</p> <p>This REQUIREMENT is not met as evidenced by:</p> <p>Based on interview and record review, the facility failed to notify the Identified Offenders Program Department when an identified offender resident is discharged from the facility which affected two residents (R203 and R204) in the sample of 88 residents.</p> <p>Findings include:</p> <p>Identified Offenders Program document, dated 4/25/24 and titled "Facility Report," documents, in part, a list of "Identified Offenders - Current Residents" with a total of 29 residents which includes R203 and R204.</p> <p>R203's Census List documents, in part, that R203 was admitted to the facility on 7/29/2019, was transferred to the hospital on 2/6/2020 and has a discharge date from the facility of 2/10/2020.</p> <p>R203's Criminal History Information Response Process (CHIRP) results, dated 7/30/2019, documents, in part, a "hit" with a criminal history background of rape, deviate sexual assault, armed robbery, bribery, possession controlled substance, attempt possession controlled substance, and criminal trespass.</p> <p>R204's Census List documents, in part, that R204 was admitted to the facility on 11/17/2021 and has a discharge date from the facility of 4/20/2022.</p> <p>R204's CHIRP results, dated 3/7/2022, documents, in part, a "hit" with a criminal history background of aggravated arson.</p> <p>On 4/30/24 at approximately 1:15 pm, when</p>	S9999		

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S9999	<p>Continued From page 14</p> <p>asked when identified offender residents are discharged from the facility, is the facility staff notifying the Identified Offender Program, and V13 (Admissions Director) stated, "I (V13) don't know. You have to ask V44 (Social Services Director, SSD)."</p> <p>On 4/30/24 at 3:30 pm, V3 (Regional Vice President of Operations) stated that V44 (SSD) was on leave from work and that V3 will follow up with V1 (Administrator) to see if V44 is reachable by phone. When asked if an identified offender resident is discharged from the facility, is the Identified Offender Program notified, V3 stated, "No. I don't believe we do."</p> <p>On 5/1/24 at 2:31 pm, V1 (Administrator) informed this surveyor that V44 (SSD) is not interviewable by phone.</p> <p>On 5/1/24 at 2:44 pm, V1 (Administrator) stated that V1 is responsible for V44's duties regarding identified offender processes while V44 is absent from the facility. When asked if the facility does any notifications when an identified offender resident is discharged from the facility, V1 stated that V1 "believes" that the Identified Offender Program is notified. This surveyor informed V1 that the Identified Offender Program's Facility List (4/25/24) of active residents generated prior to the annual survey shows multiple residents who have been discharged from the facility but remain on the list. This surveyor questioned V1 about the Identified Offender Program's Facility List of active residents having discharged residents on it, indicating that the facility was not notifying the Identified Offender Program with discharged residents, and V1 stated it "seems like it."</p>	S9999		

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