

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>IL6001911</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>04/14/2021</b>
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NAME OF PROVIDER OR SUPPLIER  <b>COLLINS SQUARE</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>145 SOUTH CROSSWELL AVENUE BRADLEY, IL 60915</b>
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Z 000	<b>COMMENTS</b>  Complaint 2171885/IL131958	Z 000		
Z9999	<b>FINDINGS</b>  Statement of Licensure Violations:  350.620a) 350.1210 350.3240a) 350.3240b) 350.3240d) 350.3240f)  Section 350.620 Resident Care Policies  a) The facility shall have written policies and procedures governing all services provided by the facility which shall be formulated with the involvement of the administrator. The policies shall be available to the staff, residents, and the public. These written policies shall be followed in operating the facility and shall be reviewed at least annually.  Section 350.1210 Health Services  The facility shall provide all services necessary to maintain each resident in good physical health.  Section 350.3240 Abuse and Neglect  a) An owner, licensee, administrator, employee or agent of a facility shall not abuse or neglect a resident. (Section 2-107 of the Act)  b) A facility employee or agent who becomes aware of abuse or neglect of a resident shall immediately report the matter to the facility	Z9999	<b>Attachment A Statement of Licensure Violations</b>	

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

TITLE

(X6) DATE

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Z9999	<p>Continued From page 1</p> <p>administrator. (Section 3-610 of the Act)</p> <p>d) A facility administrator, employee, or agent who becomes aware of abuse or neglect of a resident shall also report the matter to the Department. (Section 3-610 of the Act)</p> <p>f) Resident as perpetrator of abuse. When an investigation of a report of suspected abuse of a resident indicates, based upon credible evidence, that another resident of the long-term care facility is the perpetrator of the abuse, that resident's condition shall be immediately evaluated to determine the most suitable therapy and placement for the resident, considering the safety of that resident as well as the safety of other residents and employees of the facility. (Section 3-612 of the Act)</p> <p>Based on interview and record review, the facility failed to:</p> <ol style="list-style-type: none"> <li>1. Develop and implement a Policy that defines Sexual Assault.</li> <li>2. Implement existing Policy 5.52 Individual Rape or Sexual Assault when R1 was sexually assaulted by R2 on 3/22/2021.</li> <li>3. Ensure staff immediately notified the Administrator when R1 was observed to be sexually assaulted by R2.</li> <li>4. Ensure staff immediately transported R1 to the emergency room for examination and securing evidence after being observed to be sexually assaulted by R2.</li> <li>5. Ensure staff secured the chain of evidence by</li> </ol>	Z9999		
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Z9999	<p>Continued From page 2</p> <p>allowing R1 and R2 to bathe after staff observed R1 being sexually assaulted by R2.</p> <p>6. Implement existing Policy 5.24 Investigate Committee when the facility failed to safeguard other individuals after R1 was observed to be sexually assaulted by R2.</p> <p>7. Conduct a thorough investigation after R1 was observed to be sexually assaulted by R2 on 3/22/2021.</p> <p>Findings include:</p> <p>Based on interview and record review, the facility failed to implement their policies (Policy 5.24 Investigative Committee and 5.52 Individual Rape or Sexual Assault) to protect 1 client (R1) who was sexually assaulted by a roommate (R2). The facility failed to develop a policy - Policy 5.52 Individual Rape and Sexual Assault- that defines Individual Rape and Sexual Assault and / or Sexual Abuse affecting 10 of 10 clients at the facility (R1, R2, R3, R4, R5, R6, R7, R8, R9 and R10).</p> <p>Findings include:</p> <p>The facility's Policy 5.24 Investigative Committee, last revised April 2019, was reviewed and includes the following: POLICY - The home shall establish an Investigative Committee to assist in the protection of individual rights and to provide a liaison between the individual and the administration of the home. PURPOSE - The Investigative Committee shall be responsible for the following: A. To identify, review and determine if alleged</p>	Z9999		

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Z9999	<p>Continued From page 3</p> <p>violations of any individual's rights, including abuse and neglect have occurred.</p> <p>B. To investigate allegations in a professional and impartial manner.</p> <p>C. To protect individuals from further harm.</p> <p><b>PROCEDURE -</b></p> <p>A. Any home employee or agent who witnesses or suspects a violation of individual rights, peer to peer incidents, reasonable suspicion of a crime, abuse, or neglect as well as injuries of unknown source shall immediately report the matter to home management using the following protocol:</p> <ol style="list-style-type: none"> <li>1. All home employees and agents will be trained on this requirement at least annually. This training will be documented on an in-service participation sheet.</li> <li>2. In order for the incident to be considered reported the employee or agent must speak directly to one of the following managers: <ul style="list-style-type: none"> <li>- Administrator</li> <li>- Executive Director</li> <li>- Chief Executive Officer (CEO)</li> </ul> </li> <li>3. If the allegation is one of the following situations the Administrator or designee will contact law enforcement by calling 911 or the local emergency number: When there is reasonable suspicion that a crime has been committed ...</li> </ol> <p>J. If the allegation is that another individual committed an act of abuse, appropriate action will be taken to safeguard the other individuals.</p> <p>The facility's Policy 5.52 Individual Rape or Sexual Assault, last revised October 2017, was reviewed and includes the following: <b>POLICY -</b> The agency shall provide set procedures to be followed in the event that a rape or sexual assault is suspected to have occurred to an individual.</p>	Z9999		
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**PURPOSE -**

- A. To protect the human rights of individuals.
- B. To gather evidence which will facilitate investigations and assist in the prosecution of persons committing rape or sexual assault.
- C. To establish and maintain an organized notification procedure for instances of suspected rape or sexual assault.
- D. To provide for accurate and complete documentation of suspected rape or sexual assault.

**STAFF RESPONSIBLE**

- A. Administrator
- B. Qualified Intellectual Disability Professional (QIDP)
- C. All staff of the agency

**PROCEDURE**

- A. Any employee of the agency who receives a report or who suspects that rape or sexual assault has occurred shall immediately notify the designated management staff using the emergency call list and supply all relevant information.
- B. In cases where rape is suspected or discovered the Administrator shall:
  - 1. Immediately have the individual transported to the emergency room for examination and securing of evidence.
  - 2. Initiate the Investigative Committee process, pursuant to Policy and Procedure 5.24 and
  - 3. Notify the appropriate State Agencies pursuant to Policy and Procedure 524 ...
- E. The chain of evidence must be secured and maintained.
  - 1. Do not bathe the individual or allow her / him to bathe before medical examination.
  - 2. If the individual has changed clothes, put the clothing worn at the time of the alleged rape or sexual assault into a paper bag (not plastic).

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Z9999	<p>Continued From page 5</p> <p>3. The staff member on duty shall handle the evidence and placed it in a locked, secure location. Only one person shall hand this evidence until the medical examination has been completed. ...</p> <p>This Policy 5.52 Individual Rape and Sexual Assault does not define Rape and / or Sexual Assault. The Policy identifies a Procedure when rape is suspected or discovered, it does not identify a Procedure when Sexual Assault is suspected or discovered.</p> <p>On 3/31/2021 surveyor asked facility staff for any and all Incident Reports / allegations of abuse, neglect and mistreatment for the month of March 2021. Surveyor was provided 2 reports that involve R1 and R2.</p> <p>The Incident Report, facility document GP-15, involves R1 and includes the following written by E4 DSP (Direct Support Professional): On 3/22/2021 at 5:47am Staff (E4) knocked on the bedroom door, waited for a response, then entered. Staff (E4) observed R1 in her bed with her underwear pulled down and her roommate (R2) also in the bed without underwear. R1's roommate had her fingers in R1's rectal area. Staff (E4) asked R1 to get out of bed and take a shower.</p> <p>E4 documented she notified E5, (QIDP - Qualified Intellectual Disability Professional) at 9:20am. On 3/22/2021 at 5:47am Staff (E4) knocked on the bedroom door, waited for response then entered. Staff (E4) observed R2 in her roommate's bed without pajama bottoms and underwear with her fingers inside R1's rectal area. The roommates (R1) underwear was down. Staff (E4) asked R2 to get out of the bed and take a shower.</p> <p>E4 documented she notified E5 at 9:20am.</p>	Z9999		
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Z9999	<p>Continued From page 6</p> <p>On 3/31/2021 surveyor requested and received the facility's investigation of the allegation that R2 sexually abused R1. E1 (Executive Director) provided a copy of the facility's investigation. The investigation has a date of 3/31/2021 noted for the investigation of the 3/22/2021 incident. E1 was asked, on 3/31/2021 at 12:43pm when the investigation was completed. E1 stated the investigation was completed on 3/29/2021 and the report was written on 3/31/2021. E1 stated the investigation was completed by E6 (Regional Trainer) and E7 (QIDP). The facility's investigation does not identify when the Administrator was notified of the allegation of sexual abuse.</p> <p>E5 (QIDP) was interviewed, per the facility's investigation. E5's interview noted E5 was first informed of the alleged sexual abuse on 3/22/2021 around 9:30am. E5 identified the alleged sexual abuse was first observed on 3/22/2021 at 5:47am.</p> <p>E5 was interviewed, via phone call, on 4/1/2021 at 9:57am. E5 was asked when she was first made aware of the allegation that R1 sexually abused R2. E5 stated she was first informed, by a phone call, from E2 (DSP/ Cook) on 3/22/2021 between 9:30am / 10am. E5 stated she received a 2nd phone call from E4 (DSP) shortly after. E5 stated E2 told E4 to call / notify her since she was the staff who observed the alleged sexual abuse of R1. E5 stated she did not receive immediate notification from E4 on 3/22/2021 (when alleged abuse was observed at 5:47am).</p> <p>The facility's investigation was reviewed and</p>	Z9999		
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Z9999	<p>Continued From page 7</p> <p>includes the following:</p> <p>E2 (DSP / Cook) was interviewed on 3/24/2021, per investigation. The interview consists of statements E2 made regarding R1 and R2's typical daily routine and that R1 and R2 have been roommates for approximately 4 to 5 weeks. E2 also identified that R2 has a behavior tracking sheet for "swinging at staff and foul language." There is no documentation, in the facility's investigation as to when E2 was made aware of the alleged sexual abuse of R1 and her response once she became aware of the alleged sexual abuse of R1.</p> <p>E2 was interviewed on 3/31/2021 at 12:43pm and 12:50pm. E2 stated that on Monday 3/22/2021 she arrived to work at approximately 7am. E2 stated that E4 (3rd shift DSP) did not tell her about the allegation that R2 sexually abused R1 until approximately 10am.</p> <p>E2 stated at this time, she told E4 she needs to report the alleged sexual abuse to the Administrator, Executive Director, Chief Executive Director and she also needs to start a GP-15 (facility Incident Report).</p> <p>E2 stated that she took R1 to the hospital on 3/22/2021 around 11am. E2 stated she told hospital personnel that the police needed to be contacted.</p> <p>E4 was interviewed on 3/29/2021 per investigation. E4's interview includes: "At 5:45 am, I knocked on the door of (R1) and (R2) and they said to come in. I found (R2) in (R1's) bed nude from the waist down engaged in a sexual act with (R2's) hand in (R1's) rectal area. I grabbed the phone to call (E5 - QIDP), but received no answer. (R2) asked for a shower, and I just continued normal routine and the two just sat on the sofa and hugged up and fell asleep</p>	Z9999		
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on sofa. I had no answer from (E5) at 5 minutes to 6am. I finally spoke with her after 7am. E5 stated that I would need to contact (E8 - Administrator) and Nursing. Neither were available at that time. (E5) stated that she would take care of it and I would be contacted to be interviewed. GP-15 filled out at 7:11 am."

E4 was interviewed, via phone call, on 4/1/2021 at 1:33pm. E4 stated that she was working alone on 3rd shift the morning of 3/22/2021. E4 stated that at 5:47am she knocked on R1 and R2's bedroom, entered and found R1 and R2 nude from the waist down. E4 stated she observed R2's hand is R1's rectal area. E4 stated she was surprised and said, "What are you doing?" E4 stated she told R2 and R1 to get out of bed. R2 then showered and R1 showered approximately 15 minutes after R1. E4 stated R1 and R2 then fell asleep on the couch in the living room area. E4 stated she did try to call the QIDP (E5) around 5:50am and again around 7:11am. E4 stated she did not make contact with E5. E4 was asked if she had any proof that she attempted to contact E5 and E4 stated that she did not. E4 stated that E2 arrived to the facility around 7am. E4 stated she did not make any phone call to notify the police of the alleged sexual abuse.

The facility's investigation include the following findings:  
"The evidence present does not support the allegation of injury of abuse. Pending the discovery of new evidence this investigation is

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Z9999	<p>Continued From page 9 closed."</p> <p>E6 (Regional Trainer) was interviewed on 4/1/2021 at 10:16 am via phone call. E6 stated that E7 interviewed E4, and that investigation was conducted on 3/29/2021.</p> <p>E6 stated that E4 was the only staff on duty for 3rd shift on 3/22/2021. E6 stated that E4 did not immediately report the alleged sexual abuse of R1 to the Administrator or designee.</p> <p>E1 (Executive Director) was interviewed on 3/31/2021 at 12:21pm. E1 was asked when the Administrator was informed of the alleged sexual abuse of R1 that was witnessed, by E4, on 3/22/2021.</p> <p>E1 stated that E4 did not do the proper notification. E1 stated the QIDP (E5) is one contact, however the Administrator (E8) should have been notified immediately of the alleged sexual abuse of R1.</p> <p>E6 stated that he conducted the investigation of the alleged sexual abuse of R1 by R2. E6 stated he was training E7 (QIDP) on how to conduct investigations and she assisted with the investigation.</p> <p>E6 stated the investigation findings were completed on 3/26/2021 in order to have the investigation completed within 5 days to be in compliance with IDPH (Illinois Department of Public Health) regulations.</p> <p>E6 was asked how the determination was made that R1 was not sexually abused. E6 stated, since the investigation was completed he has reviewed R1's hospital records and identified that R1 was sexually abused, however, no physical trauma was noted during the hospital exam.</p> <p>E6 was asked about the conflicting statements</p>	Z9999		
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Z9999	<p>Continued From page 10</p> <p>that E4 made in her interview regarding when she reported the alleged abuse to E5 (QIDP) and E5's statement.</p> <p>E6 stated that E4 has not been re-interviewed and that E4 did not immediately report the alleged abuse. E6 verified this conflicting information, regarding immediate notification to the Administrator, is not included in the investigation. E6 stated he would like to update the facility's investigation, however, he was told (by facility staff) he should not do so.</p> <p>E6 then stated he would update the investigation and forward the report.</p> <p>On 4/1/2021 at 9:37pm E6 emailed an updated investigation to surveyor.</p> <p>E6's updated facility investigation includes the following:</p> <p>E6 documented the majority of the staff know the rules and how to report the Incident. There was clear confusion on what to do when Incident was discovered although statements all stated they knew what to do and it was identified that the Policy 5.52 (Individual Rape or Sexual Assault) was not followed upon reporting.</p> <p>E6 documented forensic evidence collection was denied, however a chaperoned rectal exam was completed. with no injury or abnormal findings reported.</p> <p>E6 documented E4 violated many steps in the Rape and Sexual Assault Policy (Number 5.52) along with Physical Injury and Illness / Medical Emergency (Number 5.57).</p> <p>E4 did not immediately report the alleged sexual abuse to the Administrator.</p> <p>E6 documented, via Findings, "The evidence does support the allegation of sexual assault though not criminal. Pending the discovery of new evidence this investigation is closed.</p>	Z9999		
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Z9999	<p>Continued From page 11</p> <p>The facility's investigation of the alleged sexual abuse of R1 by R2 is not thorough. The investigation did not initially identify that E4 failed to immediately report the alleged abuse to the Administrator. The investigation did not identify who notified R1's guardians and if R2's guardians were notified. The investigation did not identify if the police were notified.</p> <p>E5 stated, per interview on 4/1/2021 at 9:57am, that R2 has hourly bedchecks that are performed on 3rd shift. The investigation does not identify if those hourly bedchecks were performed 3/21 into 3/22/2021 and when R2 was last observed in her own bed.</p> <p>E6 was interviewed 4/1/2021 at 10:16am and verified the facility's investigation and initial findings did not identify the following:</p> <ul style="list-style-type: none"> <li>- when the Administrator was notified of the alleged sexual abuse of R1 by R2</li> <li>- R1 was sexually abused by R2</li> <li>- when IDPH was notified of the alleged sexual abuse of R1 by R2</li> <li>- address conflicting statements of when Administration was notified</li> <li>- when R1's guardian was notified of alleged sexual abuse</li> <li>- when R2's guardian was notified of allegation of sexual abuse towards R1</li> <li>- safeguards put in place to ensure the safety of all residents to prevent further sexual abuse by R2</li> </ul> <p>E2 (Cook / DSP) was interviewed on 3/31/2021 at 12:50pm. E2 was asked if any monitoring of R2 has been put in place since the alleged sexual assault of R1 occurred on 3/22/2021. E2 stated she was not aware of any plan to monitor R2 and</p>	Z9999		
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Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>IL6001911</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>04/14/2021</b>
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NAME OF PROVIDER OR SUPPLIER  <b>COLLINS SQUARE</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>145 SOUTH CROSSWELL AVENUE BRADLEY, IL 60915</b>
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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
Z9999	<p>Continued From page 12</p> <p>her sexual behavior.</p> <p>E3 (DSP) was interviewed on 3/31/2021 at 1:03pm. E3 was asked if any monitoring of R2 has been put in place since the alleged sexual assault of R1 occurred on 3/22/2021. E3 stated there is monitoring plan in place for R2 since the alleged sexual assault occurred on 3/22/2021.</p> <p>E5 (QIDP) was interviewed on 4/1/2021 at 9:57am via phone call. E5 was asked if the facility put in place any monitoring of R2 after the alleged sexual assault of R1 on 3/22/2021. E5 stated nothing is in place regarding monitoring for R2 and any sexual behavior. E5 stated, "She's not someone we need to monitor." E5 stated R2 is being tracked for the behavior of Physical Aggression. E5 stated R2 has hourly bed checks at night as do the other residents at the facility.</p> <p>(A)</p>	Z9999		