PRINTED: 07/13/2023 FORM APPROVED Illinois Department of Public Health STATEMENT OF DEFICIENCIES (X1) PROVIDER/SUPPLIER/CLIA (X2) MULTIPLE CONSTRUCTION (X3) DATE SURVEY AND PLAN OF CORRECTION **IDENTIFICATION NUMBER:** A. BUILDING: COMPLETED IL6003297 B. WING 06/20/2023 NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE **40 NORTH SMITH** FRANKFORT TERRACE FRANKFORT, IL 60423 SUMMARY STATEMENT OF DEFICIENCIES (X4) ID PROVIDER'S PLAN OF CORRECTION (X5) COMPLETE (EACH DEFICIENCY MUST BE PRECEDED BY FULL PRÉFIX (EACH CORRECTIVE ACTION SHOULD BE PREFIX REGULATORY OR LSC IDENTIFYING INFORMATION) TAG CROSS-REFERENCED TO THE APPROPRIATE TAG DATE DEFICIENCY) S 000 Initial Comments S 000 Annual Licensure and Certification Survey S9999 Final Observations S9999 Statement of Licensure Violations: 300.610a) 300.1210b) 300.1210d)6) 300.2220d) Section 300.610 Resident Care Policies The facility shall have written policies and procedures governing all services provided by the facility. The written policies and procedures 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. The policies shall comply with the Act and this Part. The written policies shall be followed in operating the facility. Section 300.1210 General Requirements for Nursing and Personal Care The facility shall provide the necessary care and services to attain or maintain the highest practicable physical, mental, and psychological

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

care needs of the resident.

well-being of the resident, in accordance with each resident's comprehensive resident care

plan. Adequate and properly supervised nursing

care and personal care shall be provided to each resident to meet the total nursing and personal

TITLE

Attachment A

Statement of Licensure Violations

(X6) DATE

FORM APPROVED Illinois Department of Public Health STATEMENT OF DEFICIENCIES (X1) PROVIDER/SUPPLIER/CLIA (X2) MULTIPLE CONSTRUCTION (X3) DATE SURVEY AND PLAN OF CORRECTION **IDENTIFICATION NUMBER:** COMPLETED A. BUILDING: B. WING IL6003297 06/20/2023 NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE **40 NORTH SMITH** FRANKFORT TERRACE FRANKFORT, IL 60423 SUMMARY STATEMENT OF DEFICIENCIES (X4) ID PROVIDER'S PLAN OF CORRECTION (X5) COMPLETE (EACH DEFICIENCY MUST BE PRECEDED BY FULL PRÉFIX (EACH CORRECTIVE ACTION SHOULD BE PREFIX REGULATORY OR LSC IDENTIFYING INFORMATION) CROSS-REFERENCED TO THE APPROPRIATE TAG DATE TAG **DEFICIENCY**) S9999 Continued From page 1 S9999 Pursuant to subsection (a), general nursing care shall include, at a minimum, the following and shall be practiced on a 24-hour, seven-day-a-week basis: All necessary precautions shall be taken to assure that the residents' environment remains as free of accident hazards as possible. All nursing personnel shall evaluate residents to see that each resident receives adequate supervision and assistance to prevent accidents. Section 300:2220 Housekeeping All cleaning compounds, insecticides, and all other potentially hazardous compounds or agents shall be stored in locked cabinets or rooms. These requirements were not met as evidenced by: Based on observation, interview and record review the facility failed to secure hazardous chemicals in a locked storage area in accordance with the facility policy. There were 96 ambulatory residents, all with psychiatric illness with access to the hallway where the chemicals were stored.

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This failure presented a serious health risk to all

The facility's CMS form 672 (Resident Census

96 residents residing in the facility.

The findings include:

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STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION A. BUILDING:			(X3) DATE SURVEY COMPLETED	
		IL6003297	B. WING		06/20/2023		
NAME OF I	PROVIDER OR SUPPLIER	STREET AD	DRESS, CITY, S	STATE, ZIP CODE		******	
FRANKF	FORT TERRACE	40 NORTH FRANKFO	H SMITH DRT, IL 6042	23			
(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 CORREC (EACH CORRECTIVE ACTION SHO) CROSS-REFERENCED TO THE APPR DEFICIENCY)	JLD BE	(X5) COMPLETE DATE	
S9999	Continued From pa	ge 2	S9999				
·	there are 96 resider independently with o	ed June 12, 2023, showed nts who ambulate or without an assistive device with diagnoses of psychiatric					
	ideation. In the sam reviewed during the	d 34 residents with suicidal apple of 34 residents, 8 e survey (R11, R42, R49, R57, 6) identified with suicidal ambulatory.					
	(housekeeping super were observed in an leads to the kitchen hallway has an unse to the main dining re	at 12:48 PM with V16 ervisor) hazardous chemicals n unsecured hallway that n and laundry room. The ecured door with direct access room where ambulatory r meals and activities. The					
	ambulatory resident unlocked door and of chemicals are being hallway, there were of cleaning chemical	ts can easily access the enter the hallway where the g stored. In the unsecured twelve, five -gallon containers als sitting on the floor and four with cleaning chemicals	. ·		£	· .	
25	housekeeping carts closed compartmen	of the carts. Three of the four so did not have locks for the not. V16 was asked why the als were being stored in the					
	unsecured hallway. more room" in the lo chemical containers acknowledged the o away door, had no l	V16 stated there was "no ocked storage area for the s in the hallway. V16 door to the hall was a swing lock on the door		SE.		e e	
	residents use the m activities. The door not present in the a closed. V16 acknow	ne main dining room. The main dining room for meals and is not monitored, and staff are trea when the kitchen is wledged three out of four sparked in the same hallway	121		,		

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washing when handling.

children "regarding storage of the chemical, Also cautions the need for using PPE and hand

4. On the top of the housekeeping cart number one, there were two cans of foaming disinfectant spray, a can of glass cleaner and an open, unlabeled container of blue liquid with a brush in

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STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION			(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER	(X2) MULTIPLE CONSTRUCTION A. BUILDING:			(X3) DATE SURVEY COMPLETED 06/20/2023	
_	IL6003297		B. WING		06/2			
	NAME OF I	PROVIDER OR SUPPLIER	STREET AD		TATE, ZIP CODE			
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	(X4) ID PREFIX TAG	(EACH DEFICIENCY	TEMENT OF DEFICIENCIES 'MUST BE PRECEDED BY FULL SC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRE (EACH CORRECTIVE ACTION SH CROSS-REFERENCED TO THE API DEFICIENCY)	(X5) COMPLETE DATE		
	S9999	Continued From page 4		S9999				
			housekeeping supervisor) quid as toilet bowl cleaner.					
	7		t number two, there were two eaner and one container of					
	12	two cans of foaming container of toilet be unlabeled container (housekeeping aide	t number three, there were g disinfectant spray, a bwl cleaner and an open, of purple liquid. V17 d) identified the purple liquid as d it "makes things smell				i.	
	N. S.	spray is flammable irritation and caution in case of ingestion communication class as a "hazardous checleaner contains hy corrosive to skin, ey irritation or burns to MSDS for the glass absorbed through the requires the use of MSDS for the purplestored in the original handling, and it can	SDS, the foaming disinfectant and could cause serious eye ned to seek medical attention. The OSHA hazard sified the disinfectant spray emical." The toilet bowl drochloric acid and is ves, and ingestion causes the mouth and throat. The cleaner, shows it can be ne skin, is flammable and PPE when handling. The e cleaner shows it is to be all container, use PPE when cause skin and eye irritation if tact with the skin or the eyes.					
	,	groups and walking area without staff st survey from June 12 groups of residents independently and I unsecured door (wh	served gathering in small throughout the dining room upervision during the entire 2 through June 14, 2023. The were socializing had to walk near the here the hazardous chemicals ess the A hallway where					

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