Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	IL6010110	A. BUILDING: _____ B. WING _____	C 03/22/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
BERKELEY NURSING & REHAB CENTER	6909 WEST NORTH AVENUE OAK PARK, IL 60302

(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 Investigation 2399769/IL167002	S 000		
S9999	Final Observations Statement of Licensure Violations 300.615e)f) Section 300.615 Determination of Need Screening and Request for Resident Criminal History Record Information e) In addition to the screening required by Section 2-201.5(a) of the Act and this Section, a facility shall, within 24 hours after admission of a resident, request a criminal history background check pursuant to the Uniform Conviction Information Act for all persons 18 or older seeking admission to the facility, unless a background check was initiated by a hospital pursuant to the Hospital Licensing Act. Background checks shall be based on the resident's name, date of birth, and other identifiers as required by the Department of State Police. (Section 2-201.5(b) of the Act) f) The facility shall check for the individual's name on the Illinois Sex Offender Registration website at www.isp.state.il.us and the Illinois Department of Corrections sex registrant search page at www.idoc.state.il.us to determine if the individual is listed as a registered sex offender. This REQUIREMENT was not met as evidenced by: Based on interview and record review the facility failed to perform resident background checks	S9999		

Illinois Department of Public Health

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
Electronically Signed		04/08/24

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S9999	Continued From page 1 upon admission for 10 of 10 residents (R8 and R14-R22) reviewed for resident background checks in the sample of 22. The findings include: The facility's admission report printed on 3/22/24 shows: R8 admitted to the facility on 2/21/24. R14 admitted to the facility on 2/22/24. R15 admitted to the facility on 2/16/24. R16 admitted to the facility on 1/12/24. R17 admitted to the facility on 2/1/24. R18 admitted to the facility on 3/8/24. R19 admitted to the facility on 12/19/24. R20 admitted to the facility on 3/14/24. R21 admitted to the facility on 3/21/24. R22 admitted to the facility on 3/1/24. On 3/22/24 at 11:30 AM, V7 (Social Services) and V8 (Admissions Director) both said that they do not do resident background checks. On 3/22/24 at 12:00 PM, V18 (Business Office Manager) said that she just started last week, and she has not done any background checks but she was just told that it is her responsibility. V18 said that the facility did not have a business office manager for at least a month before she started. V1 (Administrator) said that he does not have any background checks for R8 and R14-R22. V1 said that they were not done. V1 said that the facility does not have a policy on resident background checks. (C)	S9999		