

Illinois State Department of Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTIONS		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 3000453		(X2) MULTIPLE CONSTRUCTION A. BUILDING B. WING		(X3) DATE SURVEY COMPLETED 12/04/2025	
NAME OF PROVIDER OR SUPPLIER NORTH AURORA LIVING & REHAB CTR				STREET ADDRESS, CITY, STATE, ZIP CODE 310 BANBURY ROAD , NORTH AURORA, Illinois, 60542			
(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) COMPLETION DATE	
S0000	Initial Comments		S0000			12/20/2025	
	Annual Licensure Health Survey						
S9999	Final Observations		S9999			12/20/2025	
	Statement of Licensure Violations (1 of 2):						
	300.625c)1)2)						
	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:						
	1) Immediately notify the Department of State Police, in the form and manner required by the Department of State Police, that the resident is an identified offender.						
	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.						
	This requirement was not met as evidenced by:						
	Based on interview and record review the facility failed to send residents for fingerprinting when a HIT for qualifying offences was determined by CHIRP (Criminal History Information Response Process) and failed to notify the police.						
	This applies to 2 of 10 residents (R12, R112) reviewed for resident background checks in the sample of 23.						

Office of Primary Care and Health Systems Management

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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S9999	Continued from page 1 The findings include: 1. R12's EMR (electronic medical record) showed that he was admitted to the facility on October 16, 2025. R12's face sheet showed multiple diagnoses including bipolar disorder, current episode depressed, severe, with psychotic features, attention deficit hyperactivity disorder, suicidal ideations. R12's CHIRP was done on October 15, 2025, and came back with multiple Hits. No evidence of fingerprint scheduling was provided by facility. 2. R112's EMR showed that she was admitted to the facility on November 3, 2025, and discharged on November 10, 2025. R112's face sheet showed multiple diagnoses including bipolar disorder, current episode depressed, moderate, obsessive-compulsive disorder, post-traumatic stress disorder, anxiety disorder, Schizophrenia. R112's CHIRP was done on October 31, 2025, and came back with multiple Hits. No evidence of fingerprint scheduling was provided by facility. On December 2, 2025, at 8:32 AM, and 12:50 PM, V6 (Social Service Director) stated that someone from the facility corporate office does the background checks prior to residents being admitted to the facility. V6 stated sometimes the results of the CHIRP come back after the admission of the resident if they have a multi-HIT. V6 stated it's the social services that schedule the fingerprint appointment. V6 stated since R112 had a multi-HIT of qualifying offenses, the results of the CHIRP only came back on November 4, 2025. V6 said she personally did not schedule any fingerprint appointment for R112 and that R112 discharged AMA (against medical leave) from the facility on November 10, 2025. V6 stated she also did not request fingerprinting for R12 as she was not aware that he had a HIT with qualifying offense and does not know when the results came back. V6 said this role was newly assigned to her over the summer and she and the other case manager in social services were getting acclimated to their roles. On December 2, 2025, at 3:26 PM, V1 (Administrator) stated the facility was also not aware of the reporting to IDPH (Illinois Department of Public Health) registry after a resident was discharged from the facility. On December 3, 2025, at 9:11 AM, V19 (Central Admissions Manager) stated she only does the background	S9999					

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S9999	Continued from page 2 checks for residents and it's the responsibility of the facility to schedule fingerprinting. Facility policy (revised September 2024) titled "Determination of Need and Background Screening of Residents" included: Policy: To ensure all individuals seeking admission to the facility are screened to determine, the needs for nursing services prior to being admitted regardless of income, assets or funding sources. Procedure: 1 The facility will review the screening and all supporting documentation to determine whether the placement of an offender is appropriate. 3. The criminal background check is made through the UCIA [Uniform Criminal Information Act]. The facility completes the appropriate forms and submits to the corporate office, If the background is inconclusive, fingerprints are obtained and sent to the State Police, as indicated. 6. The facility will inform the appropriate county and local law enforcement offices of the identified offenders being admitted to the facility. The facility also provided additional directives that the facility was in-serviced to use for background checks after a CHIRP is completed, which included the following in summary: If results are returned within 24 hours with a Multi-Hit: Responses are inconclusive. A UCLA fingerprint-based must be requested though a licensed Livescan vendor (use the UCLA Fingerprint Request Form). If results are returned within 48 hours with a HIT and is determined to have a qualifying offense, the resident has to sign the green fingerprint consent form (Identified offender Program FEEAPP Consent Form and be fingerprinted. If the results are returned within 72 hours with a HIT, contact licensed fingerprint vendor (Illinois Department of Financial and Professional Regulation Licensed Fingerprint Vendor List) or contact via email scheduling@accuratebiometrics.com (C) 2 of 2: Section 300.661 Health Care Worker Background Check	S9999					

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S9999	Continued from page 3 A facility shall comply with the Health Care Worker Background Check Act and the Health Care Worker Background Check Code. This requirement was not met as evidenced by: Based on interview and record review facility failed to check the Illinois Sex Offender, DOC (Department of Corrections) sex offender, DOC inmate search, DOC wanted fugitive search, Department of Health and Human Services Office of Inspector General (HHS-OIG) website and National Sex Offender Search were checked for newly hired employees. This failure has the potential to affect all 99 residents residing in the facility. The findings include: 1. V6 (social services) was hired on May 22, 2025. 2. V8 (Maintenance) was hired on January 9, 2023. 3. V17 (Certified Nurses' Assistant/CNA) was hired on July 25, 2025. 4. V22 (CNA) was hired on February 17, 2025. 5. V23 (CNA) was hired on November 26, 2025. 6. V24 (CNA) was hired on February 12, 2025. 7. V25 (CNA) was hired on May 6, 2025. On December 4, 2025, in separate interviews between 9AM and 4PM V19 (Central Admissions Manager) confirmed the facility is responsible for running background checks on newly hired employees but could not confirm which employee would be responsible. V2 (Director of Nursing) said there are no HR personnel within the community, and all employee paperwork is handled by V1 (Administrator). V1 confirmed he is responsible for employee files and background checks. V1 said he did not check Illinois Sex Offender website, DOC (Department of Corrections) sex offender website, DOC inmate search, DOC wanted fugitive search, HHS-OIG website or the National Sex Offender Search for newly hired employees. V1 said he does not have original documentation of healthcare worker registries performed prior to hire dates. Background Check Policy (December 2024) states that the facility conducts employment background screening which		S9999				

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S9999	Continued from page 4 include, criminal background checks, sex offender database, OIG exclusion database, reference checks, and criminal conviction investigation checks on individuals applying for employment upon hire and during onboarding process. (C)			S9999			