

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTIONS		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 8052988	(X2) MULTIPLE CONSTRUCTION A. BUILDING B. WING	(X3) DATE SURVEY COMPLETED 04/02/2026	
NAME OF PROVIDER OR SUPPLIER WEST SUBURBAN MEDICAL CTR			STREET ADDRESS, CITY, STATE, ZIP CODE 3 ERIE COURT , OAK PARK, Illinois, 60302		
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S0000	Initial Comments	S0000			
	Complaint Investigation 2693734/2967120				
S9999	Final Observations	S9999			
	Statement of Licensure Violations:				
	300.610a)				
	300.1210b)				
	300.1220b)3)7)				
	300.3210o)				
	Section 300.610 Resident Care Policies				
	a) 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 and shall be reviewed at least annually by this committee, documented by written, signed and dated minutes of the meeting.				
	Section 300.1210 General Requirements for Nursing and Personal Care				
	b) The facility shall provide the necessary care and services to attain or maintain the highest practicable physical, mental, and psychological 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 care needs of the resident.				
	Section 300.1220 Supervision of Nursing Services				
	b) The DON shall supervise and oversee the nursing services of the facility, including:				
	3) Developing an up-to-date resident care plan for each resident based on the resident's				

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 comprehensive assessment, individual needs and goals to be accomplished, physician's orders, and personal care and nursing needs. Personnel, representing other services such as nursing, activities, dietary, and such other modalities as are ordered by the physician, shall be involved in the preparation of the resident care plan. The plan shall be in writing and shall be reviewed and modified in keeping with the care needed as indicated by the resident's condition. The plan shall be reviewed at least every three months. 7) Coordinating the care and services provided to residents in the nursing facility. Section 300.3210 General o) The facility shall also immediately notify the resident's family, guardian, representative, conservator, and any private or public agency financially responsible for the resident's care whenever unusual circumstances such as accidents, sudden illness, disease, unexplained absences, extraordinary resident charges, billings, or related administrative matters arise. These requirements are not met as evidenced by: Based on observation, interview, and record review, the facility failed to provide written notice of transfer/discharge to the resident and/or resident representative, including the reason, effective date, and location of transfer, for one of eight residents reviewed for discharge (R2). This failure resulted in R2, who has aphasia and resided on the same unit for over six years, being transferred to a local hospital emergency room without prior notification or opportunity for preparation. This deficient practice has the potential to cause R2 to experience fear, anxiety, and confusion related to unexpected transfer. Findings include: R2's face sheet documents an admission date 3/25/24. Under insurance it documents self-pay. No contacts listed. R2 previous face sheet documents admission date of 10/23/2020. R2's physician certification documents an admit date of 12/4/19. Requested facility census or initial	S9999		

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S9999	Continued from page 2 admission date and facility was not able to provide. R2's Minimum Data Set (MDS), dated 3/17/26, documents R2 is Vietnamese with preferred language Vietnamese. Under language, if R2 requires an interpreter, it documents a code of one, which indicates yes. Under admission date (date the episode of care in this facility began) documents a date of 10/23/2020. Under makes self understood documents a code of three, which indicates rarely/never understands. Ability to understand others documents a code of three, which indicates rarely/never understands. Under cognitive patterns it documents a score of 00, which indicates R2 is rarely/never understood. R2's medical diagnoses include stroke, aphasia, cerebrovascular accident, hemiplegia, and seizure disorder. R2's MDS, dated 3/27/26, documents under discharge plan: is active discharge planning already occurring for the resident to return to the community? Documents 0, which indicates no. Has a referral been made to local contact agency? It documents 0, which indicates no because local contact agency unknown. R2's progress note, dated 12/6/2019: "Social worker met with resident for initial assessment. Social worker attempted to use translator phone to speak with patient. (R2) was not able to speak using translator phone. Social services spoke to (R2) in English and (R2) would respond with yes or no. it is unclear if patient understands English/ (R2) cognitive status. Per nursing report, (R2) has been living at another local hospital for seven years." R2's progress note, dated 7/31/2020, documents: "(R2) unable to be interviewed. (R2) has guardian. (R2) has no family and does not communicate. No insurance coverage at this time and no coverage for nursing home placement as patient identity cannot be established nor can his immigration status." On 3/26/26 at 12:22PM, V3 (Social Worker) said R2 has been a resident on the unit for over 10 years. R2 does not have any Medicare or Medicaid services due to not being a legal citizen. R2 has a state guardian in place. V3 said at this time, they do not have any current plan for discharge. V3 said they have attempted to place R2 for years and have not had any success. R2 has been taken care of by staff on the unit. On 3/27/26 at 9:20 AM, V2 (Unit Manager) said they still do not have a discharge plan for R2. The tentative plan is to send him local county hospital			S9999			

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S9999	Continued from page 3 because there is no other place that will accept him due to payment source but unsure of any other details. On 3/27/26 at 11:00AM, V2 (Unit Manager) said they are reaching out to the transport person at local county hospital to try to set up transfer. No other details at this time. On 3/31/26 at 10:24AM, V4 (R2's state guardian) said she called the facility on Thursday because she saw on the news about the facility closure and confirmed with staff that the unit would be closing on Friday. V4 said staff were attempting to find him placement in the past but were unsuccessful due to his financial status. V4 said she received a call around 2:00PM on 3/27/26 informing her that they had nowhere for R2 to go and needed help with finding placement. V4 said R2 is still at the local hospital emergency room awaiting placement. On 3/27/26 at 3:00PM, V3 (Social Service) said she was just informed the local hospital will not take him and they have no other place for R2 to go at this time. On 3/27/26 at 4:15PM, V2 (Unit Manager) said R2 will be transferring to local county hospital emergency room via private ambulance. On 3/27/26 at 4:35PM, ambulance crew on unit to transfer R2. V5 (EMT/Emergency Medical Technician) said they have orders from ((name) county president that R2 is to be taken to local county Emergency room. V5 was asked if he could provide documentation of this order but said he was not. On 3/27/26 at 4:45PM, V1 (Administrator) was on the unit and asked what documents were being sent with resident. V1 said EMT crew was provided face sheet, medication list, and 2 disk drives of electronic medical record history. V1 informed the surveyor the surveyors are not allowed to take any medical records. On 3/27/26 at 5:00PM, R2 was transferred off the unit and was loaded into the ambulance without incident. Ambulance left the hospital at 5:07PM. R2's progress note, dated 3/27/26, documents: R2 discharged to (name) county hospital Emergency room. R2's physical medicine and rehabilitation progress note, dated 3/27/26, documents under neuro alert to self. Responds yes to most questions. Under rehab			S9999			

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S9999	Continued from page 4 hospital closing unexpectedly. Plan to transfer to another facility. R2's case management planning assessment note, dated 3/27/26 at 12:08PM, documents: transfer needed due to hospital closing. Call made to local hospital transfer center. Spoke with intake coordinator. R2 not accepted no acute care need noted. Stated R2 would be better treated at lower level of care, skilled nursing facility (SNF). Comprehensive discharge details for this visit. Voice mail left with V4 (R2's state guardian) requesting return call to obtain any documents or family contacts. R2's case management note, dated 4/1/26, documents: "late entry (R2) was transferred to local Emergency room after receiving approval from local hospital administration. Private ambulance transported patient. (R2's) face sheet, transfer documents and thumb drive with medical records given to staff. State guardian called and message left." R2's social work transition planning ongoing notes, dated 4/4/25- 3/20/26, documents monthly entries with no documentation about any referrals or plans for discharge. R2's progress note that were reviewed from 3/23 to discharge did not document any referral or contact made for any discharge plans for R2 except for placement at local emergency room. R2's care plan reviewed with no discharge planning care plan documented. Surveyor had no computer access to the medical records during the survey. Surveyor requested any documents related to R2's admission, any referrals, any contact to other agencies, discharge planning or discharge assessments or summary or orders for review. No other documents received for R2 during the survey. Facility policy titled discharge criteria and planning, reviewed 8/23, documents: to provide guideline for appropriate discharge of residents from the skilled nursing unit. the resident's status of discharge will be discussed at the weekly team conference. The social worker will provide continual updates regarding resident progress to resident and significant others. The physician will document a discharge summary in the computerized system.			S9999			

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