

Illinois State Department of Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTIONS		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 0057935		(X2) MULTIPLE CONSTRUCTION A. BUILDING B. WING		(X3) DATE SURVEY COMPLETED 01/16/2026	
NAME OF PROVIDER OR SUPPLIER WESTWOOD VLGE NRSNG AND RHB CTR				STREET ADDRESS, CITY, STATE, ZIP CODE 2444 WEST TOUHY AVENUE , CHICAGO, Illinois, 60645			
(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			01/22/2026	
	Annual Licensure Survey						
S9999	Final Observations		S9999			01/22/2026	
	Statement of Licensure Violations 1 of 2:						
	300.1060f)						
	300.1060g)						
	Section 300.1060 Vaccinations						
	f) A facility shall document in the resident's medical record that he or she was verbally screened for risk factors associated with hepatitis B, hepatitis C, and (HIV), and whether or not the resident was immunized against hepatitis B. (Section 2-213(c) of the Act)						
	g) All persons determined to be susceptible to the hepatitis B virus shall be offered immunization within 10 days after admission to any nursing facility. (Section 2-213(c) of the Act)						
	This REQUIREMENT is not met as evidenced by:						
	Based on interview and record review, the facility failed to screen and document risk factors associated with Hepatitis B, Hepatitis C, and Human Immunodeficiency Virus (HIV), and failed to offer immunization within ten days after admission for residents who are susceptible to Hepatitis B for four (R7, R67, R92, R98) out of five residents reviewed for immunizations. These failures could potentially affect all 106 residents residing in the facility.						
	Findings include:						
	On 1/13/26 at 10:24 AM, V4 (Infection Preventionist) stated that the facility does not screen residents for Hepatitis and HIV. V4 also stated that the facility						

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 does not offer immunizations for Hepatitis B. V4 stated the facility has no policies regarding HIV and Hepatitis screenings. Review of R7, R67, R92, and R98 electronic health records (EHR) revealed no documentation to show that the facility screened them for Hepatitis B, Hepatitis C, and HIV. R7, R67, R92, and R98's immunization history in their EHR did not include Hepatitis B vaccines information/education. The facility's residents' roster printed on 1/13/26 shows a total of 106 residents residing in the facility. "C" Statement of Licensure Violations 2 of 2: 300.610a) 300.615f) 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 300.615 Determination of Need Screening and Request for Resident Criminal History Record Information 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 is not met as evidenced by:	S9999					

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S9999	Continued from page 2 Based on interview, and record review the facility failed to check the Illinois Sex Offender Registry for five (R12, R40, R67, R98, R113) out of five residents reviewed for Identified Offender Protocol. Findings Include: The residents' clinical records and background checks were reviewed and revealed the following: R12 was admitted to the facility on 12/05/25. R12's Illinois Sex Offender Registry was not completed. R12's Illinois Department of Corrections Parolees Registry was checked on 12/03/25. R40 was admitted to the facility on 11/18/25. R40's Illinois Sex Offender Registry was not completed. R40's Illinois Department of Corrections Parolees Registry was checked on 11/14/25. R67 was admitted to the facility on 12/31/25. R67's Illinois Sex Offender Registry was not completed. R67's Illinois Department of Corrections Parolees Registry was checked on 12/24/25. R98 was admitted to the facility on 12/30/25. R98's Illinois Sex Offender Registry was not completed. R98's Illinois Department of Corrections Parolees Registry was checked on 12/29/25. R113 was admitted to the facility on 01/05/26. R113's Illinois Sex Offender Registry was not completed. R113's Illinois Department of Corrections Parolees Registry was checked on 12/30/25. On 01/13/26 at 2:02 PM, V27 (Business Office Manager) stated she has been working at the facility for 13 years and has been the Business Office Manager since August 2023. V27 stated she is the one who runs the background checks on the residents prior to admission to the facility. V27 stated the background checks are run to find out if any of the residents being considered for admission have a criminal history so the facility is aware and can keep the other residents and staff safe. V27 stated that when she gets a referral for a new admission she submits a background check for the National Sexual Offender Program, Illinois Department of Corrections, and CHIRP (Criminal History Information Response Process). V27 stated she does not do the Illinois Sexual Offender because she runs the		S9999				

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S9999	Continued from page 3 National Sex Offender Registry instead. V27 stated the National Sex Offender Registry would also cover the Illinois Sex Offender Registry so if a resident triggers on the national they would also trigger on the Illinois state sex offender registry. Facility provided document titled, Illinois Department of Public Health Identified Offenders Program Instructional Guide dated 03/09/18 which documents in part, additionally all facilities must also review the Illinois State Police Sex Offender Registry and the Department of Corrections Parole Sex Offender Registry to determine if the resident is a registered sex offender. "C"		S9999				