

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENTIFICATION NUMBER 145969	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 08/28/2020
NAME OF PROVIDER OF SUPPLIER APERION CARE FOREST PARK		STREET ADDRESS, CITY, STATE, ZIP 8200 WEST ROOSEVELT ROAD FOREST PARK, IL 60130	
For information on the nursing home's plan to correct this deficiency, please contact the nursing home or the state survey agency.			
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)		
F 0921 Level of harm - Minimal harm or potential for actual harm Residents Affected - Few	<p>Make sure that the nursing home area is safe, easy to use, clean and comfortable for residents, staff and the public.</p> <p>Based on observation, interview, and record review, the facility failed to maintain a safe and sanitary environment by failing to sweep, mop, and clean accumulated debris in resident rooms for R1, R2 and R3. Findings include: On 8/28/2020 at 11:40 AM, observations show resident room corridor floors to be sticky when walked on. R1 and R2's rooms had accumulated food debris at the foot of R2's bed. Floors were not swept and were sticky with accumulated grime. Interview with R1 on 8/28/20 at 11:50 AM, stated, That food has been there (pointing to the corner of the room at the foot of the bed) since I called you to complain. I'm telling you they never come in to clean and its making me sick. I'm just glad you came to see it for yourself. I've asked my nurse I don't know how many times but they don't do anything about it. Please help. Interview with R2 on 8/28/20 at 11:55 AM affirmed R1's statements and nodded, Yes it's true. On 8/28/20 at 11:45 AM R3's room located on the opposite end of the resident floor appeared similar in nature with sticky, grimy floors. R3's shared bathroom had dirty water-soaked linens and towels strewn over the wet floors. Absent were any wet floor signs to warn and prevent residents from falling and sustaining injury(s). Interview with V6 (housekeeper) on 8/28/20 at 12:10 PM stated, I cleaned this section of the floor starting with that room (pointing to R1 and R2's room) and I make my way around the other end. Surveyor asked if she was done with R1 and R2's room, V6 stated, Yes. I started with that after breakfast. Asked if there was anyone else working with her, V6 stated, Yes but he's doing the other side and sometimes I work by myself mostly. Efforts to locate the other housekeeper on the floor were unsuccessful. Interview with V7 (LPN) on 8/28/20 at 12:15 PM stated, We have a housekeeper on the floor, she's supposed to be cleaning the rooms. Surveyor asked who cleaned the bathrooms of dirty linens, V7 stated, That's housekeeping. Interview with V8 (RN) on 8/28/20 at 12:20 PM stated, The housekeeper on the floor should be cleaning the rooms but I see what you mean about the linens on the floor. The c.n.a.'s (certified nursing aides) should be helping pick up though. They (housekeepers) have a supervisor and should check up on them too. At 12:45 PM, R1, R2 and R3's rooms appeared the same as when observed an hour earlier. Food debris remained in R1 and R2's room and R3's room had soiled linens and towels on the same wet floor. Facility policy dated 1/10/18 titled Housekeeping states, To provide guidelines to maintain a safe and sanitary environment for residents, facility staff and visitors. Housekeeping personnel shall adhere to daily cleaning assignments developed so to maintain the facility in a clean and orderly manner. The environmental Services Director will routinely make visual quality control observations to ensure that a high level of sanitation is maintained.</p>		
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE		(X6) DATE

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.