

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 145434	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 05/14/2024
NAME OF PROVIDER OR SUPPLIER Claridge Healthcare Center		STREET ADDRESS, CITY, STATE, ZIP CODE 700 Jenkisson Lake Bluff, IL 60044	

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)
<p>F 0609</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Timely report suspected abuse, neglect, or theft and report the results of the investigation to proper authorities.</p> <p>34490</p> <p>Based on interview and record review the facility failed to ensure an allegation of sexual abuse was immediately reported to the Administrator for 1 of 1 resident (R1) reviewed for abuse reporting in the sample of 7.</p> <p>The findings include:</p> <p>On 5/14/24 at 10:20 AM, R1 stated that she was in the dining room sleeping on 2/2/24. R1 stated that as she woke up, a Chinese man had his hand under her gown touching her breast. R1 stated that she did not report the incident to anyone right away but did report it a few days later to V6 (Registered Nurse), V2 (Director of Nursing) and V8 (Social Services). R1 stated that an investigation was not done immediately. R1 stated that she had notified the ombudsman about the incident recently and that is when the facility started to investigate what had happened and called the police.</p> <p>On 5/14/24 at 12:00 PM, V6 (Registered Nurse) stated that in February, R1 came to him and told him that she was sleeping in the dining room and when she woke up a Chinese man was touching her breast. V6 stated that R1 had voiced to him that she had already notified social services. V6 stated that he did not report it to V1 (Administrator) because he thought that social services was already taking care of it.</p> <p>On 5/14/24 at 12:38 PM, V2 (Director of Nursing) stated that she never spoke to R1 about the incident after it happened in February. V2 stated that if she was aware of the allegation, she would have immediately started in abuse investigation.</p> <p>On 5/14/24 at 2:03 PM, V8 (Social Services) stated that she never spoke with R1 about the incident after it happened in February.</p> <p>On 5/14/24 at 1:05 PM, V1 (Administrator) stated that all allegations of abuse should be reported to him immediately so an investigation can be initiated. V1 stated that he was not aware of the incident with R1 until recently.</p> <p>On 5/14/24 at 1:10 PM, V3 (Assistant Director of Nursing) stated that she was notified regarding the alleged abuse of R1 via an email from the ombudsman. V3 stated that she had not heard anything about it prior to the email.</p> <p>(continued on next page)</p>

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.

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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<p>F 0609</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>R1's Initial Incident Investigation Report dated 5/9/24 shows, Resident reported today that on Feb (February) 2nd 2024 I was in the 3 South dining room and woke to a Chinese man touching my breast. Then he tried to go up my gown to my most private part and he said nothing underneath.</p> <p>The facility's undated Abuse Prevention Program shows, All allegations of abuse and neglect will be reported immediately to the Administrator. In the absence of the Administrator, he will appoint a designee. All allegations of abuse and neglect will be investigated.</p>		