

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 145718	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 06/25/2025
NAME OF PROVIDER OR SUPPLIER Crestwood Rehabilitation Ctr		STREET ADDRESS, CITY, STATE, ZIP CODE 14255 South Cicero Avenue Crestwood, IL 60445	

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 0584</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Honor the resident's right to a safe, clean, comfortable and homelike environment, including but not limited to receiving treatment and supports for daily living safely.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on observations, interviews, and record reviews, the facility failed to implement effective interventions to maintain resident room temperatures and dialysis room temperatures at safe/comfortable levels below 81 degrees Fahrenheit. This failure affected 53 residents (R1 - R53) out of 54 residents in a sample of 54.</p> <p>Findings include:</p> <p>On 6/18/25 starting at 2:55 PM until 3:50 PM, resident room temperatures were checked with V3 (maintenance director):</p> <p>Room: temperature (degrees Fahrenheit):</p> <p>404 85</p> <p>402 85</p> <p>408 85</p> <p>419 85</p> <p>427 82</p> <p>305 83</p> <p>312 83</p> <p>313 85</p> <p>316 85</p> <p>317 84</p> <p>328 82</p> <p>237 85</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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F 0584 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Some	<p>201 85</p> <p>204 85</p> <p>208 85</p> <p>215 82</p> <p>220 82</p> <p>226 82</p> <p>229 82</p> <p>Dialysis room [ROOM NUMBER]</p> <p>Per www.timeanddate.com/weather, dated 6/18/25 at 10:53 AM, the outside temperature in Crestwood, IL was 81 degrees with humidity 67%. The highest temperature was at 12:53 PM, outside temperature was 82 degrees with humidity 63%.</p> <p>On 6/18/25 at 3:20 PM, R20 has a 20-inch box fan set on high positioned one foot away from R20. R20 stated that his room is hot and uncomfortable.</p> <p>On 6/18/25 at 3:25 PM, there were 10 residents observed receiving dialysis treatment. R1 was observed fanning herself with a piece of paper.</p> <p>On 6/18/25 at 3:30 PM, R28 stated that room is hot and uncomfortable.</p> <p>On 6/18/25 at 3:31 PM, R29 has a 20-inch box fan set on high positioned three feet away from R29. R29 stated that his room is hot and uncomfortable. R29 requested a second fan for his room.</p> <p>On 6/18/25 at 2:55 PM, V3 (maintenance director) stated that the air conditioning (AC) units are located on the side of the building. V3 stated that the AC units are working at this time. V3 stated that on 6/1/25 the fillers were checked and cleaned. V3 stated that it took two weeks to complete this. V3 stated that water flows through the coils in the unit in each resident room. V3 stated that the AC units blow cold air into the hallways on each nursing unit. V3 stated that there is a small portable AC unit located at each nurses ' station as well. V3 stated that cool water comes from the main intakes and goes through the pipes in the boiler room and then to the unit in each resident room. V3 stated that he started randomly checking hourly temperatures since 8:00 AM yesterday, 6/17. V3 stated that he checks temperatures from 7:00 AM until 7:00 PM. V3 stated that he does not check temperatures after 7:00 PM because the temperature starts to drop in the facility. V3 stated that the digital infrared thermometer he uses does not record humidity levels. V3 stated that he obtains the humidity from the internet. V3 stated that temperatures will be monitored throughout the weekend to ensure temperatures do not increase above 81 degrees. V3 stated that residents will be provided a fan upon request.</p> <p>(continued on next page)</p>

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<p>F 0584</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>On 6/18/25 at 4:20 PM, V6 (dialysis nurse) and V7 (dialysis nurse) stated that they were informed on Monday, 6/16, that the facility's air conditioner was not working and they facility needed to order parts. Both stated that residents are not permitted to eat or drink in the dialysis room. Both denied any staff checking on residents while receiving treatments. Both stated that there are 10 residents receiving dialysis treatments in the morning and 10 in the afternoon. V6 stated that they have been monitoring residents' vital signs throughout their treatment. V6 stated that the residents' vital signs have been fluctuating more than usual due to the heat. Both stated that residents are in treatment for 4-4.75 hours. Both stated that residents appear to be more fatigued than usual due to heat.</p> <p>On 6/18/25 at 4:30 PM, V2 DON (director of nursing) stated that staff are providing cold water to residents every two hours. V2 stated that staff are also providing residents with popsicles/ice cream in between meals. V2 stated that nurses are monitoring residents for signs of hyperthermia and heat exhaustion/heat stroke. V2 stated that physicians have ordered increased water flushes for residents that have gastrostomy tubes and cannot eat or drink. V2 stated that V2 will have staff bring ice packs to all of the residents in dialysis right now.</p> <p>On 6/20/25 at 10:30 AM, R1 and R2 stated that it is a little cooler in their room compared to the previous days. Both stated that they were unaware the facility had fans for resident use, they were never offered a fan. Both stated that it was very hot in the dialysis room on 6/18/25.</p> <p>On 6/20/25 at 3:00 PM, V4 (outside HVAC company) stated that he was notified on Sunday, 6/15/25, that the AC units were not functioning. V4 stated that the outside temperatures were cooler on Sunday so V4 did not come to the facility until Monday morning. V4 stated that he has been at facility all week working on the AC units. V4 stated that parts had to be ordered and replaced. V4 stated that as of right now the AC units are functioning properly.</p> <p>On 6/20/25 at 3:30 PM, V1 (administrator) stated that should have been checking on their residents in dialysis. V1 stated that the dialysis staff should have notified V1 and/or V2 that the dialysis room was hot.</p> <p>The facility ' s temperature log notes on 6/17/25 at 8:00 AM random temperatures were 82 degrees. At 11:00 AM, temperatures increased to 83 degrees. From 12:00 PM until 4:00 PM temperatures were 82 degrees. By 7:00 PM, temperatures were 79 degrees.</p> <p>The facility ' s temperature log notes on 6/18/25 at 7:00 AM random temperatures were 79 degrees. At 11:00 AM, temperatures increased to 83 degrees. At 5:30 PM, random room temperatures were decreasing to 80-81 degrees.</p> <p>On 6/24/25 at 3:00 PM, V3 stated that the facility has rented three large portable AC units for each nursing unit to help keep facility temperatures at a comfortable level.</p>		