

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  145764	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  04/11/2025
NAME OF PROVIDER OR SUPPLIER  Morgan Park Healthcare		STREET ADDRESS, CITY, STATE, ZIP CODE  10935 South Halsted Street Chicago, IL 60628	

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 - Few</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>39779</p> <p>Based on observation, interview, and record review the facility failed to ensure that the environment remains free of hazards and was a homelike environment. The facility failed ensure the wall paint in residents' rooms was not chipped and damaged exposing the drywall and failed to ensure ceiling and wall tiles in the shower room were repaired or replaced. This failure has the potential to affect 101 residents residing on the second floor.</p> <p>Findings include:</p> <p>On 04/08/25 at 01:12 PM Chipped paint was observed along the lower part of R1's south wall and along the side of R1's bed.</p> <p>On 04/08/25 at 02:26 PM Chipped paint was observed on the lower south wall in R6's room and at the head of R6's bed. R6 said it is probably due to them pushing my roommate in the wheelchair and bumping the wall.</p> <p>On 04/09/25 01:05 PM V2 (Director of Nursing) stated Plastered areas on the walls need to be painted.</p> <p>On 04/10/25 at 10:59 AM V5 (Maintenance) stated I have worked here for about a year. I started repairs from the first floor up everywhere there were holes in the walls. It is from residents and staff neglect of pushing the bed into the wall and the wheelchairs damaging the walls. If the residents are on restriction they will damage the walls. A lot of stuff has been neglected and I am trying to play catch up. It is harder to get in the resident rooms because some of them don't get up. I describe it (the damage) as dents from the beds or holes in the wall not so much the paint but the drywall.</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 0584</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>On 04/10/25 at 11:19 AM During the facility tour with V5 (Maintenance) the wall at the head of R12's bed was scrapped exposing the dry wall, and the electrical outlet near the window was missing the outlet cover. When V5 turned on the water in the sink it did not drain and R5 said yeah, its clogged. V5 said if the nurse doesn't put it in the work order book, I don't know the work needs to be done. The second-floor south shower room corner of wall was observed with broken off plaster. V5 said that is from the wheelchair. Hanging, peeling paint was observed on the bathroom ceiling in R13's room. V5 said that is from a leak or something. We have to sand and paint, and the resident cannot be in the room. A brown stain was observed around the base of the toilet in R15's bathroom. V5 said the brown is from a previous leak and need to be cleaned up. Four loose ceiling tiles, 4 ceiling tiles with brown spots, and a missing wall tile with a hole in the wall was observed in the 2 north shower room. One missing hand railing was observed on the west wall on 2 south. On the wall on the side of R2's bed, the pant was scraped off the wall exposing the drywall. V5 said this is real bad, all the rooms need attention. The paint on wall on the side of R1's bed was scrapped exposing the dry wall. The lower part of the north wall was observed with scrapes exposing the dry wall. V5 said that is from years of neglect, it is not a matter of fixing it but keeping it fixed. The wallpaper was observed to be peeling off the wall in the soul kitchen below the window and above the outlet on the east wall above the electrical outlet.</p> <p>On 04/10/25 at 04:39pm V1 (Administrator) stated I heard about the environment concerns; it needs a lot of sprucing, and they need to put the money in it.</p> <p>Residents' Rights for People in Long-Term Care Facilities document in part: Your facility must be safe, clean, comfortable, and homelike.</p> <p>Policy: Titled Preventive Maintenance Program reviewed 11/23 document in part: To conduct regular environmental tours/safety audits to identify areas of concern within the facility. 3. Preventive management program will review the following areas during random rounds: 6. Floor tiles are assessed for cracking and wear. 8. Are handrails present and in working condition. 12. All electrical equipment is checked for safety. 14. Ceiling tiles are free from watermarks or spots. 15. Wall coverings are intact and free of tears or loose seams. 17. Drains are clean and free of debris.</p> <p>Policy: Titled Safety and Supervision of Residents reviewed 11/24 document in part: our facility strives to make the environment as free from accident hazards as possible. 2. Safety risks and environmental hazards are identified on an ongoing basis.</p>		