

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 145838	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 03/25/2025
NAME OF PROVIDER OR SUPPLIER Peterson Park Health Care Ctr		STREET ADDRESS, CITY, STATE, ZIP CODE 6141 North Pulaski Road Chicago, IL 60646	

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 0600</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Protect each resident from all types of abuse such as physical, mental, sexual abuse, physical punishment, and neglect by anybody.</p> <p>43351</p> <p>Based on interview and record review, the facility failed to protect the resident's right to be free from physical abuse by a resident. This failure affected 1 (R2) resident who vocalized that he felt that his life was in terrible danger when a resident (R5) slapped him on his face.</p> <p>Findings include:</p> <p>On 03/17/2025 at 12:24pm, R2 stated couple of weeks ago, we (R2 and R8) were talking about car insurance, when he (R5) slapped me with his open right hand above my temple. I did not know what to do. When his hand landed on my face, I felt I was in a terrible danger.</p> <p>On 03/17/2025 at 12:16pm, R8 stated I did observed (R5) hitting (R2) a couple of weeks ago. He (R5) hit him (R2) on the face. I was talking to him (R2), and he (R5) hit him on his face with open hand on the left side of his (R2) face. He (R5) said he was upset because he (R2) was talking to me. The intent was to physically harm him, and he said I told you I don't want you in my room.</p> <p>On 03/19/2025 at 2:21pm, V22 (Licensed Practice Nurse) stated I was working that weekend on 03/01/2025. I was by my cart outside of the room preparing (R8)'s medications, while doing that, I heard a strange sound. I went in the room to see what is going on. I saw (R5) and (R2) standing up. (R2) was panting. He was upset based on his body language. There was a frown on their faces. I went in the middle. I sat him (R2) on his wheelchair and propelled him to his room. I asked him what happened, and he (R2) said R5 hit me on my face. I went to (R5)'s room and asked him what happened, and he (R5) said I told him not to come to my room while I am sleeping; he just kept on coming and so I just let him know how serious I am about not coming to my room while I am resting. I did assess him (R2). He has redness on the side of his face, I don't remember which side. It was tender because when I touched it, he moved his face away not wanting to be touched. He did a reaction of pulling his face away when I touched that side of his face.</p> <p>On 03/19/2025 at 9:49am, V18 (Family Nurse Practitioner) stated I was called to assess him (R2). From what I was told, there was an altercation between (R2) and (R5) that he (R2) got punched on his left side of face. I assessed him and there was tenderness on that side of his face. There was no discoloration, but it was tender.</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 0600</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>On 03/17/2025 at 3:28pm, V11 (Social Service Director) stated (R5) slapping (R2) is considered physical abuse. It is not expected of resident to be slapped by another resident. Our environment should be a home like environment and safe for all the residents.</p> <p>On 03/17/2025 at 2:30pm, V1 (Administrator) stated I asked him (R5) about the incident. He (R5) said R2 kept coming into their (R5 and R8) room. He (R5) said that he was just sleep deprived and frustrated because he could not sleep, and he said he slapped him on the face. Of course, a resident is not expected to be slapped by another resident. He (R5) said he was just not himself and he made a poor decision. He really could not think because he was sleep deprive.</p> <p>R2's Admission Record documented that R2's diagnoses (include but not limited to) neoplasm of rectosigmoid junction, atherosclerotic heart disease, and hypotension.</p> <p>R2's (02/06/2025) Minimum Data Set documented, in part Section C. Cognitive Patterns. C0500. BIMS (Brief Interview for Mental Status) Summary Score: 99. Unable to complete the interview. C1000. Cognitive Skills for daily decision making: 1 - modified independence - some difficulty in new situations only.</p> <p>R2's (Active Order as Of: 03/17/2025) Order Summary Report documented, in part send to hospital ER for head and hip protocol, due to physical altercation. Active 03/01/2025.</p> <p>R2's (3/6/2025) After Visit summary documented, in part Today's visit. Reason for visit: Battery.</p> <p>R2's (03/07/2025) final reportable documented, in part 2. Allegation type. Type of Abuse. Cross mark on 'Physical'. Summary of interview with individual name in the allegation: (R5) stated that he lost control over himself due to a lack of sleep and due to (R2)'s laughing at his request to keep it down. (R5) stated he never intended to just get his attention. Summary of Interview with residents on the unit: (R8) stated that he saw (R5) slap (R2)'s face as a means to get him to leave. Summary of investigator's findings: (R5) said he slapped (R2) as a way of telling him to leave the room. (R5) explained that he was extremely tired and 'lost himself a bit', believing it was the only way to achieve peace and quiet. Based on resident and staff interviews, the allegation of abuse cannot be substantiated. (R5) believed that slapping (R2) was the only way to create a quiet atmosphere and remove (R2) from his room. He stated that he 'lost himself' momentarily.</p> <p>R5's Admission Record documented that R5's diagnoses (include but not limited to) hypertension, osteoarthritis and Type 2 Diabetes Mellitus. Date of Discharge: 03/01/2025. discharged to: Acute Care Hospital.</p> <p>R5's (01/23/2025) Minimum Data Set documented, in part Section C. Cognitive Patterns. C0500. BIMS (Brief Interview for Mental Status) Summary Score: 15. Indicating R5's mental status as cognitively intact.</p> <p>R5's (09/05/2024) care plan documented, in part Focus: Identified Offender - history of criminal behavior. Aggravated battery. Goal: will behave in a safe manner consistent with resident conduct policies.</p> <p>R8's Admission Record documented that R8's diagnoses (include but not limited to) essential hypertension, alcohol abuse and dependence and anxiety disorder.</p> <p>(continued on next page)</p>		

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<p>F 0600</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>R8's (12/16/2024) Minimum Data Set documented, in part Section C. Cognitive Patterns. C0500. BIMS (Brief Interview for Mental Status) Summary Score: 10. Indicating R8's mental status as moderately impaired.</p> <p>The (undated) Residents' Rights for People in Long-Term Care Facilities documented, in part As a long-term care resident in the State, you are guaranteed certain rights, protections and privileges according to State and Federal laws. Your rights to safety. You must not be abused physically. Your facility must be safe.</p> <p>The (7/12/24) Abuse and Neglect documented, in part Policy Statement: It is the policy of the facility to provide professional care and service in an environment that is free from any type of abuse, corporal punishment, misappropriation of property, exploitation, neglect or mistreatment. The facility follows the federal guidelines dedicated to prevention of abuse and timely and thorough investigations of allegations. Abuse is a willful infliction of mistreatment and injury. Types of abuse: 1. Physical abuse. Includes but not limited to infliction of injury. Examples: slapping. Potential aggressors include but not limited to other residents.</p>		