STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	145947	A. Building B. Wing	05/13/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Aperion Care Midlothian	3249 West 147th Street Midlothian, 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)
F 0807 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Some	Ensure each resident receives and the facility provides drinks consistent with resident needs and preferences and sufficient to maintain resident hydration. Based on observation, interview, and record review, the facility failed to make water available for residents in between meals to maintain residents' hydration and failed to make water pitchers available for residents. These failures affected five residents R2, R9, R10, R11, and R12, reviewed for water availability in between meals.On 5/11/26 between 11:45am and 12pm, during observation of residents on the units with V14(CNA/Certified nurse assistant), and later with 15(CNA), and V16(LPN/Licensed Practical Nurse Supervisor), several residents including R2, R9, R10, R11, and R12, were observed without water or water pitchers at the bedside. Other residents were observed with empty water pitchers. The Surveyor asked V14(CNA/Certified nurse assistant) why residents did not have any water pitchers or water available at their bedside to drink when needed before lunch is served. V14 responded that all residents get water on their trays during mealtimes. V14 later said that residents should be given water in the pitchers daily. V14 stated she was not sure if new water pitchers are available in the storage.On 5/11/26 between 11:45am, V2 (Director of Nursing) Stated that all residents with orders for thin liquids should have water available at the bedside except if they are on fluid restriction. V2 later presented the list of 4 residents on Nectar Thick liquids, 2 residents on Honey thick liquids, and 3 residents on Fluid Restriction. R2, R9, R10, R11, and R12 were not on these lists.Physician Order Sheet records for these five residents dated as follows showed that they have orders for Fluid Consistency to be Thin Liquids: R2 - 12/5/2022; R9 - 1/25/2023; R10 - 4/8/2024; R11 - 9/1/2021; R12 - 12/4/2019.Nutrition Care Plans for these 5 residents also state that diets orders should be followed.Facility's policy on water pass hydration with latest revision dates 11/28/2012 fits in part: to provide water to residents in a clean and sanitary manner to meet hydration needs. Procedure states to perform hand hygiene and scoop ice into a picture or Styrofoam cup and fill with tap water to cover the ice and fill the cup or pitcher.

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

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	145947	A. Building B. Wing	05/13/2026

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Aperion Care Midlothian	3249 West 147th Street Midlothian, IL 60445

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(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information)
F 0909 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Some	Regularly inspect all bed frames, mattresses, and bed rails (if any) for safety; and all bed rails and mattresses must attach safely to the bed frame. Based on observation, interview, and record review, the facility failed to ensure that residents' bed frames have functioning manual lift mechanism to raise or lower the bed and failed to ensure that a resident's electric bed was in good repair. These failures affected five residents, R3, R4, R5, R6, and R7, reviewed for functional beds that was in good repair.Findings include:On 5/11/26 between 11:15am and 12:00pm, during observation of residents on the units with V14(CNA/Certified nurse assistant), and later with V15(CNA), the following were observed: With V14, R7's electric bed frame control was not functioning; V14 looked under the mattress and found the electric cord and tried to connect it to the bed frame, but the bed still did not work. V14 stated that she(V14) would notify Maintenance staff. With V15, several other bed frames with manual crank handles including the bed frames for R3, R4, R5, and R6 were observed to not work properly. V15 stated that if the crank handle cannot lift the bed, then staff must bend too much to help residents who need assistance.On 5/11/26 at 1:45pm, V3(Maintenance Director) Interviewed regarding the non-functional bed frames. V3 stated that if nursing staff notified him of the non-functioning bed frame like they did for some bed frames, that he (V3) repaired some of the bed frames. V3 added that some of the bed frames' crank handles have rusted ends, and he tried his best to repair them. V3 showed this surveyor the oil spray bottle that he uses to make the crank handles that were stiff so work properly. V3 later presented a list of records of Maintenance issues that he(V3) fixed every day. V3 said he would go and fix the bed frames.On 5/12/26 at 11am, V1(Administrator) stated that since the facility Started to admit more residents that require more care, that the facility has started purchasing more electric beds that will not have problems with crank handles, and that the facility will continue to replace the old bed frames with new beds.Facility's document titled Job description for Maintenance Director states in part: Ensure that supplies and equipment are maintained to provide safe and comfortable environment. Promptly report equipment or facility damage to the administrator. Make periodic rounds to check equipment and to ensure that necessary equipment is available and working properly. Monitor maintenance procedures to ensure that supplies are used in an efficient manner to avoid waste.