

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 146018	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 10/03/2024
NAME OF PROVIDER OR SUPPLIER Little Village Nrsg & Rhb Ctr		STREET ADDRESS, CITY, STATE, ZIP CODE 2320 South Lawndale Chicago, IL 60623	

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 0914</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Provide bedrooms that don't allow residents to see each other when privacy is needed.</p> <p>32338</p> <p>Based on observation, interview, and record review, the facility failed to ensure that residents have privacy curtains which extend around the bed. This failure affected Four residents (R8, R9, R10, and R14) reviewed for residents' privacy.</p> <p>Findings include:</p> <p>On 9/30/24 at 10:59 am, Surveyor observed that the privacy curtains that are supposed to extend around the beds for R8, R9, R10, and R14 were not there.</p> <p>On 10/2/24 at 11:15am, the surveyor observed again that the privacy curtains were still missing.</p> <p>At this time, the surveyor called the attention of V10(CNA/Certified Nurse Assistant). V10 stated that each resident usually has a curtain around the bed for when they need privacy.</p> <p>On 10/2/24 at 11:30 am, V7 (Maintenance Director) stated All residents have privacy curtains. The surveyor then toured around with V7 and found that the privacy curtains for all of the 4 residents were missing. V7 stated I will put up the privacy curtains when they are available.</p> <p>The facility's policy titled Quality of Life - Dignity with revision date August 2009 states: each resident shall be cared for in a manner that promotes and enhances quality of life, dignity, respect, and individuality. #10 states: Staff shall promote, maintain, and protect resident privacy, including bodily privacy during assistance with personal care and during treatment procedures.</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 0919</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Make sure that a working call system is available in each resident's bathroom and bathing area.</p> <p>32338</p> <p>Based on observation, interview, and record review, the facility failed to ensure that residents' call lights are functional and in good working order. This failure has the potential to affect 5 residents, R2, R7, R11, R12, and R13, reviewed for functioning call lights.</p> <p>Findings include:</p> <p>On 9/30/24 at 10:40am, the surveyor observed that the rooms of R2, R7, R11, R12, and R13 did not have functioning call lights for residents to ask staff for assistance.</p> <p>On 10/2/24 at 10:45am call lights situations were still the same.</p> <p>On 10/2/24 at 11:30 am, V7 (Maintenance Director) was shown around and V7 noted the rooms/residents that needed their call lights fixed. V7 stated I will start working on them right away. V7 presented the facility's Maintenance logbook which did not contain any documentation of the call lights issues.</p> <p>Facility's policy on call lights dated 05/17 states in part: Objective - To respond to residents' requests and needs. #5 states: when the resident is in bed or confined to a chair, be sure the call light is within easy reach of the resident. #7 states: Report all defective call lights to the maintenance department promptly.</p> <p>Maintenance Job Description states in part: Assure the proper operation of all call lights. Install specialized or individualized call light systems per administrative instruction and resident need.</p>		

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<p>F 0921</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Make sure that the nursing home area is safe, easy to use, clean and comfortable for residents, staff and the public.</p> <p>32338</p> <p>Based on observation, interview, and record review, the facility failed to ensure that the large community shower room on the A-Wing is maintained in a sanitary manner free of patches black substance. This failure has the potential to affect all 13 residents on the A-Wing and other residents who use this shower room.</p> <p>Findings include:</p> <p>On 9/30/24 at 10:59 am, Surveyor observed the A-Wing Community shower room with wet towels and blankets on the floor and patches of black substances all over most areas of the ceiling. Also, there was an open area of the ceiling, and the ceiling air-vent was broken and had accumulated dust. The surveyor asked V2(Director of Nursing) if the black substance is mold. V2 stated I cannot tell what it is; let me call Maintenance. V7(Maintenance Director) came and said It's black stuff from the moisture on the ceiling. I will clean it. Regarding the open area of the ceiling, and the broken ceiling vent with accumulated dust, V7 stated that the Contractor will come to do it.</p> <p>On 9/30/24 at 11:22am, with V7, the Surveyor observed the air vent behind the Ice Machine with accumulated dust. Inquired from V7 if it was okay to have so much dust on the vent; V7 stated I will clean it as soon as possible.</p> <p>The facility's job description titled Housekeeping Aide states in part: thoroughly clean and sanitize all assigned bathrooms, tub, and shower rooms.</p> <p>The facility's document titled Maintenance Policy states: it is the policy of this facility to provide a safe, accessible, effective, and efficient environment of care that is consistent with its mission, services, and law and regulations. #5 states in part: Preventative maintenance programs shall include the periodic inspection, general maintenance procedures, and repair or replacement .</p> <p>Facility's Housekeeping policy dated January 2019 states: It is the policy of this facility to maintain a clean, odor free, and comfortable orderly environment in all healthcare and public areas, which meets the sanitation needs of the facility and residents rights for a safe, clean, comfortable homelike environment. #4 States the department shall routinely clean the environment of care using accepted practices, to keep the facility free from offensive orders, the accumulation of dust, rubbish, dirt, and hazards.</p>		