

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  146161	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  11/22/2024
NAME OF PROVIDER OR SUPPLIER  Southview Manor		STREET ADDRESS, CITY, STATE, ZIP CODE  3311 S. Michigan Ave. Chicago, IL 60616	

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>32338</p> <p>Based on interview and record review, the facility failed to ensure that residents were free from resident to resident physical abuse. This failure affected two residents R1 and R2, reviewed for abuse.</p> <p>Findings include:</p> <p>R1's face sheet shows that R1 has diagnoses including Schizoaffective Disorder, Violent Behavior, Major Depressive Disorder, Anxiety Disorder, Restlessness and Agitation, and Bipolar Disorder.</p> <p>R1's BIMS (basic interview for mental status) score of 15 out of 15 (Cognitively intact) dated 8/29/24.</p> <p>R2's face sheet shows diagnoses which include but are not limited to Schizoaffective Disorder Bipolar Type, Epilepsy, Schizophrenia, Major Depressive Disorder, and Auditory Hallucinations.</p> <p>R2's BIMS score of 15 out of 15 (Cognitively intact) dated 9/6/24.</p> <p>On 11/14/24 at 2:20pm, R2 stated He pushed me and swung on me, and I hit him in the face. Staff came between us. I have never had a fight with (R1) before. But now, we're cool. We're friends now. I feel safe.</p> <p>On 11/14/24 at 2:25pm, R1stated (R2) hit me in the face after I hit (R2) first. This eye (pointing to the left eye) was swollen. I have nothing against him. That's over with. I feel safe.</p> <p>The facility's Final Investigation Report of Resident-to-Resident Altercation dated 11/1/24 stated R1 was physically aggressive by walking toward R2 and striking R2 in the face, and R2 in turn hit R1 in the eye. This investigation also stated that R1 became agitated and was unable to control his actions because of his diagnosis.</p> <p>On 11/21/24 at 2:02pm, V1(Administrator) stated Anytime residents hit each other, I will consider that an abuse. If there's physical touch, it's a form of abuse.</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>Facility's Abuse Policy dated 3/2022 states in part This facility affirms the right of our consumers to be free from verbal, physical, sexual, mental abuse, neglect, exploitation, misappropriation of property, involuntary seclusion, or mistreatment. This facility therefore prohibits abuse, neglect .</p> <p>This policy further states that abuse means any physical or mental injury or sexual assault inflicted upon a consumer other than by accidental means. Abuse is the willful infliction of injury, unreasonable confinement, intimidation, or punishment with resulting physical harm, pain, or mental anguish to a consumer Physical abuse is the infliction of injury on a consumer that occurs other than by accidental means and that requires medical attention. Physical abuse includes hitting, slapping, punching, kicking, and controlling behavior through corporal punishment.</p>		