

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 03/20/2025
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 - 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>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 47303</p> <p>Based on interview and record review, the facility failed to provide a safe environment by not protecting four residents from physical abuse. This failure affected 4 residents (R1, R3, R4 and R5) out of six reviewed for physical abuse. This failure resulted in R5 sustaining a black eye and verbalizing being fearful of being around the perpetrator.</p> <p>Findings include:</p> <p>1.) R1 is [AGE] year-old with diagnosis including but not limited to: manic episode, schizophrenia, hypertensive heart disease and umbilical hernia.</p> <p>R1 has a BIMS (Brief Interview of Mental Status) score of 15, indicating cognitively intact.</p> <p>R1's Care Plan documents, R1 has a history of aggressive behaviors; R1 is at risk for abuse; monitor R1 behavior to prevent predisposition to abuse.</p> <p>2.) R5 is [AGE] year-old with the following diagnosis: paranoid schizophrenia, anemia, schizoaffective disorder and other symptoms and signs involving appearance and behavior.</p> <p>R5 has a BIMS (Brief Interview of Mental Status) score of 13, indicating cognitively intact.</p> <p>R5's Care Plan documents, R5 has a history of aggressive behaviors; R5 is at risk for abuse; monitor R5 behavior to prevent predisposition to abuse.</p> <p>On 3/17/2025 at 10:26 AM, V1 (Administrator) said that R1 and R3 were both hospitalized for psychiatric evaluations after assaulting another resident in the facility and that R1 will be returning to the facility today. V1 state R5 sustained a black eye from the incident that took place with R1, but R5 said that he didn't need to go to the hospital. The doctor was notified and R5 has been monitored daily by nursing.</p> <p>On 3/17/25 at 1:05 PM, V12 (Licensed Practical Nurse/LPN) said, R1 is very paranoid and delusional. He (R1) had accused R5 of calling him a N***** and began to punch him (R5).</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 - Actual harm</p> <p>Residents Affected - Few</p>	<p>On 3/17/25 at 1:07 PM, R5 said, I don't feel safe with R1 on this unit. He knocked me on the floor, had his knee on my head and kept hitting me for no reason. I didn't call him N***** that day. He always bothers me for no reason.</p> <p>On 3/19/25 at 11:00 AM, R1 said, I hit R5 because he called me a N*****.</p> <p>On 3/19/25 at 11:15 AM, V3 (Director of Nursing/DON) said that there were several forms of abuse including: physical, verbal, sexual, seclusion, emotional, and misappropriation of funds.</p> <p>(State Surveying Agency) Incident Report form dated 3/6/25 documents, R1 was observed to have approached resident R5 on the fourth floor while exhibiting behaviors. While staff attempted to intervene and redirect the residents, R1 extended his fist towards R5 striking him in the face. This altercation resulted in visible bruising to both sides of R5's face.</p> <p>Facility Incident Report Statement dated 3/6/25 and authored by R5 documents, I (R5) was coming from the first floor when R1 saw me in the hallway and grabbed me and started punching me in the face.</p> <p>Facility Incident Report Statement dated 3/6/25 and authored by V8 (Psychiatric Rehabilitation Services Coordinator) documents, I (V8) was in the office when I heard noises, and I stepped out to check what was going on. I saw R1 punch R5 in the face.</p> <p>Police report dated 3/6/25 documents R5 as the victim of a simple battery.</p> <p>R5's progress note dated 3/8/25 by V27 (LPN) documents, it was noted he (R5) had some discoloration and mild swelling to his right eye.</p> <p>R5's progress note dated 3/9/25 by V7 (LPN) documents, R5 was noted with darkening and swelling under right eye.</p> <p>R5's skin note dated 3/15/25 documents, R5 has a darkened area under right eye.</p> <p>3.) R3 is [AGE] year-old with diagnosis including but not limited to: schizoaffective disorder, schizophrenia, extrapyramidal and movement disorder, unspecified psychosis, and violent behaviors.</p> <p>R3's Care Plan documents, R3 has a history of aggressive behaviors; R3 is at risk for abuse; monitor R3 behavior to prevent predisposition to abuse.</p> <p>4.) R4 is [AGE] year-old with diagnosis including but not limited to: schizoaffective disorder, lack of coordination, schizophrenia, unspecified psychosis, major depressive disorder, and asthma.</p> <p>R4's Care Plan documents, R4 has a history of aggressive behaviors; R4 is at risk for abuse; monitor R4 behavior to prevent predisposition to abuse.</p> <p>On 3/19/25 at 12:07 PM, R4 said that he had asked R3 to stop walking toward him (R4) punching the air, but R3 kicked him (R4) and that they started fighting.</p> <p>(continued on next page)</p>		

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<p>F 0600</p> <p>Level of Harm - Actual harm</p> <p>Residents Affected - Few</p>	<p>On 3/20/25 at 10:04 AM, surveyor asked V26 (Nurse Practitioner) if it was acceptable for any resident to hit another resident. V26 said, that it is not ok for a resident to hit another resident because it could be considered physical abuse.</p> <p>(State Surveying Agency) Incident Report form dated 3/2/25 documents, in a moment of anger R3 kicked R4, leading to a physical altercation in which R4 punched R3 back.</p> <p>Facility Incident Report Statement dated 3/2/25 and authored by R3 documents, I (R3) was frustrated people telling me not to walk by their room in the hallway. R4 was one of the people telling me not to walk by his room so I was angry, and I kicked him first and he punched me, and we started fighting.</p> <p>Police report dated 3/1/25 documents R4 as the victim of a simple battery.</p> <p>Facility policy titled Abuse documents, this facility affirms the right to our residents to be free from verbal, physical, sexual, mental abuse, neglect, exploitation, misappropriation of property, involuntary seclusion, or mistreatment.</p>		

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<p>F 0610</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Respond appropriately to all alleged violations.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 47303</p> <p>Based on interview and record review, the facility failed to conduct a thorough investigation of an allegation of sexual abuse. This failure affected one resident (R1) out of five reviewed for abuse.</p> <p>Findings include:</p> <p>R1 is [AGE] year-old with diagnosis including but not limited to: Hypertensive heart disease, epilepsy, manic episode, schizoaffective disorder, and unspecified dementia.</p> <p>R1's BIMS (Brief Interview for Mental Status) score is 15, indicating cognitively intact.</p> <p>On 3/19/25 at 11:15 AM, V3 (Director of Nursing) said that there were several forms of abuse including: physical, verbal, sexual, seclusion, emotional, and misappropriation of funds.</p> <p>On 3/19/25 at 11:45 AM, V1 (Administrator) said that he is the abuse coordinator for the facility and that he takes all abuse allegations seriously and investigates accordingly. Surveyor inquired about the procedure for investigating sexual abuse allegations. V1 said that for sexual abuse allegations, staff immediately separate both residents, conduct head to toe assessments and send the alleged victim to the hospital to have a rape kit done to confirm or rule out rather the sexual assault occurred. V1 said that he was not aware that R1 was not sent to the hospital following the sexual assault allegations on 2/14/25 and that he (R1) should have been sent to the hospital for a rape kit. V1 said that although the police were called to the facility, they (police) cannot rule out sexual assault.</p> <p>On 3/19/25 at 12:40 PM, V12 (Licensed Practical Nurse/LPN) said, On the day of the sexual allegation, R1 was in his room, and I heard him complaining of missing money. He then stated that another resident came into his room, tried to pull down his pants and took his money. R1 was not sent to the hospital because he did not tell me that he was penetrated. V12 said that R1 has a history of making false allegations.</p> <p>On 3/19/2025 at 12:50 PM, R1 said, R2 pulled my pants down and stuck his p*** in my b***.</p> <p>Facility (State Surveying Agency) Incident Report Form dated 2/14/25 documents, it was brought to the Administrator's attention that R1 has alleged sexual misconduct involving inappropriate touching and suspected theft of monies while he lay sleeping.</p> <p>Facility Incident Report Statement dated 2/14/25 and authored by R1 documents, I (R1) was sleeping in my bed, and I felt a hand patting me down and a p**** in my b***.</p> <p>Facility Incident Report Statement dated 2/14/25 documents, R1 accused that another resident attempted to steal his money and sexually assault him.</p> <p>Police Report dated 2/14/25 documents, R1 as the victim of 'other crime against persons'.</p> <p>(continued on next page)</p>		

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F 0610 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Facility policy titled Abuse documents, the facility has attempted to establish a resident sensitive and resident secure environment. The purpose of this policy is to assure that the facility is doing all that is within its control to prevent occurrences of abuse, neglect, exploitation, misappropriation of property and mistreatment of residents.		

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<p>F 0921</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Many</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>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 30279</p> <p>Based on observation, interview, and record review the facility failed to assure that the residents' environment is clean, in good repair and remain free of accidental hazard. This failure has the potential to affect all 128-residents residing in the facility.</p> <p>Findings include:</p> <p>On 03/17/25, during environment rounds with V5 (Maintenance Director) the following observations were made:</p> <p>At 10:26am, room [ROOM NUMBER] noted with caked blackish substance on the room floor, there is no closet doors and resident clothing observed stored on the bare floor. The closet door floor guard noted with metal guard sticking out up right and sharp. When this was shown to V5. V5 stated yes, it is a hazard, it is for the closet, but it should not stick out like that.</p> <p>On 03/17/25 at 10:28am, in room [ROOM NUMBER] observed 12 inches of cracked holes on the entrance wall to the room. Caked blackish particles on the floor and at base board areas in the room. V5 who was present at the time stated that the housekeeping department are supposed to do a good cleaning of the rooms.</p> <p>At 10:29am, in room [ROOM NUMBER] Resident's clothing noted stored in a plastic bag and some on the bare floor. There were no closet doors, 1/2 door hanging and dangling with no hangers for resident to hang their clothes. V5 stated it need to be fixed.</p> <p>At 10:32am, in room [ROOM NUMBER] garbage cans in the room are overflowing. Resident clothes noted around the bed stored on the bare floor and some in plastic bags not labeled. Resident stated there is no place safe to put them, and I am afraid they (Peers) will steal them. V5 stated that is for the housekeeping department.</p> <p>At 10:36am, in room [ROOM NUMBER] four (4) 12 by 12 inches tiles missing on the room floor, Cobweb (spider web) noted on the door hinge. Radiator cover observed with holes, brownish in color with debris. V5 stated all these needs to be fixed.</p> <p>V5 stated that there are twenty (20) rooms on the floor and all of which did not have any closet door and that maybe they would fix them later because that is why those clothes are spilling over out of the closet.</p> <p>At 10:39am in room [ROOM NUMBER], observed under the sink noted with caked blackish particles and brownish particles. Baseboard of the bathroom walls in the shared bathroom with room [ROOM NUMBER] were missing. No closet door and clothing stored on the bare floor. There were no clothes hangers.</p> <p>(continued on next page)</p>		

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<p>F 0921</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Many</p>	<p>At 10:40am, in room [ROOM NUMBER] hand washing sink observed on the floor on top of the garbage can with water all over the floor. Resident stated that it just fell out of the wall and the resident placed it on the garbage can so that the water will not be all over the floor. V5 who was present at the time asked the resident since when and the resident stated it happened yesterday. V5 stated he was not aware of this.</p> <p>At 10 :41am, room [ROOM NUMBER] clothes all over the bare floor. No closet door, no clothes hangers.</p> <p>During this observation 6th floor hallway noted with caked dry particles at the baseboard with blackish brownish stains. Common shower room has no non-skid mat. V5 stated these are not dirt from today and I am not the housekeeping supervisor. V5 paged for the housekeeper assigned to the 6th floor.</p> <p>On 03/17/25 at 10:45am, interview with V11 (Housekeeper) regarding the general cleaning of the rooms, hallways, and common bathroom. V11 acknowledged that he was the assigned housekeeper for the 6th floor stating I am the housekeeper for this floor today, I (V11) have not got to the floor yet to clean them. V11 stated the supervisor was not in the facility at the time of interview.</p> <p>At 10:55am, on the fourth floor in room [ROOM NUMBER] observed holes on the wall under the sink with brownish caked dry particles. Walls in the room with holes and cracked walls. V5 stated it needs to be fixed some of these residents break them. 4th floor hallway noted with blackish caked particles.</p> <p>At 10:56am, in room [ROOM NUMBER] garbage can observed overflowing. V5 stated that's for housekeeping to take care of them. The housekeeping supervisor takes care of another facility, might be over at the other facility. Common shower room on the floor has no non-skid mat for safety.</p> <p>At 10:58am, on the 3rd floor in the elevator the threshold in the elevated door noted with raised metal strip, tiles missing on the floor inside the elevator, and caked blackish dry particles on the base of the elevator walls. When shown to V5, V5 stated the threshold needs to be fixed because that can be a safety issue hazard if the resident feet get caught in it. V5 stated that all these things need to be fixed maybe they (administration) will fix it later.</p> <p>Upon entering the 3rd floor holes was noted in the south hallway walls.</p> <p>In room [ROOM NUMBER] the Sink was observed leaking water on the floor and the resident placed the garbage under the sink to collect the water.</p> <p>room [ROOM NUMBER] clutters with clothes stored on the bare floor. No hangers noted in the closet.</p> <p>Common shower room on the 3rd floor has no non-skid mat.</p> <p>At 11:45am, V5 stated that there are lots of things to be repaired (referring to the facility building).</p> <p>On 03/18/25, during the environment rounds with V5 (Maintenance Director) the following observations were made:</p> <p>(continued on next page)</p>		

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<p>F 0921</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Many</p>	<p>At 10:36am, on the 1st floor debris and caked dry blackish particles noted to the base of the walls in the hallway.</p> <p>The entrance to the kitchen from the elevator noted with debris and caked dry substances to the walls, splashes of dry brownish substances on the wall. Holes noted to the wall with debris.</p> <p>At 10:40am, when this observation was shown to V1 (Administrator), V1 stated that it will be fixed, and they should not look like that.</p> <p>At 10:48am, kitchen floor noted with dry caked particles. Holes noted on the walls by the cooler.</p> <p>The freezer door noted with buildup ice and tiles missing by the door. Upon opening the freezer ice buildup noted to the door area and right-hand corner of the freezer. Whitish debris (particles) noted in the freezer. Three (3) Food carts noted with caked blackish particles with whitish and blackish stains. When V21 (Cook) was shown the surveyors observations and was asked about how often the kitchen floors are cleaned. V21 (Cook) stated that the kitchen is deep cleaned once a month. I can see it and it should be cleaned.</p> <p>On 03/18/25 at 10:52am these observations were shown to V22 (Dietary Director). V22 stated yes it must be cleaned and we will clean them. V22 stated the freezer needs to be cleaned and they are cleaned every week. V22 could not explain why the walk-in freezer have such amount of ice buildup. V5 who was present at the time stated that the freezer should still be clean and maintained in good working condition every day.</p> <p>On 03/18/25 at 11:03am in the common dining area two ceiling tiles observed with brownish stains and two fresh spots. V5 stated it is from water the leaks from the resident rooms (from the 2nd floor). V5 stated it is one thing or the other from these types of residents.</p> <p>Baseboard tiles missing, and holes noted on the walls.</p> <p>Radiators cover broken and sharp edges noted uncover with the cover edge protruding out.</p> <p>Three black carpets noted on the entrance door to the dining room from the front smoking area with turn folding area. V5 stated they need to be replaced because that can be fall hazardous.</p> <p>Debris and caked blackish particles noted at the base board and the walls. V5 stated that V17 (Housekeeping Director) is in the building (facility) now and she needs to see these things too.</p> <p>On 03/18/25 at 11:12am, this was shown to V17, V17 stated that was dirt that could not be removed. V5 then stated it can be removed if properly cleaned because it is dirt and dust.</p> <p>On 03/18/25 at 11:14am, V2 (Assistant Administrator) was shown the common room observation concerns, V2 stated these should be taken care off already (referring by housekeeping).</p> <p>(continued on next page)</p>

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<p>F 0921</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Many</p>	<p>The maintenance Operational Manual for maintenance presented with effective date 4/2020 documented that maintenance service shall be provided to all areas of the building, grounds, and equipment. Listed process includes but not limited to the maintenance department is responsible for maintaining the building, grounds, and equipment in a safe and operable manner always, maintaining the building in compliance with current federal, state, and local laws, regulations, and guidelines, and maintaining the building in good repair and free from hazards.</p> <p>Facility policy on Pest Control presented with effective date 4/2020 guideline documented that the facility shall maintain an effective pest control program. Listed process includes maintaining an on-going pest control program to ensure that the building is kept free of insects and rodents and garbage and trash are not permitted to accumulate and are removed from the facility daily.</p> <p>The facility Housekeeping policy with no date documented policy statement that environmental surfaces will be cleaned and disinfected according to current CDC recommendations for disinfection of healthcare facilities and the OSHA bloodborne pathogens standard.</p>		

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<p>F 0925</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Many</p>	<p>Make sure there is a pest control program to prevent/deal with mice, insects, or other pests.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 30279</p> <p>Based on observation, interview, and record review the facility failed to implement an effective pest control program to rid facility of bed bugs and rodents. This failure has the potential to affect all 128-residents residing in the facility.</p> <p>Findings include:</p> <p>R6, R7, R8, R10, R11, R12, R13 and R15 were interviewed. They all have concerns with the cleanliness, mice sightings, and environmental maintenance stated that there are bedbugs everywhere in the beds, walls, and bed sheets. They crawl all over. R6 stated that the mice are under the beds and in the walls. R6 stated that no place is clean.</p> <p>V3 (Director of Nurses/DON), V4 ADON (Assistant Director of Nurses/ADON), V5 (Maintenance Director), V9 (Registered Nurse/RN), V14 (RN), V7 (Licensed Practical Nurse/LPN), V12 (LPN), V23 (LPN), V13 (Certified Nursing Assistant/CNA), V15 (CNA), and V24 (CNA) were also interviewed. They all acknowledged that there have been concerns with bed bug, roaches, and mice sightings, stating in part that there has been always a problem with bed bug in the facility but lately there has been reduction in the sightings because the new pest control company comes to exterminate weekly a follow-up on treatments. V4 stated the facility emptied the fifth floor to exterminate and the plan is to fumigate every floor. V3 stated that there is a problem of bed bugs.</p> <p>On 03/17/25 at 10:23am, V9 (RN) stated that I know we have bed bugs around here. They are in the rooms in the beds and on the ceiling. When the surveyor asks how did V9 knows that they are in the ceiling, V9 stated they are falling on me. V9 stated the bed bugs are sighted in the chairs at the nurse's station, multiple residents do complain about mice and roaches. And were reported to V5 (Maintenance Director). V9 stated that they (administration) have the exterminator come to spray, but we still see them (pests) around. V5 (Maintenance Director) who was present at the time stated yes, on the chairs, in resident rooms but I didn't know of the ceiling.</p> <p>On 03/17/25 at 10:32am, R6 observed in the room sitting on the bed with clothes stored on the bare floor and some placed in a plastic bag also stored on the floor around the bed. R6 stated there is no place safe to put the clothing and is afraid they may be stolen. R6 stated that there are bed bugs all over this place. Insects are everywhere and there are mice. R6 stated that the rooms are not cleaned, garbage overflowing. V5 who was present at the time stated that is for the housekeeping department to take care of R6's concerns.</p> <p>On 03/17/25 at 10:48am, V12 (LPN) stated that residents complained of seeing bedbugs and sometimes complained of itching and bites. V12 stated the last resident that complained about bug bites was R7.</p> <p>On 03/18/25 at 9:15am V3 (DON) stated that it is an ongoing thing with these bed bugs, I think unless the whole building is exterminated the problem cannot be solved. It is a long-time problem, and this is an old building. It is getting better now with the new (pest control company) being used.</p> <p>(continued on next page)</p>		

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<p>F 0925</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Many</p>	<p>During this investigation pest control book showed that the facility external pest control has been working on every floor of the facility to check and exterminate in the process of eliminating pest that includes, bed bug, roaches, and mice.</p> <p>Review of pest control log</p> <p>3/11/2025 - Showed bed bug activities: Rooms 301, 304, 331</p> <p>3/05/25 - Rooms 403, 406, 407, 408, 409, 426</p> <p>2/28/25 - Rooms 301, 304, 306,</p> <p>2/24/25 - rooms [ROOM NUMBERS] curtains</p> <p>Multiple rooms, base board, curtains, bed frame, with bed bug activities.</p>		