

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: ASL510501	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 05/22/2025
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NAME OF PROVIDER OR SUPPLIER SHERIDAN AT PARK RIDGE	STREET ADDRESS, CITY, STATE, ZIP CODE 510 N GREENWOOD AVE PARK RIDGE, IL 60068
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A 000	<p>Initial Comment</p> <p>Annual Licensure Survey 295.3020a)6)c) 295.3030a)b)d 295.3040, 955.145 a)1)2)b), 955.220 a)b)c)d) 295.40502e)1)2 295.4060a)8)B)</p> <p>Facility Reported Incident IL00192284- Unsubstantiated</p> <p>Complaint Investigation Survey IL00192367/2594268- Unsubstantiated</p>	A 000		
A3020	<p>Section 295.3020 Employee Orientation and Ongoing Training</p> <p>This Regulation is not met as evidenced by: Type 2 Violation</p> <p>Section 295.3020 Employee Orientation and Ongoing Training</p> <p>a) Each new employee shall complete orientation within 10 days after the starting date of employment that includes:</p> <p>6) Training in assistance with activities of daily living appropriate to the job.</p> <p>c) Each manager and direct care staff member shall complete a minimum of 8 hours of ongoing training, applicable to the employee's responsibilities, every 12 months after the starting date of employment. The training shall include:</p>	A3020		

Illinois Department of Public Health LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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A3020	<p>Continued From page 1</p> <p>This regulation is not met as evidenced by:</p> <p>Based on interview, and record review the facility failed to present surveyor documentation that new staff started orientation within 10 days of hire, completed the orientation within 30 days of hire, and document required 8-12 hours of continuing education training to staff. This failure has the potential to affect all residents in the facility.</p> <p>Findings include:</p> <p>On 5/20/2025 the surveyor provided to E 11 (Business Office Manager) with a list of staff files she needs to pull for the Staff requirement log sheet.</p> <p>On 5/20/2025 the surveyor reviewed 9 staff files, E11 said that all employees are cross-trained to work in Memory Care, the following occurred:</p> <p>1) E5 (Care Associate Assisted Living) hire date of 10/24/2024</p> <ul style="list-style-type: none"> 1) Alzheimer's training 2) Dementia Specific training. <p>2) E6 (Certified Nursing Assistant Assisted Living) hire date of 12/11/2024</p> <ul style="list-style-type: none"> 1) Alzheimer's training 2) Dementia Specific training. <p>3) E7 (Care Associate Memory Care) hire date of 4/26/2024</p> <ul style="list-style-type: none"> 1) missing employee orientation 2) fire extinguisher class 3) Continuing education training, 4) Alzheimer's training 	A3020		

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A3020	Continued From page 2 5) Dementia Specific training. 4) E8 (CNA MC) hire date of 9/21/2024 1) missing employee orientation 2) fire extinguisher class 3) Continuing education training, 4) Alzheimer's training 5) Dementia Specific training. 5) E9 (CNA AL) hire date of 3/17/2025 1) Alzheimer's training 2) Dementia Specific training. On 5/20/2025 E11 was unable to produce any additional documentation/proof that the above staff 1) completed or had any orientation, 2) did any Alzheimer's, Dementia required training.	A3020		
A3030	Section 295.3030 Initial Health Eval for Dir Care and FS empl This Regulation is not met as evidenced by: Type 3 Violation Section 295.3030 Initial Health Evaluation for Direct Care and Food Service Employees a) Each direct care and food service employee shall have an initial health evaluation, which shall be used to ensure that employees are not placed in positions that would pose undue risk of infection to themselves, other employees, residents, or visitors. b) The initial health evaluation shall be conducted not more than 30 days prior to and no later than 30 days after the employee's initial	A3030		

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A3030	<p>Continued From page 3</p> <p>employment in the establishment.</p> <p>d) The initial health evaluation shall include a physical examination. The examination shall include a determination that the employee appears to be physically able to perform the job functions that the establishment intends to assign to the employee.</p> <p>These requirements are not met as evidenced by:</p> <p>Based on interview, and record review, the facility failed to obtain initial medical health evaluations on staff 30 days prior to hire/ and no later than 30 days after employed. This has the potential to affect all staff and residents in the facility.</p> <p>Findings include:</p> <p>On 5/20/2025 the surveyor provided to E 11 (Assistant to Executive Manager) with a list of staff files she needs to pull for the Staff requirement log sheet. E2 noted that she was just, given this job 1 month ago and the files are not complete.</p> <p>On 5/20/2025 the surveyor reviewed 9 staff files; the following occurred:</p> <ol style="list-style-type: none"> 1) E2 (Director of Health and Wellness) hire date of 3/28/2025 <ol style="list-style-type: none"> 1) Missing initial Health Evaluation 2) E7 (Care Associate Assisted Living) hire date of 4/36/2024 <ol style="list-style-type: none"> 1) missing initial Health Evaluation <p>On 5/20/2025 E11 was unable to produce any additional documentation/proof that the above staff received or passed Initial Health Evaluation.</p>	A3030		

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A3040 A3040	Continued From page 4 Section 295.3040 Health Care Worker Background Check This Regulation is not met as evidenced by: Type 2 Violation Section 295.3040 Health Care Worker Background Check Section 955.145 Employment Verification a) Each health care employer or its designee shall provide an employment verification and update the demographic information for each employee no less than annually. (Section 33(i) of the Act) 1) The health care employer or its designee shall log into the Health Care Worker Registry through a secure login in a method prescribed by the Department. (Section 33(i) of the Act) 2) The health care employer or its designee shall indicate employment and termination dates (separation dates) within 30 days after hiring or terminating an employee. (Section 33(i) of the Act) b) Failure to comply with this Section constitutes a licensing violation. A fine of up to \$500 may be imposed upon a health care employer for failure to maintain these records. (Section 33(i) of the Act) (Source: Amended at 43 Ill. Reg. 3665, effective March 1, 2019) Section 955.220 Health Care Employer Files	A3040 A3040		

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A3040	<p>Continued From page 5</p> <p>a) The health care employer shall retain on file for a period of 5 years records of criminal records requests for all employees. The health care employer shall retain a copy of the disclosure and authorization forms, a copy of the live scan request form, all notifications resulting from the fingerprint-based criminal history records check and waiver, if appropriate, for the duration of the individual's employment. The files shall be subject to inspection by the Department. A fine of \$500 shall be imposed for failure to maintain these records. (Section 50 of the Act)</p> <p>b) If the Health Care Worker Registry indicates that the employee had no disqualifying criminal offenses or administrative findings at the time of hire, then the health care employer shall retain a screen print of this information in the employee's file. If the individual was not on the Health Care Worker Registry prior to being hired, then a screen print indicating that the worker was not found shall be retained in the employee's file.</p> <p>c) The health care employer shall retain a screen print of the background check initiation page, which documents that the employer did conduct an internet search of the web sites from the links provided through the Health Care Worker Registry and found no results from those web sites that would prevent the employee from being hired. No additional screen prints from those web sites shall be required in the employee's file.</p> <p>d) The health care employer shall maintain a copy of the documents required in this Section in the employee's personnel file or other secure location accessible to the Department.</p> <p>(Source: Amended at 33 Ill. Reg. 5378, effective</p>	A3040		

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A3040	<p>Continued From page 6</p> <p>March 26, 2009)</p> <p>These requirements are not met as evidenced by:</p> <p>Based on interview and record review, the establishment failed to initiate a health care worker background check on six employees (E2, E5, E6, E7, E8, E9), who has physical contact with residents, help provide direct care, as well as access to residents' personal/financial files. The establishment failed to conduct a fingerprint-based criminal history records check on this employee, failed to conduct employment verification and failed to retain the criminal record request in the employee file.</p> <p>Findings include:</p> <p>On May 20, 2025, employee files were reviewed.</p> <p>The establishment's current employee roster showed E2 (Director of Health and Wellness) was hired on March 28, 2025. E5 (Care Associate Assisted Living) was hired on 10/24/2024 E6 (Certified Nursing Assistant Assisted Living) was hired on 12/11/2024 E7 (Care Associate Memory Care) was hired 4/26/2024 E8 (Certified Nursing Assistant Memory Care) was hired on 9/21/2024 E9 (Certified Nursing Assistant Assisted Living) was hired on 3/17/2025</p> <p>Employee file did not show any health care worker background check that was conducted upon their hire date.</p>	A3040		

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A3040	Continued From page 7	A3040		
A4050	<p>Seciton 295.4050 Tuberculin Skin Test Procedures</p> <p>This Regulation is not met as evidenced by: Type 2 Violation</p> <p>Section 295.4050 Tuberculin Skin Test Procedures</p> <p>Tuberculin skin tests for employees and residents shall be conducted in accordance with the Control of Tuberculosis Code (77 Ill. Adm. Code 696).</p> <p>e) Each employee shall have a tuberculin skin test in accordance with the Control of Tuberculosis Code (77 Ill. Adm. Code 696). The test must meet one of the following time frames:</p> <p>1) The test must be completed no more than 90 days prior to the date of initial employment in the establishment; or</p> <p>2) The test must be commenced no more than ten days after the date of initial employment in the establishment.</p> <p>These requirements are not met as evidence by:</p> <p>Based on interview and record review the facility could not provide documentation staff received their TB (tuberculin skin test) 90 days</p>	A4050		

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A4050	<p>Continued From page 8</p> <p>prior/10days after the date of hire.</p> <p>Findings include:</p> <p>On 5/20/2025 the surveyor provided to E 11 (Business Office Manager) with a list of 9 staff names and to pull for the Staff requirement log sheet</p> <p>On 5/20/22025 the surveyor reviewed 9 staff files 4 did not have Tuberculosis Vaccination records.</p> <p>1) E5 (Care Associate) hire date of 10/24/2024</p> <p>1) missing Tuberculosis Vaccination</p> <p>2) E6 (Certified Nursing Assistant Assisted Living) hire date of 12/11/2024</p> <p>1) missing Tuberculosis Vaccination</p> <p>3) E7 (Care Associate Memory Care) hire date of 4/26/2024</p> <p>1) missing Tuberculosis Vaccination</p> <p>4) E8 (Certified Nursing Assistant Memory Care) hire date of 9/21/2024</p> <p>1) missing Tuberculosis Vaccination</p> <p>On 5/20/2025 E11 was unable to produce any additional documentation/proof that the above staff received Tuberculosis Vaccination. E11 said that She doesn't not have the results for the TB test, she said that Quantiferon is required and that she sent an email to the providers to get a copy but she was told that it takes 3-5 days to get the report.</p>	A4050		
A4060	<p>Seciton 295.4060 Alzheimer's and Demential Programs</p> <p>This Regulation is not met as evidenced by:</p>	A4060		

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A4060	<p>Continued From page 9</p> <p>TYPE 2 VIOLATION</p> <p>Section 295.4060 Alzheimer's and Dementia Programs</p> <p>a) In addition to this Section, Alzheimer and dementia programs shall comply with all of the other provisions of the Act. (Section 150(a) of the Act)</p> <p>8) Require the manager and direct care staff to complete sufficient comprehensive and ongoing dementia and cognitive deficit training as set forth in subsection (i) of this Section.</p> <p>B) The manager or supervisor must complete, in addition to the training required in subsection (i)(2) of this Section and in Section 295.3020, six hours of annual continuing education regarding dementia care.</p> <p>This regulation is not met as evidenced by:</p> <p>Based on observation, interview and record review the facility failed to ensure that the Manager has proper education and training for managing an Alzheimer's/Dementia Unit. This failure has the potential to affect all residents in the Memory Care Unit.</p> <p>Findings Included:</p> <p>On 5/20/2025 the surveyor provided to E 11 (Business Office Manager) with a list of 9 staff names and to pull for the Staff requirement log sheet.</p> <p>On 5/20/2025 the files were reviewed and the following file for E4 (Director of Memory Care) was incomplete of the following information for</p>	A4060		

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A4060	<p>Continued From page 10</p> <p>her Job per state regulations.</p> <p>1) Did not have any continuing education documentation in his file for the last year containing Alzheimer's/ Dementia training.</p> <p>2) Did not have additional the training required in subsection (i)(2) of this Section and in Section 295.3020, six hours of annual continuing education regarding dementia care.</p> <p>No additional education/documentation was produced for E4's file from E11 (Business Office Manager).</p>	A4060		