Printed: 06/12/2025 Form Approved OMB No. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(XI) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 145591	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 12/11/2024
NAME OF PROVIDER OR SUPPLIER Aperion Care Wesley		STREET ADDRESS, CITY, STATE, ZIP CODE 1415 West Foster Avenue Chicago, IL 60640	
For information on the nursing home's	plan to correct this deficiency, please con	tact 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 0921 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Many			

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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STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 145591	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 12/11/2024
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F 0921 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Many	e's plan to correct this deficiency, please contact the nursing home or the state survey agency. SUMMARY STATEMENT OF DEFICIENCIES		

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NAME OF PROVIDER OR SUPPLIER Aperion Care Wesley		STREET ADDRESS, CITY, STATE, ZIP CODE 1415 West Foster Avenue Chicago, IL 60640	
For information on the nursing home's	plan to correct this deficiency, please con	tact the nursing home or the state survey	agency.
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFIC	<u> </u>	
F 0921 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Many	alert, confused, oriented to self and Family Member, POA) visiting last informed V9, Unfortunately, it's bee opened up R2's window. V7 stated with a fan in R2's room, but V7 state could fall on (R2). When asked about heat, V7 stated that V7 did not dot (Administrator) or V3 (Maintenance) On 12/10/24 at 12:34 pm, this surve V3 stated that the older thermostate accurate. They are not connected the functioning thermostates in the nurse documenting the air temperatures of V3 was supposed to put down the not. V3 stated, I shut off the boiler the window or will use the key to turn dois a temperature gauge for the yellow another gauge for the boiler for the maintenance director and they said but I don't know which mark is which mark, and I will test it. This is a trial yesterday before leaving work. Whistated, No, and now corporate wan On 12/10/24 at 1:19 pm, this surve was observed in the 4th floor nurses floor nurses station and that this is one that V3 stated is not working of is accurate, V18 (LPN) said, I think On 12/10/24 at 2:30 pm, V1 (Admir can use the special key to turn the too excessive still, then staff will cathe facility. V1 stated that V1 did specific processive still, then staff will cathe facility. V1 stated that V1 did specific processive still, then staff will cathe facility. V1 stated that V1 did specific processive still, then staff will cathe facility. V1 stated that V1 did specific processive still, then staff will cathe facility.	ed Practical Nurse, LPN) stated that V7 in needs frequent redirection. V7 stated week and asked V7 why is it so hot in lear like that. Management is doing some that when V7 came to work the following for safety reasons, V7 did not leave out V7 using a special key to turn the kinhat and just opened R2's window. V7 set Director) on 12/1/24 about V9's concervor reinterviewed V3 after facility polices that are on resident rooms and dining to the heating sources in the facility. V3 et's stations or common areas of the factor on the different units (east, center, and the room number on the air temperature lotted at 5 am. If a resident room is too down the air flow in rooms. I showed you we tank and that's for the domestic watheat also. I was on the phone yesterd. I there's a mark here and a mark here, th. I turned the knob to move the gauge I period. V3 confirmed that V3 turned the en asked if V3 took air temperature realts me to check it (air temperatures) two yor performed a tour of the nurse's statics me to check it (air temperatures) two yor performed a tour of the nurse's statics me to check it (air temperature) that the only nurse's station on the floor. Our accurate) is noted inside the 3rd floor it's broken. I don't think it's working. The instrator) stated that the staff can open dial down in rooms where it's too warm II (V3). V1 stated that V3 would notify November to the beginning of December R2's room.	that V7 remembers V9 (R2's R2's room. V7 stated that V7 and aday, R2's room remained hot R2's fan in the room saying, it not in R2's room to decrease the stated that V7 did not inform V1 arm of excessive heat. By and air temperature log review. A groom walls are not working, not a stated that there are no cility. When asked about V3 west) on each floor, V3 stated that g that V3 was checking, but V3 did hot during night, they open the u (surveyor) the boiler room, there er. But I didn't know that there's ay for 2 hours with the previous like a minimum and a maximum, a lower since it was next to the one ne knob on the gauge on the boiler didings today in the facility, V3 or times a day. Lions in the facility. No thermometer here is no thermometer in the 4th the thermostat (name is same as nurse's station. When asked if this ney said that something broke. A window, offer a fan or the nurse at V1 stated the air temperature is V1 stated the air temperature is V1 stated the air temperature is V1 if there are concerns with heat in A) about R2's room being too hot

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F 0921 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Many	On 12/10/24 at 3:36 pm, this surveyor showed V1 (Administrator) the air temperature log readings of 80 degrees and higher. V1 stated that V3 did not inform V1 of these air temperature readings of 80 degrees and higher. When asked if V3 is to be following the facility's air temperature policy and procedure, V1 stated, Yes. This surveyor and V1 reviewed the air temperature policy with the facility air temperature range being maintained between 68 and 79 degree F for residents, visitors and staff in facility. V1 stated that the purpose of maintaining these specific air temperature readings per facility policy is to be comfortable, those are comfortable temperatures.		
	of maintaining these specific air temperature readings per facility policy is to be comfortable, those are		

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(X4) ID PREFIX TAG			on)
F 0921 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Many	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information) 11/8/24: Ground floor with temperature of 80 degrees. 1st floor center unit with temperature of 80 degrees F. 1st floor west unit with temperature of 82 degrees F. 2nd floor center unit with temperature of 80 degrees F. 2nd floor west unit with temperature of 80 degrees F. 3nd floor center unit with temperature of 80 degrees F. 3nd floor center unit with temperature of 80 degrees F. 3nd floor west unit with temperature of 81 degrees F. 3nd floor center unit with temperature of 82 degrees F. 3nd floor west unit with temperature of 81 degrees F. 3nd floor center unit with temperature of 81 degrees F. 2nd floor east unit with temperature of 82 degrees F. 2nd floor center unit with temperature of 81 degrees F. 2nd floor west unit with temperature of 81 degrees F. 2nd floor center unit with temperature of 81 degrees F. 2nd floor center unit with temperature of 81 degrees F. 2nd floor center unit with temperature of 81 degrees F. 3nd floor west unit with temperature of 81 degrees F. 4nd floor center unit with temperature of 81 degrees F. 4nd floor center unit with temperature of 81 degrees F. 4nd floor center unit with temperature of 81 degrees F. 3nd floor west unit with temperature of 80 degrees F. 3nd floor center unit with temperature of 80 degrees F. 2nd floor center unit with temperature of 80 degrees F. 2nd floor center unit with temperature of 80 degrees F. 3nd floor center unit with temperature of 80 degrees F. 3nd floor center unit with temperature of 80 degrees F. 3nd floor center unit with temperature of 80 degrees F. 3nd floor center unit with temperature of 80 degrees F. 3nd floor center unit with temperature of 80 degrees F. 3nd floor center unit with temperature of 80 degrees F. 3nd floor center unit with temperature of 80 degrees F. 3nd floor center unit with temperature of 80 degrees F. 3nd floor center unit with temperature of 80 degrees F. 3nd floor center unit with temperature		

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	NAME OF PROVIDER OR SUPPLIER		PCODE
Aperion Care Wesley		1415 West Foster Avenue Chicago, IL 60640	
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F 0921 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Many	12/9/24: Ground floor with temperature of 84 degrees. 1st floor center unit with temperature of 84 degrees F. 1st floor west unit with temperature of 85 degrees F. 2nd floor east unit with temperature of 85 degrees F. 2nd floor west unit with temperature of 832 degrees F. 3nd floor center unit with temperature of 84 degrees F. 3rd floor west unit with temperature of 84 degrees F. 4th floor center unit with temperature of 83 degrees F. 4th floor west unit with temperature of 84 degrees F. All temperature entries signed by V3.		
	Facility document titled Daily Censi residents reside in the facility.	us and dated printed on 12/9/24 at 9:54	4 am documents, in part, that 82
	On 12/11/24 at 2:29 pm, V3 stated that V3 performed a recheck of air temperatures in the facility on 12/11/24 in the morning with the maximum reading today is 78 degrees, and V3 documenting the air temperatures on a new facility temperature log with resident room numbers and common areas.		
	documents, in part, All nursing facil or more than 79 degrees Fahrenhe maintained, and in all areas of the l kitchen and laundry room. Every fa station and common area that will s purchased at any home improvement he heating season generally is frow temperatures at an appropriate ran this policy, Facilities seeks to ensure practical terms, this means temperatures.	erature-Resident Rooms; Common Are lities must maintain a temperature of noit in the winter months. These temperature in the winter months. These temperature accessible to residents, emploitly should also have centralized wall show both the room temperature and report store or bought through our purchasem mid-October to mid-May. Heat will be ge of 68 to 78 degrees during normal or that all heated spaces are as close the tatures may be in the 71-75-degree range acceptance.	ot less than 68 degrees Fahrenheit atures would have been always yees, and visitors, except for the thermometers at every nurse's elative humidity. These can be sing department. Heating Season: be provided to maintain interior occupied hours. In implementing to 71 degrees as possible. In ge. Temperatures may be allowed
	Maintenance Director. Reports To: Director is to plan, organize, develor accordance with current, federal, stand as may be directed by the Admicomfortable manner. Essential Duttand direct the Maintenance Depart (and other things) are maintained to	enance Director and dated 5/2/2017 do Administrator. Summary: The primary op, and direct the overall operation of the tate and local standards, guidelines, and ninistrator, to assure that our facility is lies and Responsibilities: Plan, development, it's programs and activities. Enso provide safe and comfortable enviror ator. Make periodic rounds to check edund working properly.	purpose of the Maintenance ne Maintenance Department in nd regulations governing our facility, maintained in a safe and , organize, implement, evaluate, ure that supplies, equipment, etc. ment. Promptly report equipment

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