STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	ASL510370	A. BUILDING _____ B. WING _____	01/14/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
TIMBER CREEK VILLAGE	1302 W HIGHLAND AVE ROBINSON, IL 62454

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
A 000	Initial Comment Annual Licensure Survey	A 000		
A2040	Section 295.2040 Disaster Preparedness This RULE: is not met as evidenced by: Violation Type 3 Section 295.2040 Disaster Preparedness a) For the purpose of this Section, "disaster" means an occurrence, as a result of a natural force or mechanical failure such as water, wind or fire, or a lack of essential resources such as electrical power, that poses a threat to the safety and welfare of residents, personnel, and others present in the establishment. b) Each establishment shall: c) At least six drills shall be conducted per year on a bimonthly basis. At least two of the drills shall be conducted during the night when residents are sleeping. All drills shall be held under varied conditions to: 1) Ensure that all personnel on all shifts are trained to perform assigned tasks; 2) Ensure that all personnel on all shifts are familiar with the use of the fire fighting equipment in the facility; 3) Evaluate the effectiveness of disaster plans, procedures and training. Based on interview and record review, the Establishment failed to ensure a disaster drill/fire were conducted bimonthly in 2024. Findings include: Upon review of the Establishments fire/disaster drills, it is noted that there are 7 drills completed however the drills did not begin until April 2024.	A2040		

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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A2040	Continued From Page 1 Further review of the drills, it is also noted that a drill was completed in June 2024 and not again until October 2024. On 1/14/2025 at 11:06 AM E1/Administrator confirmed that the fire drills were not completed on a bimonthly bases, further stating that she thought that only 6 had to be done throughout the year.	A2040		
A4000	Section 295.4000 Physician/s Assessment This RULE: is not met as evidenced by: Violation Type 3 Section 295.4000 Physician's Assessment a) No more than 120 days prior to admission of a resident to any establishment, a comprehensive assessment that includes an evaluation of the prospective resident's physical, cognitive, and psychosocial condition shall be completed by a physician. The physician's assessment shall include documentation of the presence or the absence of tuberculosis infection in accordance with the Control of Tuberculosis Code. At the time of admission, the physician's assessment must reflect the resident's current condition. Based on interview and record review, the Establishment failed to ensure the Physician's Assessment was completed prior to admission. (R3) R3's Service Plan, dated 6/21/24 documents an admission date of 6/15/24. R3's Physician Assessment is dated 6/21/24. On 1/14/2025 at 11:10 AM E1/Administrator	A4000		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
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A4000	Continued From Page 2 confirmed that R3's Physician Assessment was not completed prior to her admission.	A4000		