

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: ASL5105892	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED C 09/09/2025
NAME OF PROVIDER OR SUPPLIER COPPER CREEK COTTAGES		STREET ADDRESS, CITY, STATE, ZIP CODE 920 COUNTRY CLUB ROAD MATTOON, IL 61938		
(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 Original Complaint Investigation IL197325 Violations Cited 295.4000 b) 295.4020 f) 295.6000 a) 1)	A 000		
A4000	Section 295.4000 Physician/s Assessment This Regulation is not met as evidenced by: T3 Violation Section 295.4000 Physician's Assessment b) At least annually, once a resident has moved into the establishment, a comprehensive assessment shall be completed by a physician. Based on interview and record review the establishment failed to ensure that a physician signed the physician assessments for two (R1 and R2) of three residents reviewed for physician assessments from a total sample list of three residents reviewed. Findings include: 1.) R1's physician assessment dated 1/16/25 documents a signature by Z2 advanced practice provider, not a physician. 2.) R2's physician assessment dated 3/5/25 documents a signature by Z3 advanced practice	A4000		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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A4000	Continued From page 1 provider, not a physician. On 9/9/25 at 11:45AM, E1 confirmed that Z2 and Z3 were not physicians and that R1 and R2's physician assessments were not signed by physicians.	A4000		
A4020	Section 295.4020 Mandatory Services This Regulation is not met as evidenced by: Violation Section 295.4020 Mandatory Services Each establishment shall provide or arrange for the following mandatory services: f) Assistance with activities of daily living as required by each resident. (Section 10 of the Act) Based on observation, interview, and record review the establishment failed to provide bathing services as needed for two (R1 and R2) of three residents reviewed for mandatory service creating a substantial probability of harm to a resident or residents. Findings include: 1.) On 9/9/25 2:00PM observed R1 being toileted by E4 Resident Assistant. R1 had an odor and some redness noted in her perineal area. R1's service plan dated 9/14/24 documents that R1 requires moderate assistance with bathing. R1's undated shower sheets document that R1 is	A4020		

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A4020	Continued From page 2 to have a shower twice a week on Monday and Thursday. R1's shower sheets document: one shower was provided the week of August 10, 2025, one shower was provided the week of August 24, 2025, one shower was provided the week of August 31, 2025, and no shower was provided the week of September 7, 2025. 2.) On 9/9/25 at 10:15AM, R2 was sleeping in his room. An overwhelming odor of body odor was noted. On 9/9/25 at 10:16AM E4 Resident Assistant stated that R2 had just been toileted, but that he has body odor. On 9/9/25 at 2:38PM, E3, E4, and E5 Resident Assistants were assisting R2 with toileting in R2's resident bathroom. R2 smelled of significant body odor. All stated that R2 should get more baths but that it is hard to get him into the shower and agreed that this odor was unacceptable. R2's service plan dated 3/7/25 documents that R2 requires moderate assistance for bathing. R2's undated shower sheets document that R2 is to have a shower twice a week on Monday and Thursday. R2's shower sheets document that one shower was provided the week of August 3, 2025, no showers were provided the week of August 10, 2025, one shower was provided the week of August 24, 2025, one shower was provided the week of August 31, 2025, and no showers had been provided the week of September 7, 2025.	A4020			

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A4020	Continued From page 3 On 9/9/25 at 2:40PM, E1 Executive Director confirmed that the establishment provides at least two showers a week for their residents. E1 confirmed that R1 and R2 were not getting two showers per week as they should and that having body odor and not getting showers is unacceptable care.	A4020		
A6000	Section 295.6000 Resident Rights This Regulation is not met as evidenced by: Violation Section 295.6000 Resident Rights a) No resident shall be deprived of any rights, benefits, or privileges guaranteed by law, the Constitution of the State of Illinois, or the Constitution of the United States solely on account of his or her status as a resident of an establishment, nor shall a resident forfeit any of the following rights: 1) The right to live in an environment that promotes and supports each resident's dignity, individuality, independence, self-determination, privacy, and choice and to be treated with consideration and respect; Based on observation, interview, and record review the establishment failed to ensure the dignity for two (R1 and R2) of three residents reviewed for resident rights creating a substantial probability of harm to a resident or residents. Findings include:	A6000		

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A6000	Continued From page 4 1.) On 9/9/252:00PM observed R1 being toileted by E4 Resident Assistant. R1 had an odor with some redness noted in her perineal area with feces between the buttocks. R1's service plan dated 9/14/24 documents that R1 requires moderate assistance with bathing. R1's undated shower sheets document that R1 is to have a shower twice a week on Monday and Thursday. R1's shower sheets document: one shower provided the week of August 10, 2025, one shower provided the week of August 24, 2025, one shower provided the week of August 31, 2025, and no shower was provided the week of September 7, 2025. 2.) On 9/9/25 at 10:15AM, R2 was sleeping in his room. An overwhelming odor of body odor was noted. On 9/9/25 at 10:16AM E4 Resident Assistant stated that R2 had just been toileted, but that he has body odor. On 9/9/25 at 2:38PM, E3, E4, and E5 Resident Assistants were assisting R2 with toileting in R2's resident bathroom. R2 smelled of significant body odor. All stated that R2 should get more showers but that it is hard to get him into the shower and all agreed that this odor was unacceptable. R2's service plan dated 3/7/25 documents that R2 requires moderate assistance for bathing. R2's undated shower sheets document that R2 is to have a shower twice a week on Monday and	A6000		

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A6000	Continued From page 5 Thursday. R2's shower sheets document that one shower was provided the week of August 3, 2025, no showers were provided the week of August 10, 2025, one shower was provided the week of August 24, 2025, one shower was provided the week of August 31, 2025, and no showers had been provided the week of September 7, 2025. On 9/9/25 at 2:40PM, E1 Executive Director confirmed that it is the facility practice to provide at least two showers a week for residents and that having body odor due to a lack of resident care is very undignified.	A6000			