STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	ASL510318	A. BUILDING: _____ B. WING _____	10/22/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
SHERIDAN AT TYLER CREEK, THE	508 NORTH MCLEAN ELGIN, IL 60123

(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 295.4010 a)b)1)b)3)e)d)d)g)1)A)BC) 2)3)5)h)	A 000		
A4010	Section 295.4010 Service Plan This Regulation is not met as evidenced by: TYPE 2 VIOLATION Section 295.4010 Service Plan a) Based on the physician's assessment and establishment evaluation (see Section 295.4000), a written service plan shall be developed and mutually agreed upon by the establishment and the resident. (Section 15 of the Act) The establishment shall respect and accept the resident's choices regarding the service plan. b) The service plan shall be developed by: 1) The resident, resident's representative or any individual requested by the resident. 2) The manager or manager's designee; and 3) A registered nurse, if the resident is receiving nursing services or medication administration or is unable to direct self-care. c) The service plan shall be signed and dated by all individuals involved in its development. d) The service plan, which shall be reviewed	A4010		

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A4010	Continued From page 1 annually, or more often as the resident's condition, preferences, or service needs change, shall serve as a basis for the service delivery contract between the provider and the resident (see Section 295.2030). (Section 15 of the Act) e) The service plan shall be reviewed and revised, if necessary, immediately after a significant change in the resident's physical, cognitive, or functional condition (see Section 295.4000). g) Service plans shall address: 1) The level of service the resident is receiving, including: A) assistance with activities of daily living. B) dietary needs, if the establishment provides therapeutic diets; and C) special accommodations for the resident. 2) The amount, type, and frequency of health-related services needed by the resident. 3) Staff responsible for the provisions of the service plan. 5) Whether the resident requires medication reminders, supervision of self-administered medication, or medication administration. h) The service plan shall include all support services provided or arranged for by the establishment.	A4010		

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A4010	Continued From page 2 This requirement was not met, as evidenced by: Based on interview and record review the establishment failed to ensure resident service plans address the amount, type, and frequency of health-related services. This applies to 3 of 7 residents (R1, R2, R7) reviewed for these requirements. R1 has been receiving wound care from hospice, R2 has a wound and R7 is receiving hospice care services and has a wound. These failure have the substantial probability to cause harm to a resident. Findings include: On 10/22/25 R1's medical record showed R1 moved into the establishment on 10/31/24 and has multiple diagnoses including dialysis with Arterial Venous shunt. R1's service plan dated 10/22/25 did not address where R1 receives his dialysis treatmen,t what days of the week and what type of venous hemodialysis access (dialysis port). On 10/22/25 R2's medical record showed R2 moved into the establishment on 1/22/19 resides in memory care unit, receives hospice services, and has multiple diagnoses including behaviors, anxiety. R2's Service Plan dated 8/18/25 did not address the level of assistance hospice care provides to R2 or what interventions nurses and CNA provide to R2. On 10/22/25 R7's medical record showed R7 moved into the establishment on 9/10/22 resides	A4010		

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A4010	Continued From page 3 in memory care unit, receives hospice services, and has multiple diagnoses including dementia, osteoporosis, and gluteal wound. R7's Service Plan dated 9/12/25 did not address the level of assistance hospice care provides to R7, what interventions hospice nurse and CNA provide to R7. On 10/22/25, these concerns were reviewed with and confirmed by E2 (Director of Nursing).	A4010		