STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	ASL510163	A. BUILDING: _____ B. WING _____	11/20/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
FRIENDSHIP MANOR OF ILLINOIS	1209 21ST AVE ROCK ISLAND, IL 61201

(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. Violations: 295.2040 g) TYPE 1 VIOLATION 295.9000 a) TYPE 1 VIOLATION	A 000		
A2040	Section 295.2040 Disaster Preparedness This Regulation is not met as evidenced by: Section 295.2040 Disaster Preparedness g) Drills shall involve the actual evacuation of residents to an assembly point as specified in the emergency plan and shall provide residents with experience using various means of escape. If an establishment has an evacuation capability classification of impractical, those residents who cannot meaningfully assist in their own evacuation or who have special health problems shall not be required to participate in the drill; however, other requirements of the Life Safety Code will apply. Type 1 Violation Based on record review and interviews, the establishment failed to complete the proper documentation regarding fire drills. This failure had the probability to affect all 96 residents. This creates a substantial probability of severe harm to a resident or residents. Findings include: On 11/20/25 at 10:35 A.M. E6 (Director of Plant Operations) stated that they have not been doing	A2040		

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A2040	Continued From page 1 actual evacuations for the fire drills, therefore the proper documentation has not been completed.	A2040		
A9000	Section 295.9000 Physical Plant This Regulation is not met as evidenced by: Section 295.9000 Physical Plant a) The establishment shall comply with the residential board and care occupancies chapter of the National Fire Protection Association's (NFPA) Life Safety Code (Life Safety Code) 101, Chapter 32, New Residential Board and Care Occupancies. Type 1 Violation Based on record review and interviews, the establishment failed to complete the proper documentation regarding fire drills. This failure had the probability to affect all 96 residents. This creates a substantial probability of severe harm to a resident or residents. Findings include: On 11/20/25 at 10:35 A.M. E6 (Director of Plant Operations) stated that they have not been doing actual evacuations for the fire drills, therefore the proper documentation has not been completed. 1. The facility failed to provide documentation demonstrating the facility is maintaining the building's acceptable Evacuation Capability Determination with a slow evacuation having an evacuation time of 13 minutes or less in	A9000		

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A9000	Continued From page 2 accordance with the NFPA 101, 2012 Edition Sections 33.7.1, 33.7.2, 33.7.3 and 3.3.76. The evacuation drill documentation failed to include the following: A. Evaluation drill time frame of 13 minutes or less for residents to evacuate from their rooms to the exit doors and to be prepared to go outside into the weather elements. B. Evacuation drill record demonstrating all residents attended and those residents that did not attend due to illness. Evacuation Drills Records demonstrating all residents attended unless the residents were unable based on allowable exceptions of the Licensure code listed below. A list of room numbers indicating the resident attended, or the room is vacant, or resident is out of the building, a hospice patient meeting the requirements of Section 2905.2000(f), or the resident is quadriplegic or paraplegic, or individuals with neuro-muscular diseases, such as muscular dystrophy and multiple sclerosis, or other chronic diseases and conditions meeting the requirements of Section 2905.2000(g). or a temporary illness that would prevent the resident from self-evacuation. C. Normal staffing that attended the evacuation drill for the overnight shift to demonstrate the least number of staff that would normally be present during an overnight evacuation. D. Evacuation records indicating all residents received exit training to use all exits and to use the alternate exit when the primary exit is blocked. E. A tracking record to demonstrate all residents	A9000		

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A9000	Continued From page 3 received the exit training for each of the required 2-month periods. Residents that miss one of the evacuation drills can be individually trained in exiting and that date would be added to the tracking record.	A9000		