STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	ASL510533	A. BUILDING: _____ B. WING _____	C 02/18/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
VILLAS OF HOLLY BROOK DANVILLE	2215 NORTH BOWMAN AVENUE DANVILLE, IL 61832

(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 investigation IL186062 Violations cited: 295.4000 General 295.4060 General 295.6000 General 295.6010 General	A 000		
A4000	Section 295.4000 Physician/s Assessment This Regulation is not met as evidenced by: General 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. These requirements were not met as evidenced by: Based on interview and record review and the establishment has failed to obtain a comprehensive assessment completed by a physician. Interview: E2 and E3 were asked to show proof of a physician certification for R1. E2 and E3 agreed to the request and submitted a physician certification for R1 dated 12/3/24 for review. The document was signed by a physician assistant. Record Review: R1's physician certification of 12/3/24 was completed and signed by a physician assistant and not a physician.	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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A4060	Continued From page 1	A4060		
A4060	Seciton 295.4060 Alzheimer's and Demential Programs This Regulation is not met as evidenced by: General Violation Section 295.4060 Alzheimer's and Dementia Programs b) No person shall be admitted or retained in an assisted living or shared housing establishment if the establishment cannot provide or secure appropriate care, if the resident requires a level of service or type of service for which the establishment is not licensed or which the establishment does not provide, or if the establishment does not have the staff appropriate in numbers and with appropriate skill to provide such services. (Section 150(b) of the Act) c) No persons shall be accepted for residency or remain in residence if the person's mental or physical condition has so deteriorated to render residency in such a program to be detrimental to the health, welfare or safety of the person or of other residents of the establishment. The assessment must be approved by the resident's physician and shall occur prior to acceptance for residency, annually, and at such time that a change in the resident's condition is identified by a family member, staff of the establishment, or the resident's physician. (Section 150(c) of the Act) These requirements were not met as evidenced by: Based on interview and record review and observation the establishment has failed to provide appropriate care to a resident that	A4060		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
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(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
A4060	Continued From page 2 requires a level of service the establishment does not provide or does not have the staff appropriate in numbers and with appropriate skill to provide such services Interview: E2 and E3 are aware of the behavior and sexual aggression R1 has towards R2. Observations: Observations of R1 and R2 were completed on 2/11/25, 2/13/25, and 2/14/25. On 2/11/25 R1 was observed being sexually aggressive towards are R2 in a common area. R1 was noted to be aggressively kissing R2 four different times during the observation. R1 grabbed R2's groin once. R2 was chewing on R1's hair at one point. R1 straddled R2 in a chair and danced over R2. At no point during this observation did staff try to stop the behavior or separate R1 and R2. R1 took R1's walker at one point and would not return it to R2. The staff had to intervene and returned the walker to R2. R1 and R2 were noted sharing a drink and staff did intervene and stopped the behavior. On 2/13/25 R1 was ill and stayed in their room during the observation period. R2 was in the common area sitting alone during the observation period. On 2/14/25 R1 and R2 were sitting in a common area together. It was noted that R1 was holding R2's arm during the observation period. Record Review: Review of R1's service plan (updated 1/14/2025) has hyper-sexual behavior problems listed as a focus. Interventions include moving R1 to a private area, explaining the inappropriate and unacceptable behavior, and minimize the potential for behavior by engaging in activities such as hairdressing. Staff failed to attempt any interventions during observations on 2/11/25.	A4060		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
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A6000	Continued From page 3	A6000		
A6000	Section 295.6000 Resident Rights This Regulation is not met as evidenced by: General 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; 5) The right to receive the services specified in the service plan, to review and renegotiate the service plan at any time; and to be informed of the cost of the changes; 13) The right to be free of abuse or neglect or financial exploitation or to refuse to perform labor; These requirements were not met as evidenced by: Based on interview and record review and observation the establishment has failed to support the residents dignity and keep the residents free of abuse. The facility has also failed to provide the specified services listed in the the residents service plan. Interview: E2 and E3 are aware of the behavior and sexual aggression R1 has towards R2.	A6000		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
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A6000	Continued From page 4 Observations: Observations of R1 and R2 were completed on 2/11/25, 2/13/25, and 2/14/25. On 2/11/25 R1 was observed being sexually aggressive towards are R2 in a common area. R1 was noted to be aggressively kissing R2 four different times during the observation. R1 grabbed R2's groin once. R2 was chewing on R1's hair at one point. R1 straddled R2 in a chair and danced over R2. At no point during this observation did staff try to stop the behavior or separate R1 and R2. R1 took R1's walker at one point and would not return it to R2. The staff had to intervene and returned the walker to R2. R1 and R2 were noted sharing a drink and staff did intervene and stopped the behavior. On 2/13/25 R1 was ill and stayed in their room during the observation period. R2 was in the common area sitting alone during the observation period. On 2/14/25 R1 and R2 were sitting in a common area together. It was noted that R1 was holding R2's arm during the observation period. Record Review: Review of R1's service plan (updated 1/14/2025) has hyper-sexual behavior problems listed as a focus. Interventions include moving R1 to a private area, explaining the inappropriate and unacceptable behavior, and minimize the potential for behavior by engaging in activities such as hairdressing. Staff failed to attempt any interventions during observations on 2/11/25.	A6000		
A6010	Section 295.6010 Abuse, Neglect, and Financial Exploitation Pr This Regulation is not met as evidenced by:	A6010		

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A6010	Continued From page 5 General Violation Section 295.6010 Abuse, Neglect, and Financial Exploitation Prevention and Reporting a) When the establishment has a reasonable belief that a resident has been the victim of abuse, neglect, or financial exploitation, the establishment shall: 1) Notify the Department within 24 hours after receiving the allegation, by contacting the Assisted Living Complaint Registry by telephone, fax, or other electronic means. The establishment shall document this report and maintain documentation on the premises for 12 months after the date of the report. 2) Investigate and develop a written report within 14 days after the initial report. The establishment shall send the written report to the Department within 24 hours after it is completed and shall maintain a copy of the written report on the premises for 12 months after the date of the report. These requirements were not met as evidenced by: Based on interview and record review and observation the establishment has failed to report the residents behavior of abusive hyper-sexuality towards another resident in the common areas within 24 hours. Interview: E2 and E3 are aware of the behavior and sexual aggression R1 has towards R2. Observations: Observations of R1 and R2 were completed on 2/11/25, 2/13/25, and 2/14/25. On 2/11/25 R1 was observed being sexually aggressive towards are R2 in a common area. R1 was noted to be aggressively kissing R2 four	A6010		

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A6010	Continued From page 6 different times during the observation. R1 grabbed R2's groin once. R2 was chewing on R1's hair at one point. R1 straddled R2 in a chair and danced over R2. At no point during this observation did staff try to stop the behavior or separate R1 and R2. R1 took R1's walker at one point and would not return it to R2. The staff had to intervene and returned the walker to R2. R1 and R2 were noted sharing a drink and staff did intervene and stopped the behavior. On 2/13/25 R1 was ill and stayed in their room during the observation period. R2 was in the common area sitting alone during the observation period. On 2/14/25 R1 and R2 were sitting in a common area together. It was noted that R1 was holding R2's arm during the observation period. Record Review: Review of R1's service plan (updated 1/14/2025) has hyper-sexual behavior problems listed as a focus. Interventions include moving R1 to a private area, explaining the inappropriate and unacceptable behavior, and minimize the potential for behavior by engaging in activities such as hairdressing. Staff failed to attempt any interventions during observations on 2/11/25. These behaviors recorded on the service plan were note reported to the department.	A6010		

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A 000	Initial Comment Original investigation IL186062 Violations cited: 295.4000 General 295.4060 General 295.6000 General 295.6010 General	A 000		
A4000	Section 295.4000 Physician/s Assessment This Regulation is not met as evidenced by: General 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. These requirements were not met as evidenced by: Based on interview and record review and the establishment has failed to obtain a comprehensive assessment completed by a physician. Interview: E2 and E3 were asked to show proof of a physician certification for R1. E2 and E3 agreed to the request and submitted a physician certification for R1 dated 12/3/24 for review. The document was signed by a physician assistant. Record Review: R1's physician certification of 12/3/24 was completed and signed by a physician assistant and not a physician.	A4000		

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A4060	Continued From page 1	A4060		
A4060	Seciton 295.4060 Alzheimer's and Demential Programs This Regulation is not met as evidenced by: General Violation Section 295.4060 Alzheimer's and Dementia Programs b) No person shall be admitted or retained in an assisted living or shared housing establishment if the establishment cannot provide or secure appropriate care, if the resident requires a level of service or type of service for which the establishment is not licensed or which the establishment does not provide, or if the establishment does not have the staff appropriate in numbers and with appropriate skill to provide such services. (Section 150(b) of the Act) These requirements were not met as evidenced by: Based on interview and record review and observation the establishment has failed to provide appropriate care to a resident that requires a level of service the establishment does not provide or does not have the staff appropriate in numbers and with appropriate skill to provide such services Interview: E2 and E3 are aware of the behavior and sexual aggression R1 has towards R2. Observations: Observations of R1 and R2 were completed on 2/11/25, 2/13/25, and 2/14/25. On 2/11/25 R1 was observed being sexually aggressive towards are R2 in a common area. R1 was noted to be aggressively kissing R2 four	A4060		

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A4060	Continued From page 2 different times during the observation. R1 grabbed R2's groin once. R2 was chewing on R1's hair at one point. R1 straddled R2 in a chair and danced over R2. At no point during this observation did staff try to stop the behavior or separate R1 and R2. R1 took R1's walker at one point and would not return it to R2. The staff had to intervene and returned the walker to R2. R1 and R2 were noted sharing a drink and staff did intervene and stopped the behavior. On 2/13/25 R1 was ill and stayed in their room during the observation period. R2 was in the common area sitting alone during the observation period. On 2/14/25 R1 and R2 were sitting in a common area together. It was noted that R1 was holding R2's arm during the observation period. Record Review: Review of R1's service plan (updated 1/14/2025) has hyper-sexual behavior problems listed as a focus. Interventions include moving R1 to a private area, explaining the inappropriate and unacceptable behavior, and minimize the potential for behavior by engaging in activities such as hairdressing. Staff failed to attempt any interventions during observations on 2/11/25.	A4060		
A6000	Section 295.6000 Resident Rights This Regulation is not met as evidenced by: General 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	A6000		

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A6000	Continued From page 3 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; 5) The right to receive the services specified in the service plan, to review and renegotiate the service plan at any time; and to be informed of the cost of the changes; 13) The right to be free of abuse or neglect or financial exploitation or to refuse to perform labor; These requirements were not met as evidenced by: Based on interview and record review and observation the establishment has failed to support the residents dignity and keep the residents free of abuse. The facility has also failed to provide the specified services listed in the the residents service plan. Interview: E2 and E3 are aware of the behavior and sexual aggression R1 has towards R2. Observations: Observations of R1 and R2 were completed on 2/11/25, 2/13/25, and 2/14/25. On 2/11/25 R1 was observed being sexually aggressive towards are R2 in a common area. R1 was noted to be aggressively kissing R2 four different times during the observation. R1 grabbed R2's groin once. R2 was chewing on R1's hair at one point. R1 straddled R2 in a chair and danced over R2. At no point during this observation did staff try to stop the behavior or separate R1 and R2. R1 took R1's walker at one point and would not return it to R2. The staff had	A6000		

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A6000	Continued From page 4 to intervene and returned the walker to R2. R1 and R2 were noted sharing a drink and staff did intervene and stopped the behavior. On 2/13/25 R1 was ill and stayed in their room during the observation period. R2 was in the common area sitting alone during the observation period. On 2/14/25 R1 and R2 were sitting in a common area together. It was noted that R1 was holding R2's arm during the observation period. Record Review: Review of R1's service plan (updated 1/14/2025) has hyper-sexual behavior problems listed as a focus. Interventions include moving R1 to a private area, explaining the inappropriate and unacceptable behavior, and minimize the potential for behavior by engaging in activities such as hairdressing. Staff failed to attempt any interventions during observations on 2/11/25.	A6000		
A6010	Section 295.6010 Abuse, Neglect, and Financial Exploitation Pr This Regulation is not met as evidenced by: General Violation Section 295.6010 Abuse, Neglect, and Financial Exploitation Prevention and Reporting a) When the establishment has a reasonable belief that a resident has been the victim of abuse, neglect, or financial exploitation, the establishment shall: 1) Notify the Department within 24 hours after receiving the allegation, by contacting the Assisted Living Complaint Registry by telephone, fax, or other electronic means. The establishment shall document this report and maintain	A6010		

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A6010	Continued From page 5	A6010		

documentation on the premises for 12 months after the date of the report.
2) Investigate and develop a written report within 14 days after the initial report. The establishment shall send the written report to the Department within 24 hours after it is completed and shall maintain a copy of the written report on the premises for 12 months after the date of the report.

These requirements were not met as evidenced by:

Based on interview and record review and observation the establishment has failed to report the residents behavior of abusive hyper-sexuality towards another resident in the common areas within 24 hours.

Interview: E2 and E3 are aware of the behavior and sexual aggression R1 has towards R2.

Observations: Observations of R1 and R2 were completed on 2/11/25, 2/13/25, and 2/14/25. On 2/11/25 R1 was observed being sexually aggressive towards are R2 in a common area. R1 was noted to be aggressively kissing R2 four different times during the observation. R1 grabbed R2's groin once. R2 was chewing on R1's hair at one point. R1 straddled R2 in a chair and danced over R2. At no point during this observation did staff try to stop the behavior or separate R1 and R2. R1 took R1's walker at one point and would not return it to R2. The staff had to intervene and returned the walker to R2.
R1 and R2 were noted sharing a drink and staff did intervene and stopped the behavior.
On 2/13/25 R1 was ill and stayed in their room during the observation period. R2 was in the common area sitting alone during the observation

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A6010	Continued From page 6 period. On 2/14/25 R1 and R2 were sitting in a common area together. It was noted that R1 was holding R2's arm during the observation period. Record Review: Review of R1's service plan (updated 1/14/2025) has hyper-sexual behavior problems listed as a focus. Interventions include moving R1 to a private area, explaining the inappropriate and unacceptable behavior, and minimize the potential for behavior by engaging in activities such as hairdressing. Staff failed to attempt any interventions during observations on 2/11/25. These behaviors recorded on the service plan were note reported to the department.	A6010		