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	ASL510188	A. BUILDING: _____ B. WING _____	12/17/2025

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VILLAS AT HERSCHER	100 HARVEST VIEW LN HERSCHER, IL 60941

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A 000	Initial Comment Annual Licensure Survey 295. 2000- a) 12) 295.2060- 2) 295. 3030- b) 295.3040- 955.145- 2) b) Entity Reported Incident Investigation IL 199095, Incident date 11/27/25- No deficiency cited.	A 000		
A2000	Section 295.2000 Residency Requirements This Regulation is not met as evidenced by: Type 2 Violation Section 295.2000 Residency Requirements a) No individual shall be accepted for residency or remain in residence if the establishment cannot provide or secure appropriate services, if the individual 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 75(a) of the Act) 12) The person requires treatment of stage 3 or stage 4 decubitus ulcers or exfoliative dermatitis; or These requirements are not met as evidenced by: Based on interview and record review, the establishment failed to ensure one (R1) resident	A2000		

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A2000	Continued From page 1	A2000		

with stage 3 pressure ulcer meet residency requirement. This deficient practice affected one of five residents reviewed for this requirement. This failure has the substantial probability to cause harm to a resident or residents.

Findings include:

According to R1's documents, R1 is 83 years old with diagnoses which include but not limited to Chronic Embolism and Thrombosis of Deep Veins of Lower Extremity, Urinary Tract Infections, Anemia Unspecified and Essential Hypertension. R1 moved to the community on 1/3/25.

On 12/15/25 at 12:44pm E2 (Wellness Director) said R1 moved in with a pressure ulcer stage 2. At present, R1's pressure ulcer is currently at Stage 3. E2 said establishment can accept resident with Stage 3 pressure ulcer as long as there is outside service that will take care of the wound.

On 12/15/25 at 1:50PM, R1 was observed using walker to ambulate without assistance. R1 is alert, oriented x4. Stated she goes to the wound doctor or someone from the wound clinic comes to take care of the wound. R1 said she is independent with toileting. "I have wound at the back off and on."

Review of R1's wound notes by outside provider confirmed presence of Stage 3 pressure ulcer that has been ongoing since October 2025. Wound notes documented the following.
-10/21/25- left Inferior Buttock- Pressure Ulcer of contiguous site of back, buttock and hip, Stage 3. Onset 12/1/24- First Noted:10/14/25. Measurement: 4.1cm x 1.5cm x 0.9cm. There is

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A2000	Continued From page 2 undermining which measures .4cm deep from 12 o'clock to 4 o'clock Pressure Ulcer - L superior buttock - Pressure Ulcer of contiguous site of back, buttock and hip, Stage 3. Onset 12/1/24- First Noted:10/14/25. Measurement: 4.1cm x 3.2cm x 1cm. There is undermining which measures 2.6cm deep from 12 o'clock to 12 o'clock ... -11/4/25 Pressure Ulcer Left Buttock Cluster Pressure Ulcer of contiguous site of back, left buttock and hip, Stage 3. Onset 12/1/24- First Noted:10/14/25. Measurement: 1.3cm x 8.4cm x 0.2cm. There is undermining which measures 5cm deep from 11 o'clock to 12 o'clock .... -11/11/25-Pressure Ulcer Left Buttock Cluster Pressure Ulcer of contiguous site of back, left buttock and hip, Stage 3. Onset 12/1/24- First Noted:10/14/25. Measurement: 2.9cm x 7.5cm x 0.2cm. There is undermining which measures 2cm deep from 11 o'clock to 12 o'clock .... -12/9/25 - L buttock cluster Pressure Ulcer of contiguous site of back, left buttock and hip, Stage 3. Onset 12/1/24- First Noted:10/14/25. Measurement: 0.9cm x 6.5cm x 0.2cm. The pressure Ulcer has moderate amount of Sanguinous (bloody exudate. The Pressure Ulcer was debrided using autolytic debridement. There is undermining which measures 1.8cm deep from 11 o'clock to 12 o'clock .... Dampen Hydrofera blue with NS, cut fit into the wound space with Qtip applicator .... On 12/16/25 at 1:40PM, E9 (Licensed Practical Nurse) confirmed R1 has stage 3 pressure ulcer. The wound nurse, an outside provider, does wound packing. "We just make sure that the dressing is intact and dry. (R1) can be incontinent at times. She can dress herself. She has been educated to call after each bowel movement so we can clean her up. "	A2000		

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A2000	Continued From page 3 R1's service plan intervention entry date 10/21/25 indicated: " ...seen by new wound care team ...to complete wound care M-W-F. POA (Power of Attorney) has hired home Caregiver to complete wound care as ordered. Staff will visually check dressing daily for accurate placement and apply barrier cream to surrounding area. R1's progress notes documented wound infection on 8/9/25. R1 was prescribed with oral antibiotic. Progress notes also documented, wound dressing was coming off or getting saturated with urine (8/31/25 resident took off dressing because it was wet ..., 9/25-26/25 wound dressing was wet, resident took off dressing, removed packing ... also noted a piece of toilet paper stuffed in wound), 11/30/25, 12/13/25 dressing came loose, 12/14/25- "had urinary incontinence overnight. Visual check on dressing, dressing was wet ...removed no packing seem, wound cleaned...dressing applied. On 12/15/25 at 10:32AM, E1 (Executive Director) said there is no Nurse on site on the overnight shift. The nurse is onsite from 7AM-7PM.	A2000		
A2060	Section 295.2060 Quality Improvement Program This Regulation is not met as evidenced by: Type 3 Violation Section 295.2060 Quality Improvement Program 2) The establishment shall maintain	A2060		

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A2060	Continued From page 4 documentation that shows that data analysis has occurred and that actions, as appropriate, have been implemented to address identified issues and to resolve problems, as well as any follow-up actions taken by the establishment. This requirement is not met as evidenced by: Based on interview and record review, the establishment failed to maintain a documented survey results to ensure oversight and monitoring of residents' concerns and satisfaction. This deficient practice has the probability to affect all residents. Findings include: On entrance conference conducted on 12/15/25 with E1 (Executive Director), surveyor requested Quality Improvement Plan Satisfaction Survey documents were requested. E1 submitted blank templates of survey forms titled "Resident and Family Satisfaction Survey". No actual survey result or survey summary/result provided. 12/15/25 at 11:26AM E1 confirmed there is no written summary of survey completed by resident or resident representative. "All I know is they are all satisfied."	A2060		
A3030	Section 295.3030 Initial Health Eval for Dir Care and FS empl This Regulation is not met as evidenced by: Type 3 (Repeat)	A3030		

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A3030	Continued From page 5 Section 295.3030 Initial Health Evaluation for Direct Care and Food Service Employees b) The initial health evaluation shall be conducted not more than 30 days prior to and no later than 30 days after the employee's initial employment in the establishment. This requirement is not met as evidenced by: Based on interview and record review, the establishment failed to complete initial health evaluation within the required timeframe for two (E4, E5) employees and failed to ensure a physician complete an employee health evaluation for one (E7) employee. This involved three of five new employees reviewed. This deficient practice has the probability to affect employees, visitors and residents. Findings include: An onsite visit was conducted on 12/15/25 and 12/16/25. Selected employee files were reviewed. E4 (Tenant Attendant) was hired on 7/1/25. E4's document titled "Employee Health Evaluation" form was completed and signed by physician on 8/4/25. E5 (Tenant Attendant) was hired on 8/21/25. E5's document titled "Physical Exam" form was completed and signed by physician on 10/29/25. These physician assessments exceeded the 30-day requirement for health evaluation to be completed from date of hire. E7 (Certified Nursing Assistant) was hired on 6/11/25. E7's document titled "Employee Health Evaluation" was completed by E2 (Wellness Director) who is a Registered Nurse. There was	A3030		

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A3030	Continued From page 6 no health evaluation completed by physician. On 12/16/25 at 1:27PM, E1 (Executive Director) said physician comes to the establishment to complete the physician assessment for new employees. There was no completed document that E7 was seen by the physician submitted for review.	A3030		
A3040	Section 295.3040 Health Care Worker Background Check This Regulation is not met as evidenced by: Type 2- Repeat Violation Section 295.3040 Health Care Worker Background Check An establishment shall comply with the Health Care Worker Background Check Act and the Health Care Worker Background Check Code. (Source: Amended at 36 Ill. Reg. 13632, effective August 16, 2012) Section 955.145 Employment Verification 2) The health care employer or its designee shall indicate employment and termination dates (separation dates) within 30 days after hiring or terminating an employee. (Section 33(i) of the Act) b) Failure to comply with this Section constitutes a licensing violation. A fine of up to	A3040		

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A3040	Continued From page 7 $500 may be imposed upon a health care employer for failure to maintain these records. (Section 33(i) of the Act) (Source: Amended at 49 Ill. Reg. 7999, effective May 22, 2025) These requirements are not met as evidenced by: Based on interview and record review, the establishment failed to update the Registry Portal within 30 days of employee hire for five (E4, E5, E6, E7, E8) of five new employees reviewed. This deficient practice has the probability to affect resident safety. Findings include: Selected employee files were reviewed on 12/16/25. Employees date was based on the employee roster. E4 (Tenant Attendant) was hired on 7/1/25. E5 (Tenant Attendant) was hired on 8/21/25. E5's work eligibility was marked "Not yet determined" and has been sent for finger printing on 7/23/25. E6 (Certified Nursing Assistant-CNA) was hired on 9/10/25. E7 (CNA) was hired on 6/11/25. E8 (Dietary Aide) was hired on 11/17/25. According to the Health Care Worker Registry Forms of these employees, there was no evidence the Registry Portal was updated to document the employee's date of hire. On 12/16/25 at 1:27PM, E1 (Executive Director) said verification of new employees to update emploee hire date was not done.	A3040		