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	ASL510350	A. BUILDING: _____ B. WING _____	C 03/12/2026

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A 000	Initial Comment Complaint Investigation IL00199234/25812582 -295.4010 d) e) IL00199597/2690358 -295.4010 d) e) -295.5000 j) 2) -295.6000 a) 13) Entity Reported Incident IL00199107- No deficiency cited.	A 000		
A4010	Section 295.4010 Service Plan This Regulation is not met as evidenced by: TYPE 1 VIOLATION Section 295.4010 Service Plan d) The service plan, which shall be reviewed 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). These requirements were not met as evidenced by:	A4010		

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A4010	Continued From page 1 Based on interview and record review the establishment failed to revise and implement fall interventions reflecting current residents' condition for two (R1, R2) resulting in falls with and without injury. This failure resulted in both R1 and R2 sustaining falls with injuries. This deficient practice has created the substantial probability to cause severe harm to residents who are cognitively impaired and diagnosed with Dementia. The establishment also failed to follow intervention for medication administration as stated on service plan, affecting one resident (R2). This failure resulted in R2 being recipient of a significant medication error. This deficient practice has also created the probability of severe harm to R2 and other residents. Findings include: R1's medical record showed R1 moved into the establishment on 12/6/2024, resides in the memory care unit, and had multiple diagnoses, including but not limited to Disorder of Thyroid, Bipolar Disorder, Essential Hypertension, Hyperlipidemia, Dementia, Hypothyroidism, Depression. R1's FAST (Functional Assessment Staging of Alzheimer's Disease) score dated 10/29/2025 was 6, indicating moderately severe dementia. R1 had several documented falls: 4/1/2025- Fall was unwitnessed in R1's room. No apparent injury. 4/6/2025- Fall was witnessed in activities room. No injury noted	A4010		

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A4010	Continued From page 2 4/8/2025- R1 slides herself off wheelchair in attempt to lower herself onto the floor. R1 was educated that she cannot lower herself off WC as it can cause injuries. R1 was assisted off footrests of WC and back onto seat of WC. 4/24/2025- Fall was witnessed in R1's bathroom. Z1 (Family Member) endorsed that she was attempting to assist R1 to the toilet, however, R1 was refusing to use her walker which led to resident falling due to unsteady gait; No injury noted at time of fall. 4/25/2025- Fall was unwitnessed in activities room. No injury noted at time of fall. 6/22/2025- Fall was witnessed in activities room. R1 was witnessed slipping out of her WC as she attempted to rise and stand from sitting position. No injury noted at time of fall. 6/29/2025- Fall was unwitnessed in activities room. R1 was observed laying on her back, no injury noted at time of fall. 7/3/2025- : Fall was unwitnessed in activities room. Fall resulted in an injury to the R1: Bump to Right-side of head and skin tear to Right elbow. 8/11/2025- Fall was unwitnessed in activities room. No injury noted at time of fall. R1's Service Plan dated 10/29/2025 indicated: Mobility and Transfers needs. R1 needs a wheelchair to assist with mobility/ transferring. R1 needs physical assistance of one person with mobility and transferring. Fall Risk: Potential for fall due to dementia. And has the following interventions for falls: Check at frequent intervals- minimum twice per shift to see if any assistance is needed and to offer reassurance. Evaluate and monitor post fall. Observe for and report any changes in vital signs; any change in condition or status such as pain, skin discolorations, swelling, difficulty moving an extremity; a change in mental status.	A4010		

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A4010	Continued From page 3	A4010		

R2's Electronic Health Record (EHR) was reviewed. R2 moved to the community on 8/1/24, R2's diagnoses include but were not limited to Dementia in other diseases classified elsewhere, unspecified severity, Alzheimer's disease with late onset, History of falling, Primary open-angle glaucoma, bilateral, mild stage, Benign neoplasm of pituitary gland, Polyosteoarthritis, unspecified, and Insomnia.
Notes indicated R2 was independent in mobility at the time of move in, R2 was able to make needs known, independent with Activities of Daily Living (ADL's) and alert oriented x2-3.
During R2's stay at the establishment, R2 had several documented falls:
1/31/25, knee gave out due to knee pain.
-5/11/25, R2 fell outside the community when out with a friend, R2 sustained scrapes to the chin.
-05/19/2025 1:30 AM, observed sitting on the floor. Small bump palpated on the top of her head/scalp, R2 was sent to the hospital.
-07/12/2025 10:00 AM Unwitnessed fall. Resident was unable to describe the event and how they felt just prior to falling. No injury noted.
-07/17/2025 4:55 AM observed resident sitting on the floor ...Resident is not able to state what happened.
-7/20/2025 12am observed on the floor. Unwitnessed fall.
-07/20/2025 7:00 AM- resident was on the floor. Resident was noted groaning in pain with hand to back of L (left) head; large bump observed and palpated to site. Resident was sent to the hospital.
R2's Service Plan documented:
Focus: Mobility and Transferring Needs (Date initiated 7/16/25)
Interventions

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A4010	Continued From page 4 -I am independent with mobility - I am independent with transferring - I need a walker to assist with mobility/transferring Focus: Fall Risk Interventions: - I am at risk for potential fall due to my confusion. (Date initiated: 7/16/25) - Remove potential hazards. (Date initiated: 7/16/25) Focus: I have an actual fall Interventions: -After I have fallen and before moving me, evaluate me for changes in range of motion (Date initiated 7/17/25). -Have me seen by therapy for strength and mobility/balance after I have fallen as ordered by my physician- Please seek new referral to HealthPRO. (Date initiated 7/17/25) -Remind me to use my assistive device(s) walker. (Date initiated 7/16/25) On 3/10/26 at 1:09pm, E3 (Resident Coordinator) said, when R2 first moved in, R2 was less confused, as times progressed, R2 had couple of falls and not as steady on her feet anymore, started to use wheelchair. Some days R2 was more unsteady. R2 also used walker, because she did not want to use the wheelchair. On 3/10/26 at 2:16pm, E6 (Licensed Practical Nurse-LPN) said, R2 used walker due to leg pain. On 3/10/26 at 2:29pm, E7 (Care Manager) said, R2 needed wheelchair because she was unsteady. On 3/10/26 at 2: 51pm, E8 said, R2 had few falls and towards the end of stay, R2 was using the wheelchair, and used to have a walker. On 3/11/26 at 9:58am, E10 (LPN), said R2 used to be independent with mobility without any devices, towards the end of stay R2 used	A4010		

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A4010	Continued From page 5 wheelchair. R1's and R2's Service Plans were not updated with new intervention to prevent falls/falls with injuries. R2's notes indicated R2 was restless during the night and was given Lorazepam 1 mg (milligram) at 3:33am. R2's Order Summary stated: Lorazepam tablet 1mg take one tablet by mouth 1-2 hours prior to MRI (Magnetic Resonance Imaging/CT (Computed Tomography) as needed. May take 1 additional tab if continues to have anxiety/agitation. On 3/12/26 at 8:27am, E2 (Resident Care Director) said there was no ordered MRI or CT scan scheduled that day. E2 said the Lorazepam order may have been misinterpreted. R2's Service Plan stated in part: Focus: Medications Date Initiated: (07/16/2025) Goal: I will receive medications safely and as ordered by my physician through the next review. Date Initiated: 07/16/25	A4010		
A5000	Section 295.5000 Medication Reminders, Supervision of Self Med This Regulation is not met as evidenced by: Type 1 Violation Section 295.5000 Medication Reminders, Supervision of Self-Medication, Medication Administration and Storage j) A separate medication record shall be maintained for each resident receiving medication administration and shall include:	A5000		

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A5000	Continued From page 6 2) Name of medication, dosage, directions, and route of administration. These requirements are not met as evidenced by: Based on interview and record review, the establishment failed to follow physician order affecting one (R2) of five residents reviewed. This failure resulted in R2 being the recipient of an significant medication error. This failure creates the substantial probability of severe harm to R2 and other residents. Findings include: R2's notes indicated R2 was restless during the night and was given Lorazepam 1 mg (milligram) at 3:33am. R2's Order Summary stated: Lorazepam tablet 1mg take one tablet by mouth 1-2 hours prior to MRI (Magnetic Resonance Imaging/CT (Computed Tomography) as needed. May take 1 additional tab if continues to have anxiety/agitation. On 3/12/26 at 8:27am, E2 (Resident Care Director) said there was no ordered MRI or CT scan scheduled that day. E2 said the Lorazepam order may have been misinterpreted.	A5000		
A6000	Section 295.6000 Resident Rights This Regulation is not met as evidenced by: Type 1 Violation Section 295.6000 Resident Rights	A6000		

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A6000	Continued From page 7 13) The right to be free of abuse or neglect or financial exploitation or to refuse to perform labor; This requirement was not met as evidenced by: Based on interview and record review, the establishment failed to ensure sufficient supervision was provided to prevent fall resulting in injury for one (R2) resident. This failure resulted in R2 falling with injuries. This failure created a substantial probability of severe harm to R2 and other residents. Findings include: R2's Electronic Health Record (EHR) was reviewed. R2 moved to the community on 8/1/24, R2's diagnoses include but were not limited to Dementia in other diseases classified elsewhere, unspecified severity, Alzheimer's disease with late onset, History of falling, Primary open-angle glaucoma, bilateral, mild stage, Benign neoplasm of pituitary gland, Polyosteoarthritis, unspecified, and Insomnia. Fall incident dated 7/20/25 at 7:00am documented; "Informed by AM CM (Care Manager) that resident was on the floor. AM CMs had just left resident's side to begin getting resident out of bed and prepared for breakfast when a thud was heard and discovered resident on the floor. Writer received resident lying supine in REM hallway; WC (wheelchair) was next to resident. Resident was observed very restless and anxious overnight and unable to be redirected to remain in bed to prevent another fall/injury; overnight NOD (Nurse on Duty) placed resident in WC; however, resident continued with behaviors. Resident was noted groaning in pain	A6000		

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A6000	Continued From page 8	A6000		

with hand to back of L (left) head; large bump observed and palpated to site. Resident was assisted off of floor and back onto WC by writer and AM CM. 1:1 supervision provided by AM CM as resident continued to exhibit same behaviors despite fall. Writer placed call for ambulance transfer to (local) ED."

On 3/11/26 at 12:37PM, E2 (Resident Care Director) said, R2 had a functional decline in June or July 2025, R2 had increased falls, and was kept on close watch. R2 was unsteady, staff put R2 on wheelchair and brought (R2) into the hallway outside another resident's room, as the staff cannot sit and watch R2. E2 said they can keep a better eye on R2 while they (staff) were assisting another resident. R2 had an unwitnessed fall, R2 was found with the wheelchair tipped over backwards. R2 hit back of head on the floor.

R2's documents indicated R2 already had a previous fall at 12am that same day. R2 was restless during the night and was given Lorazepam 1 mg (milligram) at 3:33am (7/20/25).

R2's Order Summary stated: Lorazepam tablet 1mg take one tablet by mouth 1-2 hours prior to MRI (Magnetic Resonance Imaging/CT (Computed Tomography) as needed. May take 1 additional tab if continues to have anxiety/agitation.

On 3/12/26 at 8:27am, E2 said there was no ordered MRI or CT scan scheduled that day. E2 said the Lorazepam ordered could have been misinterpreted.

On 3/12/26 at 9:03am, E6 (Licensed Practical Nurse) said, Lorazepam was given to R2

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A6000	Continued From page 9 because R2 was anxious, not sleeping and "moving around". E6 was asked if this medication can cause unsteadiness (on feet). E6 said, "Yes." Despite R2's condition, R2 was left in the hallway unsupervised resulting in fall. According to R2's notes, R2's MRI at the hospital showed no significant findings, however R2 was admitted in the hospital for treatment of Advanced Dementia and did not go back to the establishment.	A6000		