STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	ASL510332	A. BUILDING: _____ B. WING _____	12/26/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
STORYPOINT LIBERTYVILLE	901 FLORSHEIM DRIVE LIBERTYVILLE, IL 60048

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A 000	Initial Comment Annual Licensure 295.1100 e) 295.2040c)e) 295.3000h)6) Complaint Investigation 25712315/IL199135 - unsubstantiated	A 000		
A1100	Section 295.1100 Alzheimer's and Related Dementias Special Car This Regulation is not met as evidenced by: Type 3 Violation Section 295.1100 Alzheimer's Disease and Related Dementias Special Care Disclosure An establishment that offers, advertises or markets to provide care for persons with Alzheimer's disease and related dementias through an Alzheimer's special care program shall disclose to the Department and to a potential or actual resident of the establishment the following information in writing: e) The establishment's minimum and maximum staffing ratios, specifying the general licensed health care provider to resident ratio and the trainee health care provider to resident ratio; These Requirements are not met as evidenced by: Based on interview and Alzheimer's disclosure, facility failed to include caregiver to resident and nurse to resident ratio for the memory care unit.	A1100		

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A1100	Continued From page 1 This deficient practice affects all 14 residents and their Power of Attorney's in memory care. Findings include: On entrance date of 12/24/25 facility memory care unit roster listed 14 residents. Administration forwarded an Alzheimer's disclosure which on page 2 documents staffing as including " ...a licensed nurse, 24/7. Certified Nursing Assistants are provided at a minimum of two on day shift, two on evening shift, and one on night shift; a maximum of three on day shift, three on evening shift and two on night shift." The exact C.N.A to resident staffing ration and nurse to resident ratio is not included in this disclosure. E2(Director of Nursing) was shown this document and could not identify what exactly the resident to staff ratio was.	A1100		
A2040	Section 295.2040 Disaster Preparedness This Regulation is not met as evidenced by: TYPE 1 VIOLATION Section 295.2040 Disaster Preparedness c) At least six drills shall be conducted per year on a bimonthly basis. At least two of the drills shall be conducted during the night when residents are sleeping. All drills shall be held under varied conditions to: e) Drills shall include residents, establishment	A2040		

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A2040	Continued From page 2 personnel, and other persons in the establishment This requirement was NOT MET as evidenced by: Based on staff interview, review of fire evacuation drills dated 6/23/25 , 9/12/25, and review of night shift staffing of December 2025, the establishment failed to ensure that at least 2 fire drills were performed at night and failed to ensure that licensed staff participation in the drills. This was found in 11 of 15 licensed employees (E7,E16,E17,E18,E19,E20,E21,E22,E23,E24,E25) reviewed. This failure has the probability to affect all residents receiving services. This failure creates a substantial probability of severe harm to a resident or residents. Findings Include: On entrance date to the facility of 12/24/25 resident roster included 29 residents in assisted living and 14 residents in memory care/Alzheimer's unit. On 12/26/25 at 10:00 am E2(Director of Nursing) explained the nightshift starts at 10:00 pm and ends at 6:00 am with 2 care associates assigned to nights for the Alzheimer's unit and 2 care associates assigned in assisted living with 1 nurse covering both Assisted living and memory care. E2 was asked to categorize the residents in the forwarded resident roster into those who would need cueing, 1-person assist and 2-person assist in the event a total evacuation of the building was	A2040		

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A2040	Continued From page 3	A2040		

necessary. E2 identified 9 residents in assisted living as needing a 1 person assist and 5 residents in memory care/Alzheimer's as requiring 1 person. In addition, 2 residents in Assisted Living required 2-person total assist for transfer and 1 resident in memory care required 2-person total assistance.

After documenting the evacuation status of the residents, E2(Director of Nursing) was asked if there was sufficient staff on the nightshift to complete an evacuation and responded in part, "Assisted Living staff would not be able to help evacuate in memory care. Not enough staff on nightshift for evacuation ..."

E15(maintenance lead) maintains the records of fire drills and evacuations. E15 presented 2 drills as labeled evacuations, 6/23/25 from 10:00 am to 10:11 am and September 17, 2025 from 2:30 pm until 2:34 pm. A nightshift drill or drill including only nightshift staff in numbers associated with a nightshift has not been held by the facility.

Based on the December 2025 schedule, nightshift caregiver associates staff include E7, E16, E17, E18, E19, E20, E21, E22, E23 and E24, E25 who are Licensed Practical Nurses. None of these staff names are included in the signatures of staff who participated in evacuations.

Plan of correction submitted by facility on June 27, 2025 after a life safety inspection cited the facility for not having "normal staff 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.

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A3000	Continued From page 4	A3000		
A3000	Section 295.3000 Personnel Requirmts, Qualifns, and Trng This Regulation is not met as evidenced by: TYPE 2 VIOLATION Section 295.3000 Personnel Requirements, Qualifications and Training h) The establishment shall have sufficient personnel to provide the following for its current resident population 6) Evacuation of residents during emergencies; and These requirements were NOT MET as evidenced by: Based on staff interview, review of fire evacuation drills dated 6/23/25 , 9/12/25, and review of night shift staffing of december 2025,the establishment failed to ensure that staffing was adequate in order to perform all required fire evacuation drills per regulations. This failure has the probability to affect all residents in the establishment. This failure creates a substantial probability of harm to a resident or residents. Findings Include: On entrance date to the facility of 12/24/25 resident roster included 29 residents in assisted living and 14 residents in memory care/Alzheimer's unit.	A3000		

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A3000	Continued From page 5 On 12/26/25 at 10:00 am E2(Director of Nursing) explained the nightshift starts at 10:00 pm and ends at 6:00 am with 2 care associates assigned to nights for the Alzheimer's unit and 2 care associates assigned in assisted living with 1 nurse covering both Assisted living and memory care. E2 was asked to categorize the residents in the forwarded resident roster into those who would need cueing, 1-person assist and 2-person assist in the event a total evacuation of the building was necessary. E2 identified 9 residents in assisted living as needing a 1 person assist and 5 residents in memory care/Alzheimer's as requiring 1 person. In addition, 2 residents in Assisted Living required 2-person total assist for transfer and 1 resident in memory care required 2-person total assistance. After documenting the evacuation status of the residents, E2(Director of Nursing) was asked if there was sufficient staff on the nightshift to complete an evacuation and responded in part, "Assisted Living staff would not be able to help evacuate in memory care. Not enough staff on nightshift for evacuation ..." E15(maintenance lead) maintains the records of fire drills and evacuations. E15 presented 2 drills as labeled evacuations, 6/23/25 from 10:00 am to 10:11 am and September 17, 2025 from 2:30 pm until 2:34 pm. A nightshift drill or drill including only nightshift staff in numbers associated with a nightshift has not been held by the facility. Based on the December 2025 schedule, nightshift caregiver associates staff include E7, E16, E17, E18, E19, E20, E21, E22, E23 and	A3000		

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A3000	Continued From page 6 E24, E25 who are Licensed Practical Nurses. None of these staff names are included in the signatures of staff who participated in evacuations. Plan of correction submitted by facility on June 27, 2025 after a life safety inspection cited the facility for not having "normal staff 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.	A3000		