STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	ASL510101	A. BUILDING _____ B. WING _____	04/18/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
ADDINGTON PLACE OF EDWARDSVILLE	7108 MARINE ROAD EDWARDSVILLE, IL 62025

(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 Facility Reported Incident Investigation to Incident Report dated 4/6/25 / IL190122 Violation cited at 295.9040	A 000		
A9040	Section 295.9040 Environmental Requirements This RULE: is not met as evidenced by: TYPE 2 VIOLATION Section 295.9040 Environmental Requirements a) The establishment shall be kept in a clean, safe and orderly condition and in good repair. Based on interview and record review the facility failed to ensure residents in a secured facility for residents in a Memory Care facility are provided a safe and secure environment to prevent unmonitored/unsupervised exit. This failure creates a substantial probability of harm to residents, placing residents at risk for accidents, assault, or being struck by a motor vehicle. Findings include: On 4/17/25 at 10:01 AM, E3 (Care Manager) stated she worked on R1's hall D when R1's elopement happened. E3 stated that on 4/6/25, she saw R1 sitting in the enclosed patio at 11:15 AM ,which was his routine, while she was getting lunch meal service ready on D hall kitchenette. E3 stated the patio is in the middle of the building and one door leads to unit D or unit A. E3 stated R1	A9040		

If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE TITLE (X6) DATE

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A9040	Continued From Page 1 must have exited the door leading to Unit A because he has friends who live on that side. E3 stated the only explanation that R1 was able to leave without the alarm sounding was he possibly opened the exit door within the 15 second exit delay window after visitors exited the alarm door to the reception area. E3 stated R1 has never verbalized wanting to get out of the place or wanting to go home and have not shown any exit seeking behaviors since he got admitted that she was aware of. On 4/17/25 at 9:15 AM, E2 (Director of Nursing) stated she received a report on 4/6/25 that at around 11:59 AM an employee from a nursing home half a mile away brought R1, who was seen in the lobby of the nursing home. E2 stated R1 was just admitted three weeks prior, had no history of elopement prior to admission and did not show any exit seeking behaviors in facility, mostly stayed in his room and comes out for meals, activities, and go to the patio. E2 stated that after the incident she immediately had all the exit alarms checked and all were working, had them professionally re-calibrated for 5 seconds instead of 15 second exit delay. E2 stated they checked the cameras that pointed to the exit doors to determine which exit door R1 might have exited but discovered none were working. E2 stated an assessment on R1 was conducted right away with no findings and Z1 (R1's physician and Z2 (R1's Power of Attorney) were notified timely. E2 stated R1 was very consistent with his statement when family and staff asked that he just wanted to go for a walk. The facility presented R1's Elopement Risk Assessment dated 4/7/25 showing R1 is at risk for elopement with a score of 14 (10 and above = at risk for elopement). No admission elopement risk assessment was presented.	A9040		

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A9040	Continued From Page 2 The Facility Elopement Policy dated 4/1/25 documents, "Policy: Elopement precautions will be carried out for residents who have demonstrated previous attempts to elope or have history of elopement. Procedure: 1.Residents will be screened prior to admission, 30 days after move-in, every 6 months or in conjunction with the routine resident assessment schedule, and with significant change in resident status for significant elopement risk."	A9040		