

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: ASL510478	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED C 02/25/2026
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NAME OF PROVIDER OR SUPPLIER VILLAS OF HOLLY BROOK TOWANDA BARNES	STREET ADDRESS, CITY, STATE, ZIP CODE 1815 N TOWANDA BARNES ROAD BLOOMINGTON, IL 61701
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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
A 000	Initial Comment Original Facility Reported Incident IL 200321 - 295.4010d)e) cited. Original Facility Reported Incident IL 200352 - 295.4010d)e) cited.	A 000		
A4010	Section 295.4010 Service Plan This Regulation is not met as evidenced by: Type 1 Violation - Repeat 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 residents' physical, cognitive, or functional condition (see Section 295.4000). Based on observation, interview, and record review the establishment failed to revise a service plan for one (R3) of three residents reviewed for falls in the sample of three. This failure resulted in severe harm to R3 and creates a substantial probability of severe harm to a resident or residents. Findings include:	A4010		

Illinois Department of Public Health LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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A4010	Continued From page 1 The establishments Service Plan policy and procedure dated 11/2/23 documents "5. Service plans shall address: a. The level of service the resident is receiving, including: i. Assistance with activities of daily living. 7. The service plan shall be reviewed annually, or as the residents' condition, preferences, or service needs change. 9. The service plan shall be reviewed and revised, if necessary, after a significant change in the resident's physical, cognitive, or functional condition." The clinical record for R3 documents R3 admitted to the establishment on 11/22/25 with moderate cognitive impairment and the following diagnoses of; Alzheimer's disease, amnesia, and other symptoms and signs involving cognitive functions and awareness. The Fall Report for R3 documents R3 had falls on 12/27/25, 1/3/26, 1/9/26, 2/19/26, and 2/20/26. R3 suffered a skin tear to R3's left elbow during the 1/9/26 fall and a laceration to the back of R3's head during the 2/19/26 fall requiring surgical staple. On 2/24/26 at 2:00 pm, R3 was sitting on a sofa in the common area with walker in front of him. R3 pushed his walker to left, stood up from the sofa and began walking with an unsteady gait without the walker. On 2/25/26 at 11:13 am, R3 sat in a wheelchair in the dining room with a staff member with his head down and eyes closed. The Observation Notes for R3 document R3 being noncompliant with using the walker, requiring more assistance, refusing cares, refusing medications, and physical behaviors towards others.	A4010		

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A4010	Continued From page 2 The current Service Plan for R3 documents R3 requires stand-by-assistance for bathing and is independent with dressing, eating, ambulation, transfers, toileting, supervision for wandering, and uses a walker. This Service Plan does not address any of R3's falls or list any fall interventions as of 2/24/26 at 4:00 pm. There is no documentation regarding R3 requiring more assistance, having behaviors, or refusal of cares. On 2/25/26 at 11:25 am, E1 ED (Executive Director) confirmed R3's current Service Plan does not address R3's falls and does not include fall interventions and stated it should and doesn't know why it doesn't. E1 ED stated E3 MC (Memory Care) Director updated R3's Service Plan yesterday. On 2/25/26 at 2:30 pm, E3 MC Director confirmed R3's falls and interventions are not listed on R3's Service Plan and that she did update R3's Service Plan on 2/24/26. E3 MC Director stated she was told she had five days to come up with an intervention and get it on the Service Plans after a resident fall.	A4010		