STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	ASL510290	A. BUILDING: _____ B. WING _____	C 04/08/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
REFLECTIONS MEMORY CARE - SAVOY	62 E AIRPORT ROAD SAVOY, IL 61874

(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 IL 200945. Violations: 295.6000 a)13)	A 000		
A6000	Section 295.6000 Resident Rights This Regulation is not met as evidenced by: Section 295.6000 Resident Rights a) No resident shall be deprived of any rights, benefits, or privileges guaranteed by law, the Constitution of the State of Illinois, or the Constitution of the United States solely on account of his or her status as a resident of an establishment, nor shall a resident forfeit any of the following rights: 13) The right to be free of abuse or neglect or financial exploitation or to refuse to perform labor; TYPE 1 VIOLATION Based on record review and interviews, the establishment neglected to keep one of three sampled residents from eloping outside the establishment unsupervised. (R1) This failure creates a substantial probability of severe harm or death to a resident or residents. Findings include: R1's Service Plan dated 10/1/25, notes that R1 is a memory care resident with diagnosis including but not limited to Vascular Dementia, Anxiety Disorder, and Adjustment Disorder. R1 is noted to be a wanderer and requires supervision for this behavior.	A6000		

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A6000	Continued From page 1 Establishment incident report for R1 dated 2/28/26 at 5:36 A.M., reads, "Resident (R1) was found by CNA (E3) behind the kitchen not far from the trash bin. According to the CNA (E3) resident (R1) was on the ground and responded to his name when CNA (E3) recognized the resident. She (E3) assisted him (R1) to get up and walked him into the unit to the couch in the TV area. Per CNA (E3), resident (R1) was weak, cold and shaky, with a small amount of dried blood on his face." National Weather service noted that on the morning of 2/28/26 the temperature in this area was approximately 27 degrees Fahrenheit. On 4/3/26 at 11:25 A.M., E2 (Wellness Director) stated that through their investigation, they determined that E4 (LPN) was going from one unit to the other, and when she walked out the one unit door, she failed to make sure no residents were following her out. R1 apparently walked out behind E3 into the lobby. E3 went into the other unit and R1 walked out the front door. E2 stated that R1 then was outside for approximately two hours before being found by E3. On 4/3/26 at 5:45 P.M., E3 stated that on 2/28/26 at approximately 5:30 A.M., she happened to be taking the garbage out, when she noticed R1 lying on his back, half way on the sidewalk and half in the grass. R1 was out back of the facility. E3 stated that R1 responded to his name. E3 stated that R1 was shaky, weak and very cold. E3 stated that R1 had a small amount of blood on his face but due to his Dementia, could not answer questions to what had happened.	A6000		

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A6000	Continued From page 2 On 4/3/26 at 10:10 A.M., E1 (Executive Director) stated that E3's employment was terminated due to her failure to prevent R1 from eloping.	A6000		