STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	ASL510251	A. BUILDING: _____ B. WING _____	C 04/18/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
MORNINGSIDE OF STERLING	2705 AVENUE E STERLING, IL 61081

(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 Complaint investigations IL00201207 & IL00201224 Violation: 295.1100a)b)c)d)e)f)g)h)i)	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: a) The form of care or treatment that distinguishes the establishment as suitable for persons with Alzheimer's disease and related dementias; b) The philosophy of the establishment concerning the care or treatment of persons with Alzheimer's disease and related dementias; c) The establishment's pre-admission, admission, and discharge procedures; d) The establishment's assessment, care planning, and implementation guidelines in the care and treatment of persons with Alzheimer's	A1100		

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A1100	Continued From page 1 disease and related dementias, including whether residents are or are not monitored about eating, drinking, and personal hygiene; whether residents will be monitored for potentially dangerous behavior while in their rooms; and whether a resident representative will be contacted with concerns that might require a change in the service plan; 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; f) The establishment's physical environment, including whether doors are monitored; g) Activities available to residents at the establishment; h) The role of family members in the care of residents at the establishment; and i) The costs of care and treatment under the program. (Section 15 of the Alzheimer's Disease and Related Dementias Special Care Disclosure Act) This requirement was not met, as evidenced by: Based on record review and interview, the establishment failed to provide Alzheimer's Disease and Related Dementias Special Care Disclosure to potential or actual residents of the establishment. This failure involves 3 of 3 residents reviewed for this requirement (R1, R2, & R3). Findings include:	A1100		

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A1100	Continued From page 2 R1 is a 64 year old male diagnosed with dementia who was a memory care resident of the establishment. R2 & R3 were chosen for a resident sample due to similarities to R1. They are males, diagnosed with dementia, and reside in the establishment's memory care unit. During record review on 4/17/2026 at 12:35 PM it was found that R1's contract does not include an Alzheimer's Disease and Related Dementias Special Care Disclosure. The contract does include an attachment that states, "ATTACHMENT E-THE BRIDGE TO REDISCOVERY (MEMORY) PROGRAM. The Bridge to Rediscovery Program is designed for residents who have a diagnosis of Alzheimer's disease, dementia or related disorders or who have similar care needs. The program is offered in a specially designed neighborhood. The program is offered at different levels, depending on the nature and extent of services provided." This attachment and statement does not include the required language of an Alzheimer's Disease and Related Dementias Special Care Disclosure. During record review on 4/17/2026 at 12:41 PM, E2 (Assistant Director of Nursing), emailed the surveyor "Appendix J". This "Appendix J" was not mentioned or included in R1, R2, or R3's contracts. This Appendix J did not include the establishment name or signatures of R1, R2, or R3 or their representatives. During an interview with E2 on 4/17/2026 at 12:05 PM they stated, "[E4] the marketer said that [Corporate Owner] doesn't have an Alzheimer's Disclosure."	A1100		