Jan – Mar 2019

The Illinois Department of Public Health has initiated action, as indicated, against the following facilities which have been determined to be in violation of the Nursing Home Care Act, or has recommended decertification to the Director of the Department of Healthcare and Family Service, or the Secretary of the United States Department of Health and Human Services for violations in relation to patient care, pursuant to Titles XVIII and XIX of the Federal Social Security Act.

| FACILITY NAME: | Alden Estates of Orland Park |
|----------------------------|---|
| FACILITY ADDRESS: | 16450 South 97 th Avenue |
| FACILITY CITY, STATE, ZIP: | Orland Park, IL 60462 |
| DOCKET NUMBER: | NH 19-C0108 |
| LICENSEE INFO: | Alden-Orland Park Rehabilitation and Health Care Center, Inc. |
| LICENSEE ADDRESS: | 4200 West Peterson Avenue, Ste 140 |
| LICENSEE CITY, STATE, ZIP: | Chicago, IL 60646 |

Survey Date – 01/22/2019

Type B violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1210b), 300.1210c)1)2), 300.3220f) and 300.3240a). The fine was doubled in this instance in accordance with 300.282i) and j) of the Code due to the violation of the sections of the Code with a high risk designation: 300.1210b) and 300.3240a). A fine of \$2,200.00

 Town
 Alden Manor Rehab & HCC

 FACILITY NAME:
 Alden Manor Rehab & HCC

 FACILITY ADDRESS:
 6120 West Ogden

 FACILITY CITY, STATE, ZIP:
 Cicero, IL 60804

 DOCKET NUMBER:
 NH 18-C0539

 LICENSEE INFO:
 Alden Town Manor Rehabilitation and Health Care Center, Inc.

 LICENSEE ADDRESS:
 4200 W. Peterson Avenue, Suite 140

Survey Date – 11/09/2018

LICENSEE CITY, STATE, ZIP: Chicago, IL 60646

Type A violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1210b), 300.1210d)6) and 300.3240a). The fine was doubled in this instance in accordance with 300.282i) and j) of the Code due to the violation of the sections of the Code with a high risk designation: 300.1210b), 300.1210d)6) and 300.3240a). A fine of \$25,000.00

Jan - Mar 2019

| FACILITY NAME: | Alden Town Manor Rehab & HCC |
|----------------------------|------------------------------|
| FACILITY ADDRESS: | 6120 West Ogden |
| FACILITY CITY, STATE, ZIP: | Cicero, IL 60804 |

DOCKET NUMBER: NH 19-C0101

LICENSEE INFO:Alden Town Manor Rehabilitation and Health Care Center, Inc.LICENSEE ADDRESS:4200 West Peterson Avenue, Ste 140LICENSEE CITY, STATE, ZIP:Chicago, IL 60646

Survey Date – 01/09/2019

Type B violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1210b), 300.1210d)6) and 300.3240a). The fine was doubled in this instance in accordance with 300.282i) and j) of the Code due to the violation of the sections of the Code with a high risk designation: 300.1210b), 300.1210d)6) and 300.3240a). A fine of \$2,200.00

| FACILITY NAME: | Aldeo Rehab & Health Care Ctr |
|----------------------------|--------------------------------|
| FACILITY ADDRESS: | 304 SW 12 th Street |
| FACILITY CITY, STATE, ZIP: | Aledo, IL 61231 |

DOCKET NUMBER: NH 18-S0236

LICENSEE INFO: Petersen Health Group, LLC LICENSEE ADDRESS: 830 W. Trailcreek Drive LICENSEE CITY, STATE, ZIP: Peoria, IL 61614

Survey Date – 05/03/2018 FINAL ORDER – Violation Amended/Affirmed, Fine Assessment Reduced and/or Notice of Conditional License Withdrawn.

| FACILITY NAME: | Ambassador Nsg & Rehab Center |
|----------------------------|-------------------------------|
| FACILITY ADDRESS: | 4900 N. Bernard |
| FACILITY CITY, STATE, ZIP: | Chicago, IL 60625 |

DOCKET NUMBER: NH 19-C0011

LICENSEE INFO:Ambassador Nursing & Rehabilitation II, LLCLICENSEE ADDRESS:240 Fencl LaneLICENSEE CITY, STATE, ZIP:Hillside, IL 60162

Survey Date – 11/21/2018

Type B violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1210b), 300.1210d)6), 300.1220b)3) and 300.3240a). The fine was doubled in this instance in accordance with 300.282i) and j) of the Code due to the violation of the sections of the Code with a high risk designation: 300.1210b), 300.1210d)6) and 300.3240a). A fine of \$2,200.00

| FACILITY NAME: | Aperion Care Cairo |
|----------------------------|--------------------|
| FACILITY ADDRESS: | 2001 Cedar Street |
| FACILITY CITY, STATE, ZIP: | Cairo, IL 62914 |
| DOCKET NUMBER: | NH 19-C0024 |

LICENSEE INFO:Aperion Care Cairo, LLCLICENSEE ADDRESS:208 S. LaSalle Street, Suite 814LICENSEE CITY, STATE, ZIP:Chicago, IL 60604

Survey Date – 11/28/2018

Type Å violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1210b), 300.1210d)2), 300.1210d)3), 300.1210d)5) and 300.3240a). The fine was doubled in this instance in accordance with 300.282i) and j) of the Code due to the violation of the sections of the Code with a high risk designation: 300.1210b), 300.1210d)5) and 300.3240a). A fine of \$25,000.00

| FACILITY NAME: | Aperion Care Capitol |
|----------------------------|-------------------------|
| FACILITY ADDRESS: | 555 West Carpenter Road |
| FACILITY CITY, STATE, ZIP: | Springfield, IL 62702 |

DOCKET NUMBER: NH 18-C0424

LICENSEE INFO:Aperion Care Capitol, LLCLICENSEE ADDRESS:208 S. LaSalle Street, Suite 814LICENSEE CITY, STATE, ZIP:Chicago, IL 60604

Survey Date – 08/08/2018 FINAL ORDER – Violation Amended/Affirmed, Fine Assessment Reduced and/or Notice of Conditional License Withdrawn.

| FACILITY NAME: | Aperion Care Capitol |
|----------------------------|-------------------------|
| FACILITY ADDRESS: | 555 West Carpenter Road |
| FACILITY CITY, STATE, ZIP: | Springfield, IL 62702 |

DOCKET NUMBER: NH 19-C0002

LICENSEE INFO:Aperion Care Capitol, LLCLICENSEE ADDRESS:208 S. LaSalle StreetLICENSEE CITY, STATE, ZIP:Chicago, IL 60604

Survey Date – 12/03/2018

Type A violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1010h), 300.1210b), 300.1210d)2)3) and 300.3240a). The fine was doubled in this instance in accordance with 300.282i) and j) of the Code due to the violation of the sections of the Code with a high risk designation: 300.1210b) and 300.3240a). A fine of \$25,000.00

Type B violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1010h), 300.1210b), 300.1210d)5) and 300.3240a). The fine was doubled in this instance in accordance with 300.282i) and j) of the Code due to the violation of the sections of the Code with a high risk designation: 300.1210b), 300.1210d)5) and 300.3240a). A fine of \$2,200.00

Type B violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1010h), 300.1210b), 300.1210d)3) and 300.3240a). The fine was doubled in this instance in accordance with 300.282i) and j) of the Code due to the violation of the sections of the Code with a high risk designation: 300.1210b) and 300.3240a). A fine of \$2,200.00

Total fines \$29,400.00

FACILITY NAME:Aperion Care GalesburgFACILITY ADDRESS:1145 Frank StreetFACILITY CITY, STATE, ZIP:Galesburg, IL 61401

DOCKET NUMBER: NH 19-C0042

| LICENSEE INFO: | River Crossing Rehab, LLC |
|----------------------------|----------------------------------|
| LICENSEE ADDRESS: | 208 S. LaSalle Street, Suite 814 |
| LICENSEE CITY, STATE, ZIP: | Chicago, IL 60604 |

Survey Date – 12/13/2018

Type B violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1210b), 300.1210d)2), 300.1220b)2) and 300.3240a). The fine was doubled in this instance in accordance with 300.282i) and j) of the Code due to the violation of the sections of the Code with a high risk designation: 300.1210b) and 300.3240a). A fine of \$2,200.00

| FACILITY NAME: | Aperion Care Litchfield |
|----------------------------|-------------------------|
| FACILITY ADDRESS: | 1024 East Tyler |
| FACILITY CITY, STATE, ZIP: | Litchfield, IL 62056 |

DOCKET NUMBER: NH 18-S0344

| LICENSEE INFO: | Litchfield Care Center, LLC |
|----------------------------|----------------------------------|
| LICENSEE ADDRESS: | 208 S. LaSalle Street, Suite 814 |
| LICENSEE CITY, STATE, ZIP: | Chicago, IL 60604 |

Survey Date – 08/03/2018 FINAL ORDER – Violation Amended/Affirmed, Fine Assessment Reduced and/or Notice of Conditional License Withdrawn.

| FACILITY NAME: | Aperion Care Marseilles |
|----------------------------|----------------------------|
| FACILITY ADDRESS: | 578 West Commercial Street |
| FACILITY CITY, STATE, ZIP: | Marseilles, IL 61341 |
| DOCKET NUMBER: | NH 18-S0272 |

LICENSEE INFO:Aperion Care Marseilles, LLCLICENSEE ADDRESS:208 S. LaSalle Street, Suite 814LICENSEE CITY, STATE, ZIP:Chicago, IL 60604

Survey Date – 05/18/2018 FINAL ORDER – Violation Amended/Affirmed, Fine Assessment Reduced and/or Notice of Conditional License Withdrawn.

| FACILITY NAME: | Aperion Care Mascoutah |
|----------------------------|------------------------|
| FACILITY ADDRESS: | 901 North Tenth Street |
| FACILITY CITY, STATE, ZIP: | Mascoutah, IL 62258 |

DOCKET NUMBER: NH 19-C0046

| LICENSEE INFO: | Aperion Care Mascoutah, LLC |
|----------------------------|-------------------------------------|
| LICENSEE ADDRESS: | 208 South LaSalle Street, Suite 814 |
| LICENSEE CITY, STATE, ZIP: | Chicago, IL 60604 |

Survey Date – 12/19/2018

Type B violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1210b)4), 300.1220b)3) and 300.3240a). The fine was doubled in this instance in accordance with 300.282i) and j) of the Code due to the violation of the sections of the Code with a high risk designation: 300.1210b) and 300.3240a). A fine of \$2,200.00

| FACILITY NAME: | Aperion Care Toluca |
|----------------------------|----------------------|
| FACILITY ADDRESS: | 101 E. Via Ghiglieri |
| FACILITY CITY, STATE, ZIP: | Toluca, IL 61369 |

DOCKET NUMBER: NH 19-C0026

LICENSEE INFO:Aperion Care Toluca, LLCLICENSEE ADDRESS:208 S. LaSalle Street, Suite 814LICENSEE CITY, STATE, ZIP:Chicago, IL 60604

Survey Date – 11/30/2018

Type B violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1210b), 300.1210d)6) and 300.3240a). The fine was doubled in this instance in accordance with 300.282i) and j) of the Code due to the violation of the sections of the Code with a high risk designation: 300.1210b), 300.1210d)6) and 300.3240a). A fine of \$2,200.00

| FACILITY NAME: | Arden Courts of Elk Grove |
|----------------------------|---------------------------|
| FACILITY ADDRESS: | 1940 Nerge Road |
| FACILITY CITY, STATE, ZIP: | Elk Grove, IL 60007 |

DOCKET NUMBER: NH 19-C0033

LICENSEE INFO:Arden Courts of Elk Grove Village IL, LLCLICENSEE ADDRESS:208 S. LaSalle Street, Suite 814LICENSEE CITY, STATE, ZIP:Chicago, IL 60604

Survey Date – 12/13/2018

Type B violation of an occurrence for violating one or more of the following sections of the Code: 330.780a)b)c). The fine was doubled in this instance in accordance with 330.282i) and j) of the Code due to the violation of the sections of the Code with a high risk designation: 330.780). A fine of \$2,200.00

Type B violation of an occurrence for violating one or more of the following sections of the Code: 330.1110a)b)d)f). A fine of \$2,200.00

Total Fines \$3,300.00

Jan - Mar 2019

| FACILITY NAME: | Arden Courts of Shorewood |
|----------------------------|---------------------------|
| FACILITY ADDRESS: | 700 West Black Road |
| FACILITY CITY, STATE, ZIP: | Shorewood, IL 60404 |

DOCKET NUMBER: NH 18-C0538

LICENSEE INFO:Alden Courts of Shorewood, Inc.LICENSEE ADDRESS:4200 West Peterson Avenue, Ste 140LICENSEE CITY, STATE, ZIP:Chicago, IL 60646

Survey Date – 11/19/2018

Type B violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1210b)4)5), 300.1210c), 300.1210d)2)6) and 300.3240a). The fine was doubled in this instance in accordance with 300.282i) and j) of the Code due to the violation of the sections of the Code with a high risk designation: 300.1210b), 300.1210d)6) and 300.3240a). A fine of \$2,200.00

| FACILITY NAME: | Batavia Rehab & Hlth Care Ctr |
|---|--|
| FACILITY ADDRESS: FACILITY CITY, STATE, ZIP: | 520 Fabyan Parkway Batavia II 60510 |
| | Datavia, iE 00010 |

DOCKET NUMBER: NH 19-C0044

LICENSEE INFO:Peterson Health Operations, LLCLICENSEE ADDRESS:830 West Trailcreek DriveLICENSEE CITY, STATE, ZIP:Peoria, IL 61614

Survey Date – 12/11/2018

Type A violation of an occurrence for violating one or more of the following sections of the Code: 300.1210b), 300.1210d)6), 300.1220b)3) and 300.3240a). The fine was doubled in this instance in accordance with 300.282i) and j) of the Code due to the violation of the sections of the Code with a high risk designation: 300.1210b), 300.1210d)6) and 300.3240a). A fine of \$25,000.00.

| FACILITY NAME: | Beecher Manor Nursing & Rehab |
|----------------------------|--|
| FACILITY ADDRESS: | 1201 Dixie Highway |
| FACILITY CITY, STATE, ZIP: | Beecher, IL 60401 |
| DOCKET NUMBER: | NH 18-C0269 NH 18-S0270 |
| LICENSEE INFO: | Beecher Manor Nursing and Rehabilitation Center, LLC |
| LICENSEE ADDRESS: | 2201 West Main Street |
| LICENSEE CITY, STATE, ZIP: | Evanston, IL 60202 |

Survey Date – 05/17/2018

FINAL ORDER – Violation Amended/Affirmed, Fine Assessment Reduced and/or Notice of Conditional License Withdrawn.

Jan - Mar 2019

| FACILITY NAME: | Bella Terra Morton Grove |
|----------------------------|--------------------------|
| FACILITY ADDRESS: | 8425 Waukegan Road |
| FACILITY CITY, STATE, ZIP: | Morton Grove, IL 60053 |
| DOCKET NUMBER: | NH 19-C0083 |

LICENSEE INFO:Morton Grove Living & Rehab Center, LLCLICENSEE ADDRESS:801 Adali Stevenson DriveLICENSEE CITY, STATE, ZIP:Springfield, IL 62703

Survey Date – 01/28/2019

Type B violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1010h), 300.1210a), 300.1210b)3), 300.1210d)2)3), 300.3220f) and 300.3240a). The fine was doubled in this instance in accordance with 300.282i) and j) of the Code due to the violation of the sections of the Code with a high risk designation: 300.1210b) and 300.3240a). A fine of \$2,200.00

| FACILITY NAME: | Bria of Chicago Heights |
|----------------------------|----------------------------------|
| FACILITY ADDRESS: | 120 West 26 th Street |
| FACILITY CITY, STATE, ZIP: | S. Chicago Heights, IL 60411 |
| DOCKET NUMBER: | NH 19-C0073 |
| LICENSEE INFO: | MST Health Properties, LLC |
| LICENSEE ADDRESS: | 5151 Church Street |
| LICENSEE CITY, STATE, ZIP: | Skokie, IL 60077 |

Survey Date – 01/02/2019

Type A violation of an occurrence for violating one or more of the following sections of the Code: 300.1210b), 300.1210d)6), 300.1220b)3) and 300.3240a). The fine was doubled in this instance in accordance with 300.282i) and j) of the Code due to the violation of the sections of the Code with a high risk designation: 300.1210b), 300.1210d)6) and 300.3240a). A fine of \$25,000.00

Type B violation of an occurrence for violating one or more of the following sections of the Code: 300.1210b), 300.1210d)3), 300.1210d)6) and 300.3240a). The fine was doubled in this instance in accordance with 300.282i) and j) of the Code due to the violation of the sections of the Code with a high risk designation: 300.1210b), 300.1210d)6) and 300.3240a). A fine of \$2,200.00

Type B violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1210b6) and 300.3240a). The fine was doubled in this instance in accordance with 300.282i) and j) of the Code due to the violation of the sections of the Code with a high risk designation: 300.1210b) and 300.3240a). A fine of \$2,200.00

Total fine: \$29,400.00

| FACILITY NAME: | Bria of Palos Hills |
|----------------------------|-----------------------|
| FACILITY ADDRESS: | 10426 South Roberts |
| FACILITY CITY, STATE, ZIP: | Palos Hills, IL 60465 |

DOCKET NUMBER: NH 19-C0059

LICENSEE INFO:Palos Hills Healthcare, LLCLICENSEE ADDRESS:5151 Church StreetLICENSEE CITY, STATE, ZIP:Skokie, IL 60077

Survey Date – 12/12/2018

Type A violation of an occurrence for violating one or more of the following sections of the Code: 300.1210b), 300.1210d)6) and 300.3240a). The fine was doubled in this instance in accordance with 300.282i) and j) of the Code due to the violation of the sections of the Code with a high risk designation: 300.1210b), 300.1210d)6) and 300.3240a). A fine of \$25,000.00

FACILITY NAME:Briar Place NursingFACILITY ADDRESS:6800 West JolietFACILITY CITY, STATE, ZIP:Indian Head Park, IL 60525

DOCKET NUMBER: NH 18-C0253

LICENSEE INFO:Briar Place Nursing, LLCLICENSEE ADDRESS:208 S. LaSalle Street, Suite 814LICENSEE CITY, STATE, ZIP:Chicago, IL 60604

Survey Date – 05/15/2018 FINAL ORDER – Violation Amended/Affirmed, Fine Assessment Reduced and/or Notice of Conditional License Withdrawn.

FACILITY NAME:Broadway TerraceFACILITY ADDRESS:43 BroadwayFACILITY CITY, STATE, ZIP:Chicago Heights, IL 60411

DOCKET NUMBER: NH 19-C0007

LICENSEE INFO:Pioneer Concepts, Inc.LICENSEE ADDRESS:285 S. Farnham StreetLICENSEE CITY, STATE, ZIP:Galesburg, IL 61401

Survey Date – 11/21/2018 Type B violation for violating one or more of the following sections of the Code: 350.620a), 350.1210b), 350.1220j) and 350.3240a). A fine of \$550.00

| FACILITY NAME: | California Gardens Nursing & Rehab Center |
|----------------------------|---|
| FACILITY ADDRESS: | 2829 South California Blvd |
| FACILITY CITY, STATE, ZIP: | Chicago, IL 60608 |
| | |

DOCKET NUMBER: NH 19-C0094

| LICENSEE INFO: | California Gardens Corp |
|----------------------------|---------------------------|
| LICENSEE ADDRESS: | 801 Adlai Stevenson Drive |
| LICENSEE CITY, STATE, ZIP: | Springfield, IL 62703 |

Survey Date – 01/10/2019

Type A violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1210b), and 300.3240a). The fine was doubled in this instance in accordance with 300.282i) and j) of the Code due to the violation of the sections of the Code with a high risk designation: 300.1210b) and 300.3240a). A fine of \$25,000.00

FACILITY NAME:California Gardens Nursing & Rehab CenterFACILITY ADDRESS:2829 South California BlvdFACILITY CITY, STATE, ZIP:Chicago, IL 60608

DOCKET NUMBER: NH 19-C0094

LICENSEE INFO:California Gardens CorpLICENSEE ADDRESS:801 Adlai Stevenson DriveLICENSEE CITY, STATE, ZIP:Springfield, IL 62703

Survey Date – 01/10/2019 FINAL ORDER – Violation Amended/Affirmed, Fine Assessment Reduced and/or Notice of Conditional License Withdrawn.

| FACILITY NAME: | Champaign County Nursing Home |
|----------------------------|-------------------------------|
| FACILITY ADDRESS: | 500 South Art Bartell Drive |
| FACILITY CITY, STATE, ZIP: | Urbana, IL 61802 |

DOCKET NUMBER: NH 19-S0013

LICENSEE INFO: Champaign County Board LICENSEE ADDRESS: 1776 East Washington Street LICENSEE CITY, STATE, ZIP: Urbana, IL 61802

Survey Date – 11/28/2018

Type A violation of an occurrence for violating one or more of the following sections of the Code: 300.1210a), 300.1210b), 300.1210d)6) and 300.3240a). The fine was doubled in this instance in accordance with 300.282i) and j) of the Code due to the violation of the sections of the Code with a high risk designation: 300.1210b), 300.1210d)6) and 300.3240a). A fine of \$25,000.00

| FACILITY NAME: | Champaign County Nursing Home |
|---|---|
| FACILITY ADDRESS: FACILITY CITY, STATE, ZIP: | 500 South Art Bartell Drive Urbana, IL 61802 |
| | · |

DOCKET NUMBER: NH 19-C0057

LICENSEE INFO:Champaign County BoardLICENSEE ADDRESS:1776 East Washington StreetLICENSEE CITY, STATE, ZIP:Urbana, IL 61802

Survey Date – 12/19/2018

Type B violation of an occurrence for violating one or more of the following sections of the Code: 300.1210a), 300.1210b), 300.1210c), 300.1210d)6) and 300.3240a). The fine was doubled in this instance in accordance with 300.282i) and j) of the Code due to the violation of the sections of the Code with a high risk designation: 300.1210b), 300.1210d)6) and 300.3240a). A fine of \$2,200.00

| FACILITY NAME: | Champaign Living Center |
|----------------------------|-----------------------------|
| FACILITY ADDRESS: | 309 East Springfield Avenue |
| FACILITY CITY, STATE, ZIP: | Champaign, IL 61820 |

DOCKET NUMBER: NH 19-C0121

LICENSEE INFO: Paradox Champaign Operator, LLC LICENSEE ADDRESS: 2201 Main Street LICENSEE CITY, STATE, ZIP: Evanston, IL 60202

Survey Date – 02/04/2019

Type A violation of an occurrence for violating one or more of the following sections of the Code: 300.1210b), 300.1210d)6) and 300.3240a). The fine was doubled in this instance in accordance with 300.282i) and j) of the Code due to the violation of the sections of the Code with a high risk designation: 300.1210b), 300.1210d)6) and 300.3240a). A fine of \$25,000.00

Type A violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1210b), 300.1210d)3)6) and 300.3240a). The fine was doubled in this instance in accordance with 300.282i) and j) of the Code due to the violation of the sections of the Code with a high risk designation: 300.1210b), 300.1210d)6) and 300.3240a). A fine of \$25,000.00

Total Fines \$50,000.00.

| FACILITY NAME: | Champaign Urbana Nrsg & Rehab |
|----------------------------|-------------------------------|
| FACILITY ADDRESS: | 302 Burwash Avenue |
| FACILITY CITY, STATE, ZIP: | Savoy, IL 61874 |
| | |

DOCKET NUMBER: NH 18-C0542

LICENSEE INFO:Champaign Urbana Nursing and Rehab, LPLICENSEE ADDRESS:5750 Old Orchard Road, Ste 420LICENSEE CITY, STATE, ZIP:Skokie, IL 60077

Survey Date – 11/14/2018

Type A violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1010h), 300.1210b), 300.1210d)3) and 300.3240a). The fine was doubled in this instance in accordance with 300.282i) and j) of the Code due to the violation of the sections of the Code with a high risk designation: 300.1210b) and 300.3240a). A fine of \$25,000.00

| FACILITY NAME: | Charleston Rehab & Health CC |
|----------------------------|------------------------------|
| FACILITY ADDRESS: | 716 Eighteenth Street |
| FACILITY CITY, STATE, ZIP: | Charleston, IL 61920 |

DOCKET NUMBER: NH 19-S0053

LICENSEE INFO:Petersen Health Network, LLCLICENSEE ADDRESS:830 West Trailcreek DriveLICENSEE CITY, STATE, ZIP:Peoria, IL 61614

Survey Date – 01/03/2019

Type B violation of an occurrence for violating one or more of the following sections of the Code: 300.1210b), 300.1210d)6) and 300.3240a). The fine was doubled in this instance in accordance with 300.282i) and j) of the Code due to the violation of the sections of the Code with a high risk designation: 300.1210b), 300.1210d)6) and 300.3240a). A fine of \$2,200.00

| FACILITY NAME: | Chateau Nrsg & Rehab Center |
|----------------------------|-----------------------------|
| FACILITY ADDRESS: | 7050 Madison Street |
| FACILITY CITY, STATE, ZIP: | Willowbrook, IL 60521 |
| | |

DOCKET NUMBER: NH 19-C0052

LICENSEE INFO: Chateau Nursing and Rehabilitation Center, LLC LICENSEE ADDRESS: 2201 Main Street LICENSEE CITY, STATE, ZIP: Evanston, IL 60202

Survey Date – 12/24/2018

Type B violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1210b), 300.1210d)6), 300.1220b)3) and 300.3240a). The fine was doubled in this instance in accordance with 300.282i) and j) of the Code due to the violation of the sections of the Code with a high risk designation: 300.1210b), 300.1210d)6) and 300.3240a). A fine of \$2,200.00

Jan - Mar 2019

| FACILITY NAME: | Chestnut Corner S.C. |
|----------------------------|--|
| FACILITY ADDRESS: | 905 West Chestnut Street, P.O. Box 250 |
| FACILITY CITY, STATE, ZIP: | Louisville, IL 62858 |

DOCKET NUMBER: NH 18-S0551

LICENSEE INFO:Diamond Development Co.LICENSEE ADDRESS:150 South State Rte 45, P.O. Box 250LICENSEE CITY, STATE, ZIP:Louisville, IL 62858

Survey Date – 11/21/2018 Type B violation of an occurrence for violating one or more of the following sections of the Code: 330.120e)1) and 300.3940a). A fine of \$1,100.00

Type B violation of an occurrence for violating one or more of the following sections of the Code: 330.2210)a)2)3)5). A fine of \$1,100.00

Total fines \$2,200.00

FACILITY NAME:Christian Nursing HomeFACILITY ADDRESS:1507 7th StreetFACILITY CITY, STATE, ZIP:Lincoln, IL 62656

DOCKET NUMBER: NH 18-C0131

LICENSEE INFO:Christian Homes, Inc.LICENSEE ADDRESS:208 S. LaSalle Street, Ste 814LICENSEE CITY, STATE, ZIP:Lincoln, IL 62656

Survey Date – 03/07/2018 FINAL ORDER – Violation Amended/Affirmed, Fine Assessment Reduced and/or Notice of Conditional License Withdrawn.

| FACILITY NAME: | Clark Manor CNV Center |
|----------------------------|-------------------------|
| FACILITY ADDRESS: | 7433 North Clark Street |
| FACILITY CITY, STATE, ZIP: | Chicago, IL 60626 |

DOCKET NUMBER: NH 19-C0092

LICENSEE INFO: Clark Skilled Nursing Facility, LLC LICENSEE ADDRESS: 3450 Oakton Street LICENSEE CITY, STATE, ZIP: Skokie, IL 60076

Survey Date – 01/17/2019

Type B violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1210a), 300.1210b), and 300.1220b)3). The fine was doubled in this instance in accordance with 300.282i) and j) of the Code due to the violation of the sections of the Code with a high risk designation: 300.1210b). A fine of \$2,200.00

Jan - Mar 2019

| FACILITY NAME: | Crossroads Care Ctr - Woodstock |
|----------------------------|---------------------------------|
| FACILITY ADDRESS: | 309 McHenry Avenue |
| FACILITY CITY, STATE, ZIP: | Woodstock, IL 60098 |
| | |

DOCKET NUMBER: NH 19-S0103

LICENSEE INFO:Crossroads Care Center of Woodstock, LLCLICENSEE ADDRESS:5750 Old Orchard Road, Ste 420LICENSEE CITY, STATE, ZIP:Skokie, IL 60077

Survey Date – 01/31/2019

Type B violation of an occurrence for violating one or more of the following sections of the Code: 300.1210b), 300.1210d)6) and 300.3240a). The fine was doubled in this instance in accordance with 300.282i) and j) of the Code due to the violation of the sections of the Code with a high risk designation: 300.1210b), 300.1210d)6) and 300.3240a). A fine of \$2,200.00

FACILITY NAME:Dixon Rehab & HCCFACILITY ADDRESS:800 Division StreetFACILITY CITY, STATE, ZIP:Dixon, IL 61021

DOCKET NUMBER: NH 18-C0055

LICENSEE INFO: Dixon Manor, LLC LICENSEE ADDRESS: 412 East Lawrence LICENSEE CITY, STATE, ZIP: Springfield, IL 62703

Survey Date – 01/31/2018

FINAL ORDER – Violation Amended/Affirmed, Fine Assessment Reduced and/or Notice of Conditional License Withdrawn.

FACILITY NAME:Dixon Rehab & HCCFACILITY ADDRESS:800 Division StreetFACILITY CITY, STATE, ZIP:Dixon, IL 61021

DOCKET NUMBER: NH 18-S0520

LICENSEE INFO: Dixon Manor, LLC LICENSEE ADDRESS: 412 East Lawrence LICENSEE CITY, STATE, ZIP: Springfield, IL 62703

Survey Date – 11/05/2018

Type B violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1210b)5), 300.1210d)6) and 300.3240a). The fine was doubled in this instance in accordance with 300.282i) and j) of the Code due to the violation of the sections of the Code with a high risk designation: 300.1210b), 300.1210d)6) and 300.3240a). A fine of \$2,200.00.

| FACILITY NAME: | Dixon Rehab & HCC |
|----------------------------|---------------------|
| FACILITY ADDRESS: | 800 Division Street |
| FACILITY CITY, STATE, ZIP: | Dixon, IL 61021 |

DOCKET NUMBER: NH 19-S0006

LICENSEE INFO:Dixon Manor, LLCLICENSEE ADDRESS:412 Lawrence StreetLICENSEE CITY, STATE, ZIP:Springfield, IL 62703

Survey Date – 12/06/2018

Type A violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1210b), 300.1210c) and 300.3240a). The fine was doubled in this instance in accordance with 300.282i) and j) of the Code due to the violation of the sections of the Code with a high risk designation: 300.1210b) and 300.3240a). A fine of \$25,000.00

FACILITY NAME:Eden Village Care CenterFACILITY ADDRESS:400 South Station RoadFACILITY CITY, STATE, ZIP:Glen Carbon, IL 62034

DOCKET NUMBER: NH 19-C0082

LICENSEE INFO:Eden Retirement Center, Inc.LICENSEE ADDRESS:400 South Station RoadLICENSEE CITY, STATE, ZIP:Glen Carbon, IL 62034

Survey Date – 01/22/2019

Type B violation of an occurrence for violating one or more of the following sections of the Code: 300.610a) and 300.1210b). The fine was doubled in this instance in accordance with 300.282i) and j) of the Code due to the violation of the sections of the Code with a high risk designation: 300.1210b). A fine of \$2,200.00

| FACILITY NAME: | Forest City Rehab and Nrsg Ctr |
|----------------------------|--------------------------------|
| FACILITY ADDRESS: | 321 Arnold Avenue |
| FACILITY CITY, STATE, ZIP: | Rockford, IL 61108 |

DOCKET NUMBER: NH 19-S0056

LICENSEE INFO:Forest City Rehab and Nursing Center, LLCLICENSEE ADDRESS:4711 Golf Road, Ste 200LICENSEE CITY, STATE, ZIP:Skokie, IL 60076

Survey Date – 12/06/2018

Type B violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1210b), 300.1210c), 300.1210d)5) and 300.3240a). The fine was doubled in this instance in accordance with 300.282i) and j) of the Code due to the violation of the sections of the Code with a high risk designation: 300.1210b), 300.1210d)5) and 300.3240a). A fine of \$2,200.00

| FACILITY NAME: | Friendship Manor Healthcare |
|----------------------------|-----------------------------|
| FACILITY ADDRESS: | 485 South Friendship Drive |
| FACILITY CITY, STATE, ZIP: | Nashville, IL 62263 |

DOCKET NUMBER: NH 18-C0547

LICENSEE INFO:Friendship Manor Group, LLCLICENSEE ADDRESS:485 South Friendship DriveLICENSEE CITY, STATE, ZIP:Nashville, IL 62263

Survey Date – 11/16/2018

Type B violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1210b), 300.1210d)6) and 300.3240a). The fine was doubled in this instance in accordance with 300.282i) and j) of the Code due to the violation of the sections of the Code with a high risk designation: 300.1210b), 300.1210d)6) and 300.3240a). A fine of \$2,200.00

| FACILITY NAME: | Gardenview Manor |
|----------------------------|--------------------------|
| FACILITY ADDRESS: | 14792 Catlin Tilton Road |
| FACILITY CITY, STATE, ZIP: | Danville, IL 61834 |
| | |

DOCKET NUMBER: NH 19-C0019

LICENSEE INFO:Gardenview Manor, LLCLICENSEE ADDRESS:5750 Old Orchard Road, Suite 420LICENSEE CITY, STATE, ZIP:Skokie, IL 60077

Survey Date – 12/06/2018

Type B violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1210b), 300.1210d)6) and 300.3240a). The fine was doubled in this instance in accordance with 300.282i) and j) of the Code due to the violation of the sections of the Code with a high risk designation: 300.1210b), 300.1210d)6) and 300.3240a). A fine of \$2,200.00

| FACILITY NAME: | Generations at Lincoln |
|----------------------------|----------------------------|
| FACILITY ADDRESS: | 2202 North Kickapoo Street |
| FACILITY CITY, STATE, ZIP: | Lincoln, IL 62656 |
| | |

DOCKET NUMBER: NH 19-C0120

| LICENSEE INFO: | Generations at Lincoln, LLC |
|----------------------------|-----------------------------|
| LICENSEE ADDRESS: | 6840 North Lincoln Avenue |
| LICENSEE CITY, STATE, ZIP: | Lincolnwood, IL 60712 |

Survey Date – 01/30/2019

Type B violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1210b), 300.1210d)6) and 300.3240a). The fine was doubled in this instance in accordance with 300.282i) and j) of the Code due to the violation of the sections of the Code with a high risk designation: 300.1210b), 300.1210d)6) and 300.3240a). A fine of \$2,200.00

| FACILITY NAME: | Genesis Senior Living, Aledo |
|----------------------------|-------------------------------|
| FACILITY ADDRESS: | 309 NW 9 th Avenue |
| FACILITY CITY, STATE, ZIP: | Aledo, IL 61231 |

DOCKET NUMBER: NH 18-S0506

LICENSEE INFO:Genesis Senior Living, AledoLICENSEE ADDRESS:409 NW 9th AvenueLICENSEE CITY, STATE, ZIP:Aledo, IL 61231

Survey Date – 11/05/2018

Type Å violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.686a)4), 300.686b), 300.686e)2)3), 300.1210b), 300.1210d)1)3, 300.3210a), 300.3240a) and 300.3240b). The fine was doubled in this instance in accordance with 300.282i) and j) of the Code due to the violation of the sections of the Code with a high risk designation: 300.686, 300.1210b), and 300.3240a). A fine of \$25,000.00

| FACILITY NAME: | Gibson Community Hsp Annex |
|----------------------------|----------------------------------|
| FACILITY ADDRESS: | 430 East 19 th Street |
| FACILITY CITY, STATE, ZIP: | Gibson City, IL 60936 |
| | |

DOCKET NUMBER: NH 19-S0060

LICENSEE INFO:Gibson Area Hospital & Health ServicesLICENSEE ADDRESS:1120 North Melvin StreetLICENSEE CITY, STATE, ZIP:Gibson City, IL 60936

Survey Date – 01/03/2019

Type A violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1210b), 300.1210c), 300.1210d)6) and 300.3240a). The fine was doubled in this instance in accordance with 300.282i) and j) of the Code due to the violation of the sections of the Code with a high risk designation: 300.1210b), 300.1210d)6) and 300.3240a). A fine of \$25,000.00

Jan - Mar 2019

| FACILITY NAME: | <u>Glencrest Healthcare & Rehab Center</u> |
|----------------------------|--|
| FACILITY ADDRESS: | 2451 West Touhy Avenue |
| FACILITY CITY, STATE, ZIP: | Chicago, IL 60645 |
| DOCKET NUMBER: | NH 19-C0010 |

LICENSEE INFO:Glencrest Healthcare and Rehabilitation Centre, LtdLICENSEE ADDRESS:191 North Wacker Drive, Suite 1800LICENSEE CITY, STATE, ZIP:Chicago, IL 60606

Survey Date – 11/29/2018

Type B violation of an occurrence for violating one or more of the following sections of the Code: 300.1210b), 300.1210d)2) and 300.3240a). The fine was doubled in this instance in accordance with 300.282i) and j) of the Code due to the violation of the sections of the Code with a high risk designation: 300.1210b) and 300.3240a). A fine of \$2,200.00

Type B violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1210b), 300.1210d)2), 300.1210d)5) and 300.3240a). The fine was doubled in this instance in accordance with 300.282i) and j) of the Code due to the violation of the sections of the Code with a high risk designation: 300.1210b), 300.1210d)6) and 300.3240a). A fine of \$2,200.00

Total fines \$4,400.00

| FACILITY NAME: | Glenlake Terrace Nursing & Reh |
|----------------------------|-----------------------------------|
| FACILITY ADDRESS: | 2222 West 14 th Street |
| FACILITY CITY, STATE, ZIP: | Waukegan, IL 60085 |

DOCKET NUMBER: NH 18-S0119

LICENSEE INFO: Pinnacle, Inc. LICENSEE ADDRESS: 191 N. Wacker Dr, Ste 1800 LICENSEE CITY, STATE, ZIP: Chicago, IL 60606

Survey Date – 03/08/2018 FINAL ORDER – Violation Amended/Affirmed, Fine Assessment Reduced and/or Notice of Conditional License Withdrawn.

| FACILITY NAME: FACILITY ADDRESS: FACILITY CITY, STATE, ZIP: | Glenwood Healthcare & Rehab 19330 South Cottage Grove Glenwood, IL 60425 |
|---|--|
| DOCKET NUMBER: | NH 19-C0106 NH 19-S0117 |
| | |

LICENSEE INFO:Glenwood Healthcare & Rehab, Inc.LICENSEE ADDRESS:5750 Old Orchard Road, Ste 420LICENSEE CITY, STATE, ZIP:Skokie, IL 60077

Survey Date – 01/18/2019

Type A violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1210a), 300.1210b)2)4)5), 300.1210c), 300.1210d)6) and 300.3240a). The fine was doubled in this instance in accordance with 300.282i) and j) of the Code due to the violation of the sections of the Code with a high risk designation: 300.1210b), 300.1210d)6) and 300.3240a). A fine of \$25,000.00

Type B violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1210a), 300.1210b)5), 300.1210c), 300.1210d)6) and 300.3240a). The fine was doubled in this instance in accordance with 300.282i) and j) of the Code due to the violation of the sections of the Code with a high risk designation: 300.1210b), 300.1210d)6) and 300.3240a). A fine of \$2,200.00

Total fines of \$27,200.00

| FACILITY NAME: | Good Sam Soc. Mt Carroll |
|----------------------------|--|
| FACILITY ADDRESS: | 1006 North Lowden |
| FACILITY CITY, STATE, ZIP: | Mount Carroll, IL 61053 |
| DOCKET NUMBER: | NH 19-S0038 |
| LICENSEE INFO: | Good Samaritan Society – Mount Carroll |
| LICENSEE ADDRESS: | 208 South LaSalle Street, Ste 814 |

LICENSEE CITY, STATE, ZIP: Chicago, IL 60604

Survey Date – 12/06/2018

Type A violation of an occurrence for violating one or more of the following sections of the Code: 300.1210b), 300.1210d)6) and 300.3240a). The fine was doubled in this instance in accordance with 300.282i) and j) of the Code due to the violation of the sections of the Code with a high risk designation: 300.1210b), 300.1210d)6) and 300.3240a). A fine of \$25,000.00

| FACILITY NAME: FACILITY ADDRESS: FACILITY CITY, STATE, ZIP: | Grove of Skokie, The 9000 Lavergne Avenue Skokie, IL 60077 |
|---|--|
| DOCKET NUMBER: | NH 18-C0251 NH 18-S0252 |
| LICENSEE INFO: | Skokie Skilled Nursing Facility. |

LICENSEE INFO:Skokie Skilled Nursing Facility, LLCLICENSEE ADDRESS:801 Adlai Stevenson DriveLICENSEE CITY, STATE, ZIP:Springfield, IL 62703

Survey Date – 05/03/2018

FINAL ORDER – Violation Amended/Affirmed, Fine Assessment Reduced and/or Notice of Conditional License Withdrawn.

| FACILITY NAME: | Helia Healthcare of Belleville |
|----------------------------|----------------------------------|
| FACILITY ADDRESS: | 40 North 64 th Street |
| FACILITY CITY, STATE, ZIP: | Belleville, IL 62223 |

DOCKET NUMBER: NH 19-C0076

| LICENSEE INFO: | Helia Healthcare of Belleville, LLC |
|----------------------------|-------------------------------------|
| LICENSEE ADDRESS: | 118 West Edwards Street, Suite 200 |
| LICENSEE CITY, STATE, ZIP: | Springfield, IL 62704 |

Survey Date – 01/16/2019

Type B violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1210b)4), 300.1210c), 300.1210d)3) and 300.3240a). The fine was doubled in this instance in accordance with 300.282i) and j) of the Code due to the violation of the sections of the Code with a high risk designation: 300.1210b) and 300.3240a). A fine of \$2,200.00

| FACILITY NAME: | Heritage Health - Springfield |
|----------------------------|-------------------------------|
| FACILITY ADDRESS: | 900 North Rutledge |
| FACILITY CITY, STATE, ZIP: | Springfield, IL 62702 |

DOCKET NUMBER: NH 19-C0009

LICENSEE INFO: Rutledge Joint Ventures, LLC LICENSEE ADDRESS: 202 North Center LICENSEE CITY, STATE, ZIP: Bloomington, IL 61701

Survey Date – 11/30/2018

Type B violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1210a), 300.1210b)5), 300.1210d)3)6) and 300.3240a). The fine was doubled in this instance in accordance with 300.282i) and j) of the Code due to the violation of the sections of the Code with a high risk designation: 300.1210b), 300.1210d)6) and 300.3240a). A fine of \$2,200.00

| FACILITY NAME: | Helia Southbelt Healthcare |
|----------------------------|----------------------------|
| FACILITY ADDRESS: | 101 South Belt West |
| FACILITY CITY, STATE, ZIP: | Belleville, IL 62220 |
| | |

DOCKET NUMBER: NH 19-C0066

| LICENSEE INFO: | Helia Southbelt Healthcare, LLC |
|----------------------------|----------------------------------|
| LICENSEE ADDRESS: | 118 W. Edwards Street, Suite 200 |
| LICENSEE CITY, STATE, ZIP: | Springfield, IL 62704 |

Survey Date - 01/04/2019

Type B violation of an occurrence for violating one or more of the following sections of the Code: 300.1210b)4), 300.1210c), 300.1210d)6) and 300.3240a). The fine was doubled in this instance in accordance with 300.282i) and j) of the Code due to the violation of the sections of the Code with a high risk designation: 300.1210b), 300.1210d)6) and 300.3240a). A fine of \$2,200.00

FACILITY NAME:Integrity HC of AltonFACILITY ADDRESS:3523 WickenhauserFACILITY CITY, STATE, ZIP:Alton, IL 62002

DOCKET NUMBER: NH 19-S0065

LICENSEE INFO:Alton Rehabilitation and Nursing Center, LLCLICENSEE ADDRESS:2015 North Main Street, Ste 111LICENSEE CITY, STATE, ZIP:Carbondale, IL 62901

Survey Date – 12/20/2018

Type B violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1210b), 300.1210c), 300.1210d)6) and 300.3240a). The fine was doubled in this instance in accordance with 300.282i) and j) of the Code due to the violation of the sections of the Code with a high risk designation: 300.1210b), 300.1210d)6) and 300.3240a). A fine of \$2,200.00

| FACILITY NAME: | <u>Iona Glos SLC</u> |
|----------------------------|---|
| FACILITY ADDRESS: | 50 South Fairbank Street |
| FACILITY CITY, STATE, ZIP: | Addison, IL 60101 |
| DOCKET NUMBER: | NH 18-S0546 |
| LICENSEE INFO: | Ray Graham Association for People with Disabilities |
| LICENSEE ADDRESS: | 901 Warrenville Road, Ste 500 |
| LICENSEE CITY, STATE, ZIP: | Lisle, IL 60532 |

Survey Date – 11/02/2018

Type Å violation of an occurrence for violating one or more of the following sections of the Code: 350.620a) 350.1210, 350.1235)3) and 350.3240a). A fine of \$12,500.00

| FACILITY NAME: | Iona Glos SLC |
|----------------------------|--------------------------|
| FACILITY ADDRESS: | 50 South Fairbank Street |
| FACILITY CITY, STATE, ZIP: | Addison, IL 60101 |

DOCKET NUMBER: NH 19-C0098

LICENSEE INFO:Ray Graham Association for People with DisabilitiesLICENSEE ADDRESS:901 Warrenville Road, Ste 500LICENSEE CITY, STATE, ZIP:Lisle, IL 60532

Survey Date – 01/17/2019

Type A violation of an occurrence for violating one or more of the following sections of the Code: 350.1210, 350.1230b)7) and 350.3240a). A fine of \$12,500.00

| FACILITY NAME: | Jennings Terrace |
|----------------------------|-------------------|
| FACILITY ADDRESS: | 275 South LaSalle |
| FACILITY CITY, STATE, ZIP: | Aurora, IL 60505 |

DOCKET NUMBER: NH 19-C0055

LICENSEE INFO: Jennings Terrace LICENSEE ADDRESS: 1320 North Route 59 LICENSEE CITY, STATE, ZIP: Naperville, IL 60563

Survey Date – 01/15/2019

Type B violation of an occurrence for violating one or more of the following sections of the Code: 330.790a). The fine was doubled in this instance in accordance with 330.282i) and j) of the Code due to the violation of the sections of the Code with a high risk designation: 330.790). A fine of \$2,200.00

| FACILITY NAME: | Landmark of Des Plaines Rehab |
|----------------------------|-------------------------------|
| FACILITY ADDRESS: | 9300 Ballard Road |
| FACILITY CITY, STATE, ZIP: | Des Plaines, IL 60016 |
| | |
| DOCKET NUMBER: | NH 19-C0062 |

LICENSEE INFO: Landmark of Des Plaines Rehabilitation Center, LLC LICENSEE ADDRESS: 5683 North Lincoln Avenue LICENSEE CITY, STATE, ZIP: Chicago, IL 60659

Survey Date – 12/27/2018

Type A violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1210a)b)c) and 300.1210d)6). The fine was doubled in this instance in accordance with 300.282i) and j) of the Code due to the violation of the sections of the Code with a high risk designation: 300.1210b) and 300.1210d)6). A fine of \$25,000.00

Jan - Mar 2019

| FACILITY NAME: | <u>Lexington of Schaumburg</u> |
|----------------------------|--------------------------------|
| FACILITY ADDRESS: | 675 South Roselle Road |
| FACILITY CITY, STATE, ZIP: | Schaumburg, IL 60193 |
| DOCKET NUMBER: | NH 19-S0099 |

LICENSEE INFO:Lexington Health Care Center of Schaumburg, Inc.LICENSEE ADDRESS:665 West North AvenueLICENSEE CITY, STATE, ZIP:Lombard, IL 60148

Survey Date – 01/24/2019

Type B violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1210b), 300.1210d)6) and 300.3240a). The fine was doubled in this instance in accordance with 300.282i) and j) of the Code due to the violation of the sections of the Code with a high risk designation: 300.1210b), 300.1210d)6) and 300.3240a). A fine of \$2,200.00

| FACILITY NAME: | Lexington of Wheeling |
|----------------------------|-----------------------|
| FACILITY ADDRESS: | 730 West Hintz Road |
| FACILITY CITY, STATE, ZIP: | Wheeling, IL 60090 |

DOCKET NUMBER: NH 18-S0532

LICENSEE INFO:Lexington Health Care Center of Wheeling, Inc.LICENSEE ADDRESS:665 West North AvenueLICENSEE CITY, STATE, ZIP:Lombard, IL 60148

Survey Date – 11/19/2018

Type B violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1210b)5), and 300.1210d)6). The fine was doubled in this instance in accordance with 300.282i) and j) of the Code due to the violation of the sections of the Code with a high risk designation: 300.1210b) and 300.1210d)6). A fine of \$2,200.00

| FACILITY NAME: FACILITY ADDRESS: FACILITY CITY, STATE, ZIP: | Marigold Rehabilitation HCC 275 East Carl Sandburg Drive Galesburg, IL 61401 |
|---|--|
| DOCKET NUMBER: | NH 19-C0047 |
| LICENSEE INFO: | Petersen Health Network, LLC |

LICENSEE ADDRESS: 830 West Trailcreek Drive LICENSEE CITY, STATE, ZIP: Peoria, IL 61614

Survey Date – 01/03/2019

Type B violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1210b)3) and 300.3240a). The fine was doubled in this instance in accordance with 300.282i) and j) of the Code due to the violation of the sections of the Code with a high risk designation: 300.1210b) and 300.3240a). A fine of \$2,200.00

Jan - Mar 2019

| FACILITY NAME: | Midway Neurological Rehab |
|----------------------------|---------------------------|
| FACILITY ADDRESS: | 8540 South Harlem Avenue |
| FACILITY CITY, STATE, ZIP: | Bridgeview, IL 60455 |

DOCKET NUMBER: NH 19-C0048

LICENSEE INFO:Midway Neurological and Rehabilitation Center, L.L.C.LICENSEE ADDRESS:240 Fencl LaneLICENSEE CITY, STATE, ZIP:Hillside, IL 60162

Survey Date – 12/12/2018

Type Å violation of an occurrence for violating one or more of the following sections of the Code: 300.1210b), 300.1220b)2) and 300.3240a). The fine was doubled in this instance in accordance with 300.282i) and j) of the Code due to the violation of the sections of the Code with a high risk designation: 300.1210b) and 300.3240a). A fine of \$25,000.00

| FACILITY NAME: | Midway Neurological Rehab Ctr |
|----------------------------|-------------------------------|
| FACILITY ADDRESS: | 8540 South Harlem Avenue |
| FACILITY CITY, STATE, ZIP: | Bridgeview, IL 60455 |

DOCKET NUMBER: NH 19-C0105

LICENSEE INFO: Midway Neurological and Rehabilitation Center, LLC LICENSEE ADDRESS: 240 Fencl Lane LICENSEE CITY, STATE, ZIP: Hillside, IL 60162

Survey Date – 01/04/2019

Type B violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1210b), 300.1210d)6), 300.1220b)2), 300.3240a) and 300.3240f). The fine was doubled in this instance in accordance with 300.282i) and j) of the Code due to the violation of the sections of the Code with a high risk designation: 300.1210b), 300.1210d)6) and 300.3240a). A fine of \$2,200.00

| FACILITY NAME: | Miller Health Care Center |
|----------------------------|---------------------------|
| FACILITY ADDRESS: | 1601 Butterfield Trail |
| FACILITY CITY, STATE, ZIP: | Kankakee, IL 60901 |

DOCKET NUMBER: NH 19-S0104

| LICENSEE INFO: | Riverside Senior Living Center |
|----------------------------|--------------------------------|
| LICENSEE ADDRESS: | 350 North Wall Street |
| LICENSEE CITY, STATE, ZIP: | Kankakee, IL 60901 |

Survey Date – 01/17/2019

Type B violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.610c)2), 300.1210b), 300.1210d)6) and 300.3240a). The fine was doubled in this instance in accordance with 300.282i) and j) of the Code due to the violation of the sections of the Code with a high risk designation: 300.1210b), 300.1210d)6) and 300.3240a). A fine \$2,200.00

Jan – Mar 2019

| FACILITY NAME: | Niles Nrsg & Rehab Center |
|----------------------------|---------------------------|
| FACILITY ADDRESS: | 9777 Greenwood Avenue |
| FACILITY CITY, STATE, ZIP: | Niles, IL 60714 |
| DOCKET NUMBER: | NH 18-C0218 |

LICENSEE INFO:Niles Nursing and Rehabilitation Center, LLCLICENSEE ADDRESS:240 Fencl LaneLICENSEE CITY, STATE, ZIP:Hillside, IL 60162

Survey Date – 04/16/2018 FINAL ORDER – Violation Amended/Affirmed, Fine Assessment Reduced and/or Notice of Conditional License Withdrawn.

| FACILITY NAME: | Niles Nursing & Rehab Center |
|----------------------------|--|
| FACILITY ADDRESS: | 9777 Greenwood Avenue |
| FACILITY CITY, STATE, ZIP: | Niles, IL 60714 |
| DOCKET NUMBER: | NH 18-C0545 |
| LICENSEE INFO: | Niles Nursing and Rehabilitation Center, LLC |
| LICENSEE ADDRESS: | 240 Fenci Lane |

Survey Date – 11/27/2018

LICENSEE CITY, STATE, ZIP: Hillside, IL 60162

Type Å violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1210b) and 300.1210d)6). The fine was doubled in this instance in accordance with 300.282i) and j) of the Code due to the violation of the sections of the Code with a high risk designation: 300.1210b) and 300.1210d)6). A fine of \$25,000.00

| FACILITY NAME: | Nokomis Rehab & Health Care C |
|----------------------------|-------------------------------|
| FACILITY ADDRESS: | 505 Stevens Street |
| FACILITY CITY, STATE, ZIP: | Nokomis, IL 62075 |
| DOCKET NUMBER: | NH 19-C0020 |
| LICENSEE INFO: | Petersen Health Network, LLC |
| LICENSEE ADDRESS: | 830 West Trailcreek Drive |
| LICENSEE CITY, STATE, ZIP: | Peoria, IL 61614 |

Survey Date – 11/28/2018

Type B violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1210b), 300.1210d)5) and 300.3240a). The fine was doubled in this instance in accordance with 300.282i) and j) of the Code due to the violation of the sections of the Code with a high risk designation: 300.1210b), 300.1210d)5) and 300.3240a). A fine of \$2,200.00

Type B violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1210b), 300.1210d)6) and 300.3240a). The fine was doubled in this instance in accordance with 300.282i) and j) of the Code due to the violation of the sections of the Code with a high risk designation: 300.1210b), 300.1210d)6) and 300.3240a). A fine of \$2,200.00

Total fines \$4,400.00

Jan - Mar 2019

| FACILITY NAME: | Nokomis Rehab & Health Care C |
|----------------------------|-------------------------------|
| FACILITY ADDRESS: | 505 Stevens Street |
| FACILITY CITY, STATE, ZIP: | Nokomis, IL 62075 |

DOCKET NUMBER: NH 19-S0089

LICENSEE INFO:Petersen Health Network, LLCLICENSEE ADDRESS:830 West Trailcreek DriveLICENSEE CITY, STATE, ZIP:Peoria, IL 61614

Survey Date – 01/18/2019

Type B violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1210b), 300.1210d)5) and 300.3240a). The fine was doubled in this instance in accordance with 300.282i) and j) of the Code due to the violation of the sections of the Code with a high risk designation: 300.1210b), 300.1210d)5) and 300.3240a). A fine of \$2,200.00

FACILITY NAME:Northwoods Care CentreFACILITY ADDRESS:2250 Pearl StreetFACILITY CITY, STATE, ZIP:Belvidere, IL 61008

DOCKET NUMBER: NH 19-S0027

LICENSEE INFO:Symphony Northwoods, LLCLICENSEE ADDRESS:801 Adlai Stevenson DriveLICENSEE CITY, STATE, ZIP:Springfield, IL 62703

Survey Date – 12/14/2018

Type B violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1210b), 300.1210d)6) and 300.3240a). The fine was doubled in this instance in accordance with 300.282i) and j) of the Code due to the violation of the sections of the Code with a high risk designation: 300.1210b), 300.1210d)6) and 300.3240a). A fine of \$2,200.00

| FACILITY NAME: | Oak Lawn Respiratory & Rehab |
|----------------------------|---|
| FACILITY ADDRESS: | 9525 South Mayfield |
| FACILITY CITY, STATE, ZIP: | Oaklawn, IL 60453 |
| DOCKET NUMBER: | NH 19-C0039 |
| LICENSEE INFO: | Oak Lawn Respiratory and Rehabilitation Center, LLC |
| LICENSEE ADDRESS: | 240 Fencl Lane |
| LICENSEE CITY, STATE, ZIP: | Hillside, IL 60162 |

Survey Date – 12/07/2018

Type A violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1210b), 300.1210d)6) and 300.3240a). The fine was doubled in this instance in accordance with 300.282i) and j) of the Code due to the violation of the sections of the Code with a high risk designation: 300.1210b), 300.1210d)6) and 300.3240a). A fine of \$25,000.00

| FACILITY NAME: | PA Peterson at the Citadel |
|----------------------------|----------------------------|
| FACILITY ADDRESS: | 1311 Parkview Avenue |
| FACILITY CITY, STATE, ZIP: | Rockford, IL 61107 |

DOCKET NUMBER: NH 18-C0536

LICENSEE INFO:P A Peterson at the Citadel, LLCLICENSEE ADDRESS:55 West Monroe Street, Ste 2400LICENSEE CITY, STATE, ZIP:Chicago, IL 60603

Survey Date – 11/13/2018

Type A violation of an occurrence for violating one or more of the following sections of the Code: 300.1210b), 300.1210d)6) and 300.3240a). The fine was doubled in this instance in accordance with 300.282i) and j) of the Code due to the violation of the sections of the Code with a high risk designation: 300.1210b), 300.1210d)6) and 300.3240a). A fine of \$25,000.00

FACILITY NAME:Parc at Joliet, TheFACILITY ADDRESS:222 North Hammes AvenueFACILITY CITY, STATE, ZIP:Joliet, IL 60435

DOCKET NUMBER: NH 18-C0153

LICENSEE INFO:The Parc of Joliet, LLCLICENSEE ADDRESS:2201 Main StreetLICENSEE CITY, STATE, ZIP:Evanston, IL 60202

Survey Date – 03/15/2018 FINAL ORDER – Violation Amended/Affirmed, Fine Assessment Reduced and/or Notice of Conditional License Withdrawn.

FACILITY NAME:Parker Nursing and Rehab CtrFACILITY ADDRESS:516 West Frechs StreetFACILITY CITY, STATE, ZIP:Streator, IL 61364

DOCKET NUMBER: NH 19-S0081

LICENSEE INFO: Parker Rehab and Nursing Center, LLC LICENSEE ADDRESS: 240 Fencl Lane LICENSEE CITY, STATE, ZIP: Hillside, IL 60162

Survey Date – 01/17/2019

Type B violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1010h), 300.1210b)3), , 300.1210c), 300.1210d)3)5), and 300.3240a). The fine was doubled in this instance in accordance with 300.282i) and j) of the Code due to the violation of the sections of the Code with a high risk designation: 300.1210b), 300.1210d)5 and 300.3240a). A fine of \$2,200.00

| FACILITY NAME: | Parkview Home - Freeport |
|---|---|
| FACILITY ADDRESS: FACILITY CITY, STATE, ZIP: | 1234 South Park Boulevard Freeport, IL 61032 |
| | - |

DOCKET NUMBER: NH 19-S0041

LICENSEE INFO:Parkview Home of Freeport, Illinois, Inc.LICENSEE ADDRESS:1234 South Park BoulevardLICENSEE CITY, STATE, ZIP:Freeport, IL 61032

Survey Date – 01/03/2019 Type B violation of an occurrence for violating one or more of the following sections of the Code: 330.1120a. A fine of \$1,100.00

| FACILITY NAME: | Parkview Home - Freeport |
|----------------------------|--------------------------|
| FACILITY ADDRESS: | 1234 South Park Blvd |
| FACILITY CITY, STATE, ZIP: | Freeport, IL 61032 |

DOCKET NUMBER: NH 19-C0067

LICENSEE INFO: Parkview Home of Freeport, Illinois, Inc. LICENSEE ADDRESS: 1234 South Park Boulevard LICENSEE CITY, STATE, ZIP: Freeport, IL 61032

Survey Date – 01/17/2019

Type B violation of an occurrence for violating one or more of the following sections of the Code: 300.1210a), 300.1210b), and 300.1210d)1)2)). The fine was doubled in this instance in accordance with 300.282i) and j) of the Code due to the violation of the sections of the Code with a high risk designation: 300.1210b). A fine of \$2,200.00

| FACILITY NAME: | Pearl Pavilion |
|----------------------------|-------------------------|
| FACILITY ADDRESS: | 900 South Kiwanis Drive |
| FACILITY CITY, STATE, ZIP: | Freeport, IL 61032 |

DOCKET NUMBER: NH 19-C0064

LICENSEE INFO:Pearl Pavilion, LLCLICENSEE ADDRESS:4711 Golf Road, Suite 200LICENSEE CITY, STATE, ZIP:Skokie, IL 60076

Survey Date – 12/19/2018

Type B violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1210b), 300.1220b)2), 300.3240a), 300.3240d)and 300.3240e). The fine was doubled in this instance in accordance with 300.282i) and j) of the Code due to the violation of the sections of the Code with a high risk designation: 300.1210b), 300.3240a), 300.3240d) and 300.3240e). A fine of \$2,200.

Type B violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1010h), 300.1210a), 300.1210b), 300.1210d)5), 300.1220b)3) and 300.3240a). The fine was doubled in this instance in accordance with 300.282i) and j) of the Code due to the violation of the sections of the Code with a high risk designation: 300.1210b), 300.1210d)5) and 300.3240a). A fine of \$2,200.00

Total fine \$4,400.00

| FACILITY NAME: | Pekin Manor |
|----------------------------|----------------------|
| FACILITY ADDRESS: | 1520 El Camino Drive |
| FACILITY CITY, STATE, ZIP: | Pekin, IL 61554 |

DOCKET NUMBER: NH 19-C0021

LICENSEE INFO:UDI #10, LLCLICENSEE ADDRESS:285 South Farnham StreetLICENSEE CITY, STATE, ZIP:Galesburg, IL 61401

Survey Date – 12/04/2018

Type B violation of an occurrence for violating one or more of the following sections of the Code: 300.1210b)4), 300.1210d)6) and 300.3240a). The fine was doubled in this instance in accordance with 300.282i) and j) of the Code due to the violation of the sections of the Code with a high risk designation: 300.1210b), 300.1210d)6) and 300.3240a). A fine of \$2,200.00

| FACILITY NAME: | Pine Acres Rehab & Living Center |
|----------------------------|----------------------------------|
| FACILITY ADDRESS: | 1212 South Second Street |
| FACILITY CITY, STATE, ZIP: | DeKalb, IL 60115 |
| | |

DOCKET NUMBER: NH 18-C0533

LICENSEE INFO: Pine Acres Rehab & Living Center, LLC LICENSEE ADDRESS: 191 N. Wacker Drive, Suite 1800 LICENSEE CITY, STATE, ZIP: Chicago, IL 60606

Survey Date – 11/21/2018

Type B violation of an occurrence for violating one or more of the following sections of the Code: 300.1210b)4), 300.1210d)6) and 300.3240a). The fine was doubled in this instance in accordance with 300.282i) and j) of the Code due to the violation of the sections of the Code with a high risk designation: 300.1210b), 300.1210d)6) and 300.3240a). A fine of \$2,200.00

| FACILITY NAME: | Presence Villa Scalabrini N & R |
|----------------------------|---------------------------------|
| FACILITY ADDRESS: | 480 North Wolf Road |
| FACILITY CITY, STATE, ZIP: | Northlake, IL 60146 |

DOCKET NUMBER: NH 19-S0100

LICENSEE INFO: Presence Senior Services - Chicagoland LICENSEE ADDRESS: 801 Adlai Stevenson Drive LICENSEE CITY, STATE, ZIP: Springfield, IL 62703

Survey Date – 01/17/2019

Type B violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1210b), 300.1210d)5) and 300.3240a). The fine was doubled in this instance in accordance with 300.282i) and j) of the Code due to the violation of the sections of the Code with a high risk designation: 300.1210b), 300.1210d)5) and 300.3240a). A fine of \$2,200.00.

| FACILITY NAME: | River North of Bradley H & R |
|----------------------------|------------------------------|
| FACILITY ADDRESS: | 650 North Kinzie |
| FACILITY CITY, STATE, ZIP: | Bradley, IL 60915 |

DOCKET NUMBER: NH 19-C0061

LICENSEE INFO:River North of Bradley Health and Rehabilitation Center, LLCLICENSEE ADDRESS:191 North Wacker Drive, Ste 1800LICENSEE CITY, STATE, ZIP:Chicago, IL 60606

Survey Date – 12/11/2018

Type B violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1210b), 300.1210c), 300.1210d)5) and 300.3240a). The fine was doubled in this instance in accordance with 300.282i) and j) of the Code due to the violation of the sections of the Code with a high risk designation: 300.1210b), 300.1210d)5) and 300.3240a). A fine of \$2,200.00

| FACILITY NAME: | Rosewood Care Center of Alton |
|----------------------------|--------------------------------------|
| FACILITY ADDRESS: | 3490 Humbert Road |
| FACILITY CITY, STATE, ZIP: | Alton, IL 62002 |

DOCKET NUMBER: NH 18-C0045

LICENSEE INFO: Bravo Care of Alton, Inc. LICENSEE ADDRESS: 412 East Lawrence Avenue LICENSEE CITY, STATE, ZIP: Springfield, IL 62703

Survey Date – 12/14/2017 FINAL ORDER – Violation Amended/Affirmed, Fine Assessment Reduced and/or Notice of Conditional License Withdrawn.

| FACILITY NAME: | Rosewood Care Center of Alton |
|----------------------------|-------------------------------|
| FACILITY ADDRESS: | 3490 Humbert Road |
| FACILITY CITY, STATE, ZIP: | Alton, IL 62002 |

DOCKET NUMBER: NH 18-C0241

LICENSEE INFO:Bravo Care of Alton, Inc.LICENSEE ADDRESS:412 E. LawrenceLICENSEE CITY, STATE, ZIP:Springfield, IL 62703

Survey Date – 04/26/2018 FINAL ORDER – Violation Amended/Affirmed, Fine Assessment Reduced and/or Notice of Conditional License Withdrawn.

| FACILITY NAME: | Rosewood Care Ctr of Elgin |
|----------------------------|----------------------------|
| FACILITY ADDRESS: | 2355 Royal Boulevard |
| FACILITY CITY, STATE, ZIP: | Elgin, IL 60123 |

DOCKET NUMBER: NH 19-C0001

LICENSEE INFO:Bravo Care of Elgin, Inc.LICENSEE ADDRESS:412 East Lawrence StreetLICENSEE CITY, STATE, ZIP:Springfield, IL 62703

Survey Date – 11/15/2018

Type Å violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1210b), 300.1210d)6), 300.1220b)3) and 300.3240a). The fine was doubled in this instance in accordance with 300.282i) and j) of the Code due to the violation of the sections of the Code with a high risk designation: 300.1210b), 300.1210d)6) and 300.3240a). A fine of \$25,000.00

| FACILITY NAME: | Rosewood Care Center Galesburg |
|----------------------------|--------------------------------|
| FACILITY ADDRESS: | 1250 West Carl Sandburg Drive |
| FACILITY CITY, STATE, ZIP: | Galesburg, IL 61401 |

DOCKET NUMBER: NH 17-S0331

LICENSEE INFO:Bravo Care of Galesburg, Inc.LICENSEE ADDRESS:412 East LawrenceLICENSEE CITY, STATE, ZIP:Springfield, IL 62703

Survey Date – 06/16/2017 FINAL ORDER – Violation Amended/Affirmed, Fine Assessment Reduced and/or Notice of Conditional License Withdrawn.

| FACILITY NAME: | Rosewood Care Center - Inverness |
|----------------------------|---|
| FACILITY ADDRESS: | 1800 Colonial Parkway |
| FACILITY CITY, STATE, ZIP: | Inverness, IL 60067 |

DOCKET NUMBER: NH 18-C0329

LICENSEE INFO:Bravo Care of Inverness, Inc.LICENSEE ADDRESS:412 East LawrenceLICENSEE CITY, STATE, ZIP:Springfield, IL 62703

Survey Date – 06/28/2018 FINAL ORDER – Violation Amended/Affirmed, Fine Assessment Reduced and/or Notice of Conditional License Withdrawn.

Jan - Mar 2019

| FACILITY NAME: | Rosewood Care Ctr Inverness |
|----------------------------|-----------------------------|
| FACILITY ADDRESS: | 1800 Colonial Parkway |
| FACILITY CITY, STATE, ZIP: | Inverness, IL 60067 |
| | |

DOCKET NUMBER: NH 19-C0116

LICENSEE INFO:Bravo Care of Inverness, Inc.LICENSEE ADDRESS:412 East LawrenceLICENSEE CITY, STATE, ZIP:Springfield, IL 62703

Survey Date – 01/30/2019

Type Å violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1210b), 300.1210d)6) and 300.3240a). The fine was doubled in this instance in accordance with 300.282i) and j) of the Code due to the violation of the sections of the Code with a high risk designation: 300.1210b), 300.1210d)6) and 300.3240a). A fine of \$25,000.00

| FACILITY NAME: | Rosewood Care Center of Moline |
|----------------------------|--------------------------------|
| FACILITY ADDRESS: | 7300 34 th Avenue |
| FACILITY CITY, STATE, ZIP: | Moline, IL 61265 |
| DOCKET NUMBER: | NH 18-C0113 |

LICENSEE INFO: Rosewood Care Center of Moline LICENSEE ADDRESS: 412 E. Lawrence LICENSEE CITY, STATE, ZIP: Springfield, IL 62703

Survey Date – 02/22/2018

FINAL ORDER – Violation Amended/Affirmed, Fine Assessment Reduced and/or Notice of Conditional License Withdrawn.

| FACILITY NAME: | Rosewood Care Ctr Northbrook |
|----------------------------|------------------------------|
| FACILITY ADDRESS: | 4101 Lake Cook Road |
| FACILITY CITY, STATE, ZIP: | Northbrook, IL 60062 |

DOCKET NUMBER: NH 18-S0202

| LICENSEE INFO: | Bravo Care of Northbrook, Inc. |
|----------------------------|--------------------------------|
| LICENSEE ADDRESS: | 412 East Lawrence |
| LICENSEE CITY, STATE, ZIP: | Springfield, IL 62703 |

Survey Date – 04/05/2018

FINAL ORDER – Violation Amended/Affirmed, Fine Assessment Reduced and/or Notice of Conditional License Withdrawn.

| FACILITY NAME: FACILITY ADDRESS: FACILITY CITY, STATE, ZIP: | Rosewood Care Center of Peoria 1500 W. Northmoor Road Peoria, IL 61614 |
|---|--|
| DOCKET NUMBER: | NH 17-S0251 NH 17-C0252 |
| | |

LICENSEE INFO:Bravo Care of Peoria, Inc.LICENSEE ADDRESS:412 E. LawrenceLICENSEE CITY, STATE, ZIP:Springfield, IL 62703

Survey Date – 04/13/2017

FINAL ORDER – Violation Amended/Affirmed, Fine Assessment Reduced and/or Notice of Conditional License Withdrawn.

| FACILITY NAME: | Saline Care Nursing & Rehab |
|----------------------------|--|
| FACILITY ADDRESS: | 120 South Land Street, P.O. Box 468 |
| FACILITY CITY, STATE, ZIP: | Harrisburg, IL 62946 |
| DOCKET NUMBER: | NH 19-S0123 |
| LICENSEE INFO: | Saline Care Nursing & Rehabilitation Center, LLC |
| LICENSEE ADDRESS: | 215 East Locust Street |
| LICENSEE CITY, STATE, ZIP: | Harrisburg, IL 62946 |

Survey Date – 02/15/2019

Type A violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1210a), 300.1210b)5), 300.1210d)6), 300.2210a), 300.2210b)2). and 300.3240a). The fine was doubled in this instance in accordance with 300.282i) and j) of the Code due to the violation of the sections of the Code with a high risk designation: 300.1210b), 300.1210d)6) and 300.3240a). A fine of \$25,000.00.

FACILITY NAME:Sandwich Rehab & HCCFACILITY ADDRESS:902 East Arnold StreetFACILITY CITY, STATE, ZIP:Sandwich, IL 60548

DOCKET NUMBER: NH 18-C0535

LICENSEE INFO:Petersen Health Business, LLCLICENSEE ADDRESS:830 West Trailcreek DriveLICENSEE CITY, STATE, ZIP:Peoria, IL 61614

Survey Date – 11/16/2018

Type B violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1210b)3), 300.1210d)2)3), 300.3220f) and 300.3240a). The fine was doubled in this instance in accordance with 300.282i) and j) of the Code due to the violation of the sections of the Code with a high risk designation: 300.1210b) and 300.3240a). A fine of \$2,200.00

| FACILITY NAME: | Sauk Valley Senior Living |
|----------------------------|---------------------------|
| FACILITY ADDRESS: | 1000 Dixon Avenue |
| FACILITY CITY, STATE, ZIP: | Rock Falls, IL 61071 |

DOCKET NUMBER: NH 18-S0540

LICENSEE INFO:Midwest Health Operations, LLCLICENSEE ADDRESS:830 W. Trailcreek DriveLICENSEE CITY, STATE, ZIP:Peoria, IL 61614

Survey Date – 11/09/2018

Type B violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1210b), 300.1220b)3) and 300.3240a). The fine was doubled in this instance in accordance with 300.282i) and j) of the Code due to the violation of the sections of the Code with a high risk designation: 300.1210b) and 300.3240a). A fine of \$2,200.00

| FACILITY NAME: | Sauk Valley Senior Living |
|----------------------------|---------------------------|
| FACILITY ADDRESS: | 1000 Dixon Avenue |
| FACILITY CITY, STATE, ZIP: | Rock Falls, IL 61071 |
| | |

DOCKET NUMBER: NH 19-C0008

LICENSEE INFO: Midwest Health Operations, LLC LICENSEE ADDRESS: 830 W. Trailcreek Drive LICENSEE CITY, STATE, ZIP: Peoria, IL 61614

Survey Date – 11/28/2018

Type A violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1210b), 300.1210d)2), 300.1220b)8) and 300.3240a). The fine was doubled in this instance in accordance with 300.282i) and j) of the Code due to the violation of the sections of the Code with a high risk designation: 300.1210b) and 300.3240a). A fine of \$25,000.00

| FACILITY NAME: | Sauk Valley Senior Living |
|----------------------------|---------------------------|
| FACILITY ADDRESS: | 1000 Dixon Avenue |
| FACILITY CITY, STATE, ZIP: | Rock Falls, IL 61071 |

DOCKET NUMBER: NH 19-C0037

LICENSEE INFO:Midwest Health Operations, LLCLICENSEE ADDRESS:830 West Trailcreek DriveLICENSEE CITY, STATE, ZIP:Peoria, IL 61614

Survey Date – 12/10/2018

Type A violation of an occurrence for violating one or more of the following sections of the Code: 300.1210b), 300.1210d)6) and 300.3240a). The fine was doubled in this instance in accordance with 300.282i) and j) of the Code due to the violation of the sections of the Code with a high risk designation: 300.1210b), 300.1210d)6) and 300.3240a). A fine of \$25,000.00

| FACILITY NAME: | Southgate Health Care Center |
|----------------------------|-------------------------------------|
| FACILITY ADDRESS: | 900 East Ninth Street, P.O. Box 843 |
| FACILITY CITY, STATE, ZIP: | Metropolis, IL 62960 |
| DOCKET NUMBER: | NH 19-C0107 |

LICENSEE INFO: Southgate Health Care, Inc.

LICENSEE ADDRESS:900 East 9th StreetLICENSEE CITY, STATE, ZIP:Metropolis, IL 62960

Survey Date – 02/05/2019

Type B violation of an occurrence for violating one or more of the following sections of the Code: 300.1210b), 300.1210c), 300.1210d)6) and 300.3240a). The fine was doubled in this instance in accordance with 300.282i) and j) of the Code due to the violation of the sections of the Code with a high risk designation: 300.1210b), 300.1210d)6) and 300.3240a). A fine of \$2,200.00

| FACILITY NAME: | Southpoint Nrsg & Rehab Ctr |
|----------------------------|-----------------------------------|
| FACILITY ADDRESS: | 1010 West 95 th Street |
| FACILITY CITY, STATE, ZIP: | Chicago, IL 60643 |

DOCKET NUMBER: NH 19-C0072

LICENSEE INFO: Southpoint Nursing and Rehabilitation Center, LLC LICENSEE ADDRESS: 240 Fencl Lane LICENSEE CITY, STATE, ZIP: Hillside, IL 60162

Survey Date - 01/08/2019

Type B violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1210a), 300.1210b), 300.1210c), 300.1210d)2)3)6) and 300.3240a). The fine was doubled in this instance in accordance with 300.282i) and j) of the Code due to the violation of the sections of the Code with a high risk designation: 300.1210b), 300.1210d)6) and 300.3240a). A fine of \$2,200.00

| FACILITY NAME: | St. Anthony's Nrsg & Rehab Center |
|----------------------------|--|
| FACILITY ADDRESS: | 767 30 th Street |
| FACILITY CITY, STATE, ZIP: | Rock Island, IL 61201 |
| DOCKET NUMBER: | NH 19-S0043 |
| LICENSEE INFO: | St. Anthony's Nursing & Rehabilitation Center, LLC |
| LICENSEE ADDRESS: | 150 N. Riverside Place, Suite 3000 |
| LICENSEE CITY, STATE, ZIP: | Chicago, IL 60601 |

Survey Date – 12/13/2018

Type Å violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1210b), 300.1210d)3) and 300.3240a). The fine was doubled in this instance in accordance with 300.282i) and j) of the Code due to the violation of the sections of the Code with a high risk designation: 300.1210b) and 300.3240a). A fine of \$25,000.00

Jan - Mar 2019

| FACILITY NAME: | Stephenson Nursing Center |
|----------------------------|---------------------------|
| FACILITY ADDRESS: | 2946 S. Walnut Road |
| FACILITY CITY, STATE, ZIP: | Freeport, IL 61032 |

DOCKET NUMBER: NH 19-S0025

LICENSEE INFO:Stephenson County Board of SupervisorsLICENSEE ADDRESS:50 W. Douglas Street, Suite 1002LICENSEE CITY, STATE, ZIP:Freeport, IL 61032

Survey Date – 12/14/2018

Type A violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1210b), 300.1210d)6) and 300.3240a). The fine was doubled in this instance in accordance with 300.282i) and j) of the Code due to the violation of the sections of the Code with a high risk designation: 300.1210b), 300.1210d)6) and 300.3240a). A fine of \$25,000.00

| FACILITY NAME: | Symphony at Aria |
|----------------------------|--------------------------|
| FACILITY ADDRESS: | 4600 North Frontage Road |
| FACILITY CITY, STATE, ZIP: | Hillside, IL 60162 |

DOCKET NUMBER: NH 19-C0004

LICENSEE INFO: Symphony Aria, LLC LICENSEE ADDRESS: 801 Adlai Stevenson Drive LICENSEE CITY, STATE, ZIP: Springfield, IL 62703

Survey Date – 11/21/2018

Type B violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1210b), 300.1210d)6), 300.1220b)3) and 300.3240a). The fine was doubled in this instance in accordance with 300.282i) and j) of the Code due to the violation of the sections of the Code with a high risk designation: 300.1210b), 300.1210d)6) and 300.3240a). A fine of \$2,200.00

| FACILITY NAME: | Symphony of Bronzeville |
|----------------------------|-------------------------|
| FACILITY ADDRESS: | 3400 South Indiana |
| FACILITY CITY, STATE, ZIP: | Chicago, IL 60616 |
| | |

DOCKET NUMBER: NH 19-C0068

LICENSEE INFO:Symphony Bronzeville Park, LLCLICENSEE ADDRESS:801 Adlai Stevenson DriveLICENSEE CITY, STATE, ZIP:Springfield, IL 62703

Survey Date – 12/28/2018

Type B violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1210b), 300.1210d)5) and 300.3240a). The fine was doubled in this instance in accordance with 300.282i) and j) of the Code due to the violation of the sections of the Code with a high risk designation: 300.1210b), 300.1210d)5) and 300.3240a). A fine of \$2,200.00

| FACILITY NAME: | Symphony of Chicago West |
|----------------------------|--------------------------|
| FACILITY ADDRESS: | 5130 West Jackson Blvd |
| FACILITY CITY, STATE, ZIP: | Chicago, IL 60644 |

DOCKET NUMBER: NH 19-C0012

| LICENSEE INFO: | Symphony Jackson Square, LLC |
|----------------------------|------------------------------|
| LICENSEE ADDRESS: | 801 Adlai Stevenson Drive |
| LICENSEE CITY, STATE, ZIP: | Springfield, IL 62703 |

Survey Date – 12/06/2018

Type B violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1210b), 300.1220b)3) and 300.3240a). The fine was doubled in this instance in accordance with 300.282i) and j) of the Code due to the violation of the sections of the Code with a high risk designation: 300.1210b) and 300.3240a). A fine of \$2,200.00

| FACILITY NAME: | Thomas Herbstritt House |
|----------------------------|-------------------------------|
| FACILITY ADDRESS: | 4003 N RT 1 & 17 P.O. Box 260 |
| FACILITY CITY, STATE, ZIP: | Momence, IL 60954 |

DOCKET NUMBER: NH 19-S0029

LICENSEE INFO: Good Shepherd Manor, Inc. LICENSEE ADDRESS: 4129 N. RTE 1 & 17, P.O. Box 260 LICENSEE CITY, STATE, ZIP: Momence, IL 60954

Survey Date – 11/21/2018

Type B violation for violating one or more of the following sections of the Code: 350.510e), 350.620a), 350.700a), 350.1210b), 350.1220h)j)k), 350.1230b), 350.1230e) and 350.3240a). A fine of \$550.00

| FACILITY NAME: | Tower Hill Healthcare Center |
|----------------------------|-------------------------------------|
| FACILITY ADDRESS: | 759 Kane Street |
| FACILITY CITY, STATE, ZIP: | South Elgin, IL 60177 |

DOCKET NUMBER: NH 19-S0097

LICENSEE INFO: Tower Hill Rehabilitation, LLC LICENSEE ADDRESS: 7434 Skokie Blvd LICENSEE CITY, STATE, ZIP: Skokie, IL 60077

Survey Date – 01/11/2019

Type B violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1210a), 300.1210b), 300.1210d)5), 300.1220b)3) and 300.3240a). The fine was doubled in this instance in accordance with 300.282i) and j) of the Code due to the violation of the sections of the Code with a high risk designation: 300.1210b), 300.1210d)5) and 300.3240a). A fine of \$2,200.00

| FACILITY NAME: | University Nsg & Rehab Center |
|----------------------------|-------------------------------|
| FACILITY ADDRESS: | 1095 University Drive |
| FACILITY CITY, STATE, ZIP: | Edwardsville, IL 62025 |
| DOCKET NUMBER: | NH 19-S0109 NH 19-C0110 |

LICENSEE INFO:University Care Center, LLCLICENSEE ADDRESS:111 North Ottawa StreetLICENSEE CITY, STATE, ZIP:Joliet, IL 60432

Survey Date – 02/05/2019

Type B violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1210b), 300.1210d)6) and 300.3240a). The fine was doubled in this instance in accordance with 300.282i) and j) of the Code due to the violation of the sections of the Code with a high risk designation: 300.1210b), 300.1210d)6) and 300.3240a). A fine of \$2,200.00

| FACILITY NAME: | Uptown Healthcare Center |
|----------------------------|--------------------------|
| FACILITY ADDRESS: | 4920 North Kenmore |
| FACILITY CITY, STATE, ZIP: | Chicago, IL 60640 |

DOCKET NUMBER: NH 19-S0091

| LICENSEE INFO: | Uptown Health Center, LLC |
|----------------------------|--------------------------------|
| LICENSEE ADDRESS: | 5215 Old Orchard Road, Ste 960 |
| LICENSEE CITY, STATE, ZIP: | Skokie, IL 60077 |

Survey Date – 01/17/2019

Type B violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1210b), 300.1210c), 300.1210d)6) and 300.3240a). The fine was doubled in this instance in accordance with 300.282i) and j) of the Code due to the violation of the sections of the Code with a high risk designation: 300.1210b), 300.1210d)6) and 300.3240a). A fine of \$2,200.00

| FACILITY NAME: FACILITY ADDRESS: FACILITY CITY, STATE, ZIP: | <u>Villa at South Holland, The</u> 16300 Wausau Street South Holland, IL 60473 |
|---|--|
| DOCKET NUMBER: | NH 18-C0529 |
| | |

| LICENSEE INFO: | The Villa at South Holland, LLC |
|----------------------------|----------------------------------|
| LICENSEE ADDRESS: | 191 North Wacker Drive, Ste 1800 |
| LICENSEE CITY, STATE, ZIP: | Chicago, IL 60606 |

Survey Date – 11/13/2018

Type B violation of an occurrence for violating one or more of the following sections of the Code: 300.1210d)6). The fine was doubled in this instance in accordance with 300.282i) and j) of the Code due to the violation of the sections of the Code with a high risk designation: 300.1210d)6). A fine of \$2,200.00

| FACILITY NAME: | Villa at South Holland, The |
|----------------------------|-----------------------------|
| FACILITY ADDRESS: | 16300 Wausau Street |
| FACILITY CITY, STATE, ZIP: | South Holland, IL 60473 |

DOCKET NUMBER: NH 19-C0115

| LICENSEE INFO: | The Villa at South Holland, LLC |
|----------------------------|----------------------------------|
| LICENSEE ADDRESS: | 191 North Wacker Drive, Ste 1800 |
| LICENSEE CITY, STATE, ZIP: | Chicago, IL 60606 |

Survey Date – 01/25/2019

Type B violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1210a), 300.1210b), 300.1210d)6) and 300.3240a). The fine was doubled in this instance in accordance with 300.282i) and j) of the Code due to the violation of the sections of the Code with a high risk designation: 300.1210b), 300.1210d)6) and 300.3240a). A fine of \$2,200.00

| FACILITY NAME: | Walker Nursing Home |
|----------------------------|----------------------------|
| FACILITY ADDRESS: | 530 East Beardstown Street |
| FACILITY CITY, STATE, ZIP: | Virginia, IL 62691 |

DOCKET NUMBER: NH 19-S0005

LICENSEE INFO:Walker Nursing Home, Inc.LICENSEE ADDRESS:2319 W. Jefferson StreetLICENSEE CITY, STATE, ZIP:Springfield, IL 62706

Survey Date – 12/05/2018

Type A violation of an occurrence for violating one or more of the following sections of the Code: 300.1210b), 300.1210d)6), 300.1220b)3) and 300.3240a). The fine was doubled in this instance in accordance with 300.282i) and j) of the Code due to the violation of the sections of the Code with a high risk designation: 300.1210b), 300.1210d)6) and 300.3240a). A fine of \$25,000.00

FACILITY NAME:Warren Barr LincolnshireFACILITY ADDRESS:150 Jamestown LaneFACILITY CITY, STATE, ZIP:Lincolnshire, IL 60069

DOCKET NUMBER: NH 19-C0032

LICENSEE INFO:Lincolnshire Living & Rehab Center, LLCLICENSEE ADDRESS:801 Adlai Stevenson DriveLICENSEE CITY, STATE, ZIP:Springfield, IL 62703

Survey Date – 12/06/2018

Type A violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1210b), 300.1210d)2)6) and 300.3240a). The fine was doubled in this instance in accordance with 300.282i) and j) of the Code due to the violation of the sections of the Code with a high risk designation: 300.1210b), 300.1210d)6) and 300.3240a). A fine of \$25,000.00

| FACILITY NAME: | Warren Barr North Shore |
|----------------------------|-------------------------|
| FACILITY ADDRESS: | 2773 Skokie Valley Road |
| FACILITY CITY, STATE, ZIP: | Highland Park, IL 60035 |

DOCKET NUMBER: NH 19-C0040

| LICENSEE INFO: | Warren Barr North Shore, LLC |
|----------------------------|------------------------------|
| LICENSEE ADDRESS: | 801 Adlai Stevenson Drive |
| LICENSEE CITY, STATE, ZIP: | Springfield, IL 62703 |

Survey Date – 12/20/2018

Type A violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1210b), 300.1210d)6), 300.1220b)3) and 300.3240a). The fine was doubled in this instance in accordance with 300.282i) and j) of the Code due to the violation of the sections of the Code with a high risk designation: 300.1210b), 300.1210d)6) and 300.3240a). A fine of \$25,000.00

| FACILITY NAME: | Warren Barr South Loop |
|----------------------------|------------------------|
| FACILITY ADDRESS: | 1725 South Wabash Ave |
| FACILITY CITY, STATE, ZIP: | Chicago, IL 60616 |

DOCKET NUMBER: NH 19-C0017

LICENSEE INFO: South Loop Skilled Nursing Facility, LLC LICENSEE ADDRESS: 3450 Oakton Street LICENSEE CITY, STATE, ZIP: Skokie, IL 60076

Survey Date – 11/13/2019

Type B violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1010h), 300.1210b), 300.1210c), 300.1210d)5) and 300.3240a). The fine was doubled in this instance in accordance with 300.282i) and j) of the Code due to the violation of the sections of the Code with a high risk designation: 300.1210b), 300.1210d)5) and 300.3240a). A fine of \$2,200.00

| FACILITY NAME: FACILITY ADDRESS: FACILITY CITY, STATE, ZIP: | Winchester House 1125 North Milwaukee Avenue Libertyville, IL 60048 |
|---|---|
| DOCKET NUMBER: | NH 18-S0127 |
| LICENSEE INFO: | Transitional Care of Lake County, LLC |

LICENSEE ADDRESS: 1 N. LaSalle Street, Ste 1350 LICENSEE CITY, STATE, ZIP: Chicago, IL 60602

Survey Date – 02/22/2018 FINAL ORDER – Violation Amended/Affirmed, Fine Assessment Reduced and/or Notice of Conditional License Withdrawn.