

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6009237	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 03/12/2025
NAME OF PROVIDER OR SUPPLIER EASTVIEW HEALTHCARE & SENIOR LIVING		STREET ADDRESS, CITY, STATE, ZIP CODE 100 EASTVIEW PLACE SULLIVAN, IL 61951		
(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
S 000	Initial Comments	S 000		
	First Probationary Licensure Survey			
S9999	Final Observations	S9999		
	Statement of Licensure Violations			
	300.670c)d) 300.1220a)2) 300.3260f)h) 300.340c)B)			
	One of Three 300.670c)d)			
	Section 300.670 Disaster Preparedness c) Disaster drills for other than fire shall be held twice annually for each shift of facility personnel. d) Fire drills shall include simulation of the evacuation of residents to safe areas during at least one drill each year on each shift.			
	These REQUIREMENTS are not met as evidenced by:			
	Based on interview and record review, the facility failed to conduct the required number of disaster drills, other than fire, annually, and failed to include the required number of evacuation simulations annually. These failures have the potential to affect all 46 residents residing in the facility.			
	Findings include:			
	On 3/12/25 at 10:30 AM, V5, Maintenance Director, provided a notebook of fire and disaster drills conducted by the facility during the previous year. This notebook included one evacuation drill			

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

Electronically Signed

04/06/25

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S9999	Continued From page 1 conducted on 7/12/24 during the first shift. There were no actual drills included for any disasters other than fire, only one documented 'table-top' scenario discussion with local emergency personnel. On 3/12/25 at 11:15 AM, V1, Administrator, stated that the facility would have to get better at conducting disaster drills, other than fire, and evacuation drills. V1 further stated that V5 had a disaster drill scheduled for next week and there would need to be more scheduled to meet requirements. On 3/12/25 at 11:33 AM, V5 confirmed the facility staff operated with three shifts of personnel. V5 stated he had just learned about the requirements for disaster drills, other than fire, and evacuation drills. V5 stated he would be scheduling the required drills and that it might be difficult on third shift because there was only one nurse and one certified nursing assistant on duty, which would necessitate managerial staff to come to the facility to participate with an evacuation. The facility's (undated) Resident Roster documents 50 current residents of the facility, four of whom were documented as in the hospital. The facility's Census Data Sheet, dated 3/11/25, confirms 46 residents in house. "C" Two of Three 300.1220a)2) Section 300.1220 Supervision of Nursing Services a) Each facility shall have a director of nursing services (DON) who shall be a registered nurse.	S9999		

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S9999	Continued From page 2 2) This person shall be a full-time employee who is on duty a minimum of 36 hours, four days per week. At least 50 percent of this person's hours shall be regularly scheduled between 7 A.M. and 7 P.M. This REQUIREMENT is not met as evidenced by: Based on observation, interview, and record review, the facility failed to employ a Director of Nursing to oversee and supervise the nursing services of the facility. This failure affects all 46 residents residing in the facility. Findings include: On 3/11/25 at 9:15 AM, V1, Administrator, stated she did not have a Director of Nursing employed at that time. V1 stated there was a Licensed Practical Nurse serving as a Resident Care Coordinator. V1 further stated there was a Regional Nurse Consultant Registered Nurse who was at the facility "off and on, here and there," not full time. During the survey period on 3/11/25 and 3/12/25, there was no Registered Nurse observed designated, or serving, as a Director of Nursing. The facility's Nursing Schedule, dated 2/11/25 through 3/16/25, documented four Registered Nurses employed by the facility, none of whom were designated as the Director of Nursing. The facility's (undated) resident roster documents 50 current residents of the facility, four of whom were documented as in the hospital. The facility's Census Data Sheet, dated 3/11/25, confirms 46 residents in house.	S9999		

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S9999	Continued From page 3 "B" Three of Three 300.340c)1)B) 300.3260f) 300.3260h) Section 300.340 Incorporated and Referenced Materials c) The following statutes and State regulations are referenced in this Part: 1) Federal statutes: B) Social Security Act (42 U.S.C. 301 et seq., 1935 et seq. and 1936 et seq.) Title 19 of the federal Social Security Act as now or hereafter amended. (Section 1-127 of the Act) Part A-Determination of Benefits ELIGIBILITY FOR AND AMOUNT OF BENEFITS Definition Of Eligible Individual Sec. 1611. [42 U.S.C. 1382] (a) (1) Each aged, blind, or disabled individual who does not have an eligible spouse and- (1)(B) whose resources, other than resources excluded pursuant to section 1613(a), are not more than (ii) in case such individual has no spouse with whom he is living, the applicable amount determined under paragraph (3)(B), shall be an eligible individual for purposes of this title. (3)(B) The dollar amount referred to in clause (ii) of paragraph (1)(B), shall be \$1,500 prior to January 1, 1985, and shall be increased to \$1,600 on January 1, 1985, to \$1,700 on January 1, 1986, to \$1,800 on January 1, 1987, to \$1,900 on January 1, 1988, and to \$2,000 on January 1, 1989.	S9999		

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S9999	Continued From page 4 Section 300.3260 Resident's Funds f) The facility shall purchase a surety bond, or otherwise provide assurance satisfactory to the Departments of Public Health and Insurance that all residents' personal funds deposited with the facility are secure against loss, theft, and insolvency. (Section 2-201(5) of the Act) h) The facility shall deposit any funds received from a resident in excess of \$100 in an interest bearing account insured by agencies of, or corporations chartered by, the State or federal government. The account shall be in a form which clearly indicates that the facility has only a fiduciary interest in the funds and any interest from the account shall accrue to the resident. (Section 2-201(7) of the Act) These REQUIREMENTS are not met as evidenced by: Based on observation, interview, and record review, the facility failed to maintain a surety bond in an amount sufficient to secure all resident funds managed by the facility (R1 through R34), failed to deposit all resident funds over \$100.00 in an interest bearing account (R2 and R34), and failed to ensure each resident's trust fund account did not exceed the Social Security Resource limit (R4, R7, R9, R15, R18, R22, R25, R28, R29 and R31). These failures have the potential to affect 34 residents (R1 through R34) having personal funds managed by the facility on a sample list of 34. Findings include: 1. The facility's (revised) Funds Balance Report dated 3/12/25 documents R1, and R3 through R33, have funds on deposit in the facility's	S9999		

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S9999	Continued From page 5 resident trust fund account. This balance sheet documents the total of funds in the resident trust was \$42,171.58. R2 and R34 were not listed on this balance sheet. The facility's Long-Term Care Facility Resident Surety Bond number *****8665, dated as initiated 11/1/24, provided by V1, Administrator, documents the facility holds this surety bond in the amount of \$40,000.00 for the protection of the resident trust funds. On 3/11/25 at 3:30 PM, V6, Business Office Manager stated she has nothing to do with the surety bond, that the corporate office handles the procurement of the surety bond. V6 stated she would confer with V1, Administrator, and contact the corporate office to obtain a higher amount of surety bond. On 3/12/25 at 1:02 PM, V1, Administrator, stated that when the new ownership company purchased the facility in November of 2024, the facility census was typically around 32 or 33 residents and the surety bond was sufficient. V1 further stated that now there are typically around 50 residents and the trust fund has grown past the surety bond amount. V1 continued to state that when the former ownership company sold the facility, there were some errors found and corrected in the trust fund that likewise raised the dollar amount of the trust fund. V1 concluded by stating the corporate management had been contacted to obtain a new surety bond of \$43,000.00. On 3/11/25 at 1:32 PM, R1 stated she had money in the trust fund and did not want to lose it. On 3/11/25 at 12:58 PM, R2 stated he would be	S9999		

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S9999	Continued From page 6 very upset if his money came up missing and he couldn't get it back. As of the survey exit on 3/12/25 at 3:32 PM, neither V1 nor V6 provided a new surety bond in a higher amount. 2. On 3/11/25 at 12:58 PM, R2 stated he has money in the facility trust fund. R2 further stated he had facility staff utilize some of his money to do shopping for himself and his spouse (R34), but felt like some of his money was not accounted for properly such as change not being returned to his account, but it couldn't be proven. On 3/11/25 at 3:30 PM, V6, Business Office Manager, stated that R2 does not have money in the resident trust account, but rather has 163 dollars in cash kept in the office. V6 further stated she keeps an accounting of all R2's expenditures. On 3/12/25 at 2:50 PM, V6 provided an envelope with R2 and R34's name on it and stated this is how R2's money is accounted for, but this was not her process since she started at the facility in January 2025. This envelope had a record of expenditures recorded on the front of the envelope starting from the right hand side of the envelope, consisting of 3 columns of transactions going from right to left. This envelope documented an initial amount of \$1,000.00 with a date of 12/11/2024. The amounts on this envelope were handwritten documenting nine subtractions resulting in an amount of \$164.43, as of 3/7/25. Of these nine documented transactions (subtractions), only seven were signed (or initialed) by R2 or his spouse (R34), and only two documented what the money was used for, a hair wash for \$5.00 on 1/23/25, and \$70.00 cash on 1/24/25. Additionally, these two	S9999		

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S9999	Continued From page 7 subtractions on 1/23/25 and 1/24/25 were the only two with a documented date until the final amount listed on 3/7/25 of \$164.43. The second column (middle column) had an amount documented last at the bottom of the column as \$373.43, but the amount carried over to the start of the third column (last column on the left side of the envelope) had been changed by writing over the original recorded amount of \$373.43 and was documented (changed) as \$363.43, leaving \$10.00 unaccounted for. The subsequent subtraction was documented as \$100.00 and the resultant total documented, likewise changed by writing over the original entry, as \$264.43, which added a dollar to the incorrect entry. V6 proceeded to physically count the money inside this envelope which totaled \$164.70. V6 stated it was all correct except for the change. V6 confirmed R2's payer status was Medicaid (Title 19) pending, and R34 was already qualified for Medicaid. On 3/12/24 at 1:02 PM, V1, Administrator stated she was aware that amounts of resident's money over \$100.00 had to be kept in an interest bearing account. V1 stated that under the previous ownership company, each of the facilities kept resident trust accounts at local banks so they could just go up to the bank and deposit resident's money. V1 further stated that the new (current) ownership company handles all of the resident trust fund responsibilities at the corporate level. V1 added that herself and V6 could not figure out how to get cash to the corporate office to deposit R2 and R34's money in the bank. 3. The facility's Funds Balance Report (revised) for 3/12/25 documents residents R4, R7, R9, R15, R18, R22, R25, R28, R29 and R31 each	S9999		

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S9999	Continued From page 8 had a balance over the allowable \$2,000.00 Social Security Resource limit as follows: R4, \$3,416.19; R7, \$2,423.03; R9, \$2,537.85; R15, \$4,081.03; R18, \$2,076.16; R22, \$3,142.04; R25, \$2,310.07; R28, \$2,309.89; R29, \$2,647.22; R31, \$3,876.48. On 3/11/25 at 3:30 PM, V6, Business Office Manager, confirmed each of the ten residents (R4, R7, R9, R15, R18, R22, R25, R28, R29 and R31) were Medicaid (Title 19) recipients. V6 stated she had started as the Business Office Manager in January of 2025 and was just provided an updated balance sheet on the morning of 3/11/25 and informed V1, Administrator, that some of these ten residents need to have some clothes bought for them to reduce their balance. On 3/11/25 at 3:50 PM, V1, Administrator, questioned if the resource limit had been changed due to the increase in the resident monthly cash allowance from \$30.00 to \$60.00. "B"	S9999		