

Illinois State Department of Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTIONS		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 0040915		(X2) MULTIPLE CONSTRUCTION A. BUILDING B. WING		(X3) DATE SURVEY COMPLETED 07/08/2025	
NAME OF PROVIDER OR SUPPLIER FAIR OAKS HEALTH CARE CENTER				STREET ADDRESS, CITY, STATE, ZIP CODE 471 TERRA COTTA AVENUE , CRYSTAL LAKE, Illinois, 60014			
(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) COMPLETION DATE	
S0000	Initial Comments		S0000			08/01/2025	
	Annual Licensure and Certification						
S9999	Final Observations		S9999			08/01/2025	
	Statement of Licensure Violations:						
	300.610a)						
	300.1010h)						
	300.1210b)						
	300.1210d)3)						
	Section 300.610 Resident Care Policies						
	a) The facility shall have written policies and procedures governing all services provided by the facility. The written policies and procedures shall be formulated by a Resident Care Policy Committee consisting of at least the administrator, the advisory physician or the medical advisory committee, and representatives of nursing and other services in the facility. The policies shall comply with the Act and this Part. The written policies shall be followed in operating the facility and shall be reviewed at least annually by this committee, documented by written, signed and dated minutes of the meeting.						
	Section 300.1010 Medical Care Policies						
	h) The facility shall notify the resident's physician of any accident, injury, or significant change in a resident's condition that threatens the health, safety or welfare of a resident, including, but not limited to, the presence of incipient or manifest decubitus ulcers or a weight loss or gain of five percent or more within a period of 30 days. The facility shall obtain and record the physician's plan of care for the care or treatment of such accident, injury or change in condition at the time of notification.						
	Section 300.1210 General Requirements for Nursing and Personal Care						

Office of Primary Care and Health Systems Management

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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S9999	<p>Continued from page 1</p> <p>b) The facility shall provide the necessary care and services to attain or maintain the highest practicable physical, mental, and psychological well-being of the resident, in accordance with each resident's comprehensive resident care plan. Adequate and properly supervised nursing care and personal care shall be provided to each resident to meet the total nursing and personal care needs of the resident.</p> <p>d) Pursuant to subsection (a), general nursing care shall include, at a minimum, the following and shall be practiced on a 24-hour, seven-day-a-week basis:</p> <p>3) Objective observations of changes in a resident's condition, including mental and emotional changes, as a means for analyzing and determining care required and the need for further medical evaluation and treatment shall be made by nursing staff and recorded in the resident's medical record.</p> <p>Based on interview and record review the facility failed to obtain and monitor resident weights for residents (R2, R144) at risk for weight loss. The facility failed to report a resident's (R2) poor appetite and decreased oral intake to the resident's nurse practitioner. These failures resulted in R2 sustaining a 6.3% weight loss in one month and R144 sustaining a 6.2% significant weight loss in one week. These failures apply to 2 of 4 residents (R2, R144) reviewed for weight loss in the sample of 13.</p> <p>The findings include:</p> <p>1. R2's admission record showed R2 was admitted to the facility on 5/27/25 with diagnoses including traumatic subarachnoid hemorrhage (brain bleed), Alzheimer's disease, dysphagia, and protein-calorie malnutrition.</p> <p>R2's physician order dated 5/27/25 showed R2 was to be weighed once a week on Wednesday, from 5/27/25-6/24/25.</p> <p>R2's dietary note dated 5/28/25 showed R2 was assessed by V6 Registered Dietician (RD). The note showed R2's admission weight was "pending" as R2 had yet to be weighed in the facility. The note showed R2 was at risk for weight loss. The note showed facility staff were to monitor R2's food intake, weights, and lab work.</p>		S9999				

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S9999	<p>Continued from page 2</p> <p>R2's weight record printed 7/6/25 showed no admission weight had ever been obtained on R2 in the facility. The record showed R2's weight was not obtained on 6/4/25, 6/18/25, or 6/25/25. The record showed R2's first documented weight, on 6/11/25, as 112.2 pounds (lbs).</p> <p>On 7/7/25 at 8:58 AM, R2 was weighed by V9 Certified Nursing Assistant (CNA) with this surveyor present. The weight scale showed R2 weighed 105.1 lbs. This showed R2 sustained a significant weight loss of 6.3 % (7.1 lbs) in one month (6/11/25-7/7/25).</p> <p>On 7/7/25 at 8:20 AM, V3 Director of Nursing (DON) residents are monitored for weight loss by monitoring a resident's weights and oral intake. V3 stated each resident is to be weighed upon admission to the facility and then weekly or daily as ordered by a physician.</p> <p>On 7/7/25 at 9:14 AM, V6 Registered Dietician (RD) stated, "(R2) is at risk for weight loss. I saw her when she was first admitted but she had not been weighed in the facility yet at that time. She was supposed to be weighed upon admission and then once a week."</p> <p>R2's meal (oral) intake records dated 6/11/25-7/7/25 were reviewed with V10 Nurse Practitioner (NP). The records showed multiple entries of R2 either not eating any of her meals or eating only "1-25%" of her meals. V10 NP stated she was never notified by the facility that R2 was not eating or had a poor appetite. V10 stated, "I should have been notified that (R2) wasn't eating. I was just told one hour ago that she had lost weight. I wasn't aware that she was not being weighed. Every resident needs to be weighed upon admission to the facility, so we have a baseline weight to monitor for weight loss or gain."</p> <p>2. R144's admission record showed R144 was admitted to the facility on 6/30/25 with diagnoses of a recent fall, fracture of lumbar vertebrae, Parkinson's disease, and muscle wasting/atrophy.</p> <p>R144's facility Admission Notification record dated 6/30/25 showed R144's hospital discharge weight as 120 lbs.</p>		S9999				

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S9999	<p>Continued from page 3</p> <p>R144's dietary note dated 7/2/25 showed R144 was assessed by V6 Registered Dietician (RD). The note showed R144's admission weight was "pending" as R144 had yet to be weighed in the facility. The note showed R144 was at risk for weight loss and malnutrition.</p> <p>R144's weight record printed 7/6/25 showed no admission weight had ever been obtained on R144 in the facility. R144's first recorded weight on 7/6/25 was 113 lbs.</p> <p>On 7/7/25 at 9:05 AM, R144 was weighed by V5 CNA with this surveyor present. The weight scale showed R144 weighed 112.6 lbs. This showed R144 sustained a significant weight loss of 6.2% (7.4 lbs) in one week.</p> <p>On 7/7/25 at 9:15 AM, V6 Registered Dietician stated she had assessed R144 upon her admission to the facility. V6 stated, "(R144) is at risk for weight loss. She should have been weighed upon admission to the facility. I am not sure what her hospital weight was."</p> <p>The facility's Weighing and Measuring the Resident policy dated March 2011 showed, "The purposes of this procedure are to determine the resident's weight and height, to provide a baseline and an ongoing record of the resident's body weight as an indicator of nutritional status and medical condition of the resident ..."</p> <p>The facility's Weight Assessment and Intervention policy dated March 2022 showed, "Residents weights are monitored for undesirable or unintended weight loss or gain ... Residents are weighed upon admission and at intervals established by the interdisciplinary team ..." The policy defined "significant unplanned and undesirable weight loss" as a "5% weight loss in one month is significant (weight loss); greater than 5% is severe."</p> <p>(B)</p>	S9999					