

Quarterly Report

April - June 2018

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: [Accolade Healthcare of Pontiac](#)
FACILITY ADDRESS: 300 West Lowell
FACILITY CITY, STATE, ZIP: Pontiac, IL 61764

DOCKET NUMBER: NH 18-S0151

LICENSEE INFO: Accolade Healthcare of Pontiac, LLC
LICENSEE ADDRESS: 1900 E. Golf Rd, Ste 950A
LICENSEE CITY, STATE, ZIP: Schaumburg, IL 60173

Survey Date – 03/21/2018

Type B violation of an occurrence for violating one or more of the following sections of the Code: 300.1010h). A fine of \$1,100.00.

FACILITY NAME: [Accolade Healthcare of Pontiac](#)
FACILITY ADDRESS: 300 West Lowell
FACILITY CITY, STATE, ZIP: Pontiac, IL 61764

DOCKET NUMBER: NH 18-S0235

LICENSEE INFO: Accolade Healthcare of Pontiac, LLC
LICENSEE ADDRESS: 1900 E. Golf Rd, Ste 950A
LICENSEE CITY, STATE, ZIP: Schaumburg, IL 60173

Survey Date – 04/25/2018

Type A violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1010h), 300.1210d)1), 300.1210d)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: 300.3240a). A fine of \$25,000.00.

FACILITY NAME: [Alden Estates of Orland Park](#)
FACILITY ADDRESS: 16450 South 97th Avenue
FACILITY CITY, STATE, ZIP: Orland Park, IL 60462

DOCKET NUMBER: NH 18-C0197

LICENSEE INFO: Alden-Orland Park Rehabilitation and Health Care Center, Inc.
LICENSEE ADDRESS: 4200 W. Peterson Avenue, Ste 140
LICENSEE CITY, STATE, ZIP: Chicago, IL 60646

Survey Date – 04/10/2018

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)4)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

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FACILITY NAME: [Aledo Rehab & Health Care Ctr](#)
FACILITY ADDRESS: 304 S.W. 12th 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: Chicago, IL 61231

Survey Date – 05/03/2018

Type AA violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1030a)1), 300.1030a)2), 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 \$50,000.00.

FACILITY NAME: Aperion Care Bloomington
FACILITY ADDRESS: 1509 North Calhoun Street
FACILITY CITY, STATE, ZIP: Bloomington, IL 61701

DOCKET NUMBER: NH 17-C0446

LICENSEE INFO: Aperion Care Bloomington, LLC
LICENSEE ADDRESS: 208 South LaSalle Street, Suite 814
LICENSEE CITY, STATE, ZIP: Bloomington, IL 61701

Survey Date – 08/24/2017

FINAL ORDER – Violation Amended/Affirmed, Fine Assessment Reduced and/or Notice of Conditional License Withdrawn.

FACILITY NAME: Aperion Care of Bloomington
FACILITY ADDRESS: 1509 North Calhoun Street
FACILITY CITY, STATE, ZIP: Bloomington, IL 61701

DOCKET NUMBER: NH 18-C0043

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

Survey Date – 12/06/2017

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

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FACILITY NAME: [Aperion Care Capitol](#)
FACILITY ADDRESS: 555 West Carpenter Road
FACILITY CITY, STATE, ZIP: Springfield, IL 62702

DOCKET NUMBER: NH 18-C0110

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

Survey Date – 03/07/2018

Type A violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1210b), 300.1210d)3), 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: [Aperion Care Captiol](#)
FACILITY ADDRESS: 555 West Carpenter Road
FACILITY CITY, STATE, ZIP: Springfield, IL 62702

DOCKET NUMBER: NH 18-S0200
NH 18-C0201

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

Survey Date – 04/20/2018

Type B 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 \$2,200.00.

FACILITY NAME: Aperion Care Fairfield
FACILITY ADDRESS: 305 Northwest 11th Street
FACILITY CITY, STATE, ZIP: Fairfield, IL 62837

DOCKET NUMBER: NH 17-S0443

LICENSEE INFO: Way-Fair Nursing & Rehabilitation Center, LLC
LICENSEE ADDRESS: 8170 McCormick Boulevard, Suite 219
LICENSEE CITY, STATE, ZIP: Skokie, IL 62837

Survey Date – 09/01/2017

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

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FACILITY NAME: [Aperion Care International](#)
FACILITY ADDRESS: 4815 South Western Avenue
FACILITY CITY, STATE, ZIP: Chicago, IL 60609

DOCKET NUMBER: NH 18-C0134

LICENSEE INFO: International Nursing & Rehab Center, LLC
LICENSEE ADDRESS: 208 S. LaSalle St, Ste 814
LICENSEE CITY, STATE, ZIP: Chicago, IL 60604

Survey Date – 03/02/2018

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)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.

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.

Total Fines \$4,400.00.

FACILITY NAME: Aperion Care Jacksonville
FACILITY ADDRESS: 1021 North Church Street
FACILITY CITY, STATE, ZIP: Jacksonville, IL 62650

DOCKET NUMBER: NH 17-C0462

LICENSEE INFO: North Church Nursing & Rehab, LLC
LICENSEE ADDRESS: 208 South LaSalle Street, Suite 814
LICENSEE CITY, STATE, ZIP: Chicago, IL 60604

Survey Date – 08/29/2017

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

FACILITY NAME: Aperion Care Jacksonville
FACILITY ADDRESS: 1021 North Church Street
FACILITY CITY, STATE, ZIP: Jacksonville, IL 62650

DOCKET NUMBER: NH 17-S0585

LICENSEE INFO: North Church Nursing & Rehab, LLC
LICENSEE ADDRESS: 208 South LaSalle Street, Suite 814
LICENSEE CITY, STATE, ZIP: Chicago, IL 60604

Survey Date – 10/31/2017

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

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FACILITY NAME: [Aperion Care Morton Villa](#)
FACILITY ADDRESS: 190 East Queenwood Road
FACILITY CITY, STATE, ZIP: Morton, IL 61550

DOCKET NUMBER: NH 18-C0109

LICENSEE INFO: Aperion Care Morton Villa, LLC
LICENSEE ADDRESS: 208 S. LaSalle St, Ste 814
LICENSEE CITY, STATE, ZIP: Chicago, IL 60604

Survey Date – 03/13/2018

Type A violation of an occurrence for violating one or more of the following sections of the Code: 300.1210b), 300.1210d)6), 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: Aperion Care Peoria Heights
FACILITY ADDRESS: 1629 Gardner Lane
FACILITY CITY, STATE, ZIP: Peoria Heights, IL 61616

DOCKET NUMBER: NH 18-C0074

LICENSEE INFO: Aperion Care Peoria Heights, LLC
LICENSEE ADDRESS: 4655 West Chase Avenue
LICENSEE CITY, STATE, ZIP: Lincolnwood, IL 60712

Survey Date – 01/31/2018

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

FACILITY NAME: [Arbour Health Care Center](#)
FACILITY ADDRESS: 1512 West Fargo
FACILITY CITY, STATE, ZIP: Chicago, IL 60626

DOCKET NUMBER: NH 18-S0188

LICENSEE INFO: MS Registered Agent Services
LICENSEE ADDRESS: 191 N. Wacker Dr, Ste 1800
LICENSEE CITY, STATE, ZIP: Chicago, IL 60606

Survey Date – 04/12/2018

Type B violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1210a), 300.1210b), 300.1210c), 300.1210d)2)3)4)A)5) and 300.3220f). 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)5). A fine of \$2,200.00.

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FACILITY NAME: [Assisi Health CC at Clare Oaks](#)
FACILITY ADDRESS: 829 Carillon Dr
FACILITY CITY, STATE, ZIP: Bartlett, IL 60103

DOCKET NUMBER: NH 18-S0212

LICENSEE INFO: Clare Oaks
LICENSEE ADDRESS: 801 Adlai Stevenson Drive
LICENSEE CITY, STATE, ZIP: Springfield, IL 62703

Survey Date – 04/19/2018

Type B violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1210b), 300.1210d)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: [Atrium Health Care Center](#)
FACILITY ADDRESS: 1425 West Estes Avenue
FACILITY CITY, STATE, ZIP: Chicago, IL 60626

DOCKET NUMBER: NH 18-S0177

LICENSEE INFO: Atrium Health Care Center, LTD
LICENSEE ADDRESS: 191 N. Wacker Dr., Ste 1800
LICENSEE CITY, STATE, ZIP: Chicago, IL 60606

Survey Date – 03/29/2018

Type B violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1210a), 300.1210b), 300.1210c), 300.1210d)1), 300.1210d)2), 300.1210d)5), 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), 300.1210d)5) and 300.3240a). A fine of \$2,200.00

FACILITY NAME: [Autumn Meadows of Cahokia](#)
FACILITY ADDRESS: 2 Annabel Court
FACILITY CITY, STATE, ZIP: Cahokia, IL 62206

DOCKET NUMBER: NH 18-C0178

LICENSEE INFO: Cahokia Nursing & Rehabilitation Center, Inc.
LICENSEE ADDRESS: 7434 North Skokie Boulevard
LICENSEE CITY, STATE, ZIP: Skokie, IL 60077

Survey Date – 04/09/2018

Type B violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1210b), 300.1210d)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.

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FACILITY NAME: [Berkeley Nsg & Rehab Center](#)
FACILITY ADDRESS: 6909 West North Avenue
FACILITY CITY, STATE, ZIP: Oak Park, IL 60302

DOCKET NUMBER: NH 18-C0145

LICENSEE INFO: Berkeley Nursing and Rehabilitation Center, LLC
LICENSEE ADDRESS: 321 N. Clark St, Ste 2800
LICENSEE CITY, STATE, ZIP: Chicago, IL 606540

Survey Date – 03/15/2018

Type B violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1210b), 300.1210d)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: [Bria of Cahokia](#)
FACILITY ADDRESS: 3354 Jerome Lane
FACILITY CITY, STATE, ZIP: Cahokia, IL 62206

DOCKET NUMBER: NH 18-S0224

LICENSEE INFO: Atrium Hlth Care & Rehab Ctr of Cahokia, LLC
LICENSEE ADDRESS: 465 Central Avenue, #100
LICENSEE CITY, STATE, ZIP: Northfield, IL 60093

Survey Date – 04/11/2018

Type B violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1210b), 300.1210c), 300.3240a) 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: 300.1210b) and 300.3240a). A fine of \$2,200.00.

FACILITY NAME: [Bria of Forest Edge](#)
FACILITY ADDRESS: 8001 South Western Avenue
FACILITY CITY, STATE, ZIP: Chicago, IL 60620

DOCKET NUMBER: NH 18-S0181

LICENSEE INFO: Forest Edge Healthcare & Rehabilitation Center, LLC
LICENSEE ADDRESS: 5151 Church Street
LICENSEE CITY, STATE, ZIP: Skokie, IL 60077

Survey Date – 04/04/2018

Type B violation of an occurrence for violating one or more of the following sections of the Code: 300.1210b), 300.1210d)6), 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), 300.1210d)6) and 300.3240a). A fine of \$2,200.00.

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FACILITY NAME: [Bria of Westmont](#)
FACILITY ADDRESS: 6501 S. Cass Avenue
FACILITY CITY, STATE, ZIP: Westmont, IL 60559

DOCKET NUMBER: NH 18-C0157

LICENSEE INFO: Westmont Nursing and Rehabilitation Center, LLC
LICENSEE ADDRESS: 5151 Church Street
LICENSEE CITY, STATE, ZIP: Skokie, IL 60077

Survey Date – 03/02/2018

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: [Bria of Westmont](#)
FACILITY ADDRESS: 6501 S. Cass Avenue
FACILITY CITY, STATE, ZIP: Westmont, IL 60559

DOCKET NUMBER: NH 18-C0168

LICENSEE INFO: Westmont Nursing and Rehabilitation Center, LLC
LICENSEE ADDRESS: 5151 Church Street
LICENSEE CITY, STATE, ZIP: Skokie, IL 60077

Survey Date – 03/09/2018

Type A violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1210b), 300.1210c)1)2), 300.1630c) 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)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.

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FACILITY NAME: [Bridge Care Suites, The](#)
FACILITY ADDRESS: 3089 Old Jacksonville Road
FACILITY CITY, STATE, ZIP: Springfield, IL 62704

DOCKET NUMBER: NH 18-C0195

LICENSEE INFO: OJCC, LLC
LICENSEE ADDRESS: 208 S. LaSalle St, Ste 814
LICENSEE CITY, STATE, ZIP: Chicago, IL 60604

Survey Date – 04/05/2018

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), 300.2210a), 300.2210b)1) 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: [Bridgeway Senior Living](#)
FACILITY ADDRESS: 111 East Washington Street
FACILITY CITY, STATE, ZIP: Bensenville, IL 60106

DOCKET NUMBER: NH 18-C0114

LICENSEE INFO: Bridgeway Senior Living, LLC
LICENSEE ADDRESS: 5750 Old Orchard Road, Ste 420
LICENSEE CITY, STATE, ZIP: Skokie, IL 60077

Survey Date – 02/08/2018

Type B violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.620a), 300.1210b), 300.3300e)1)2)3)4)5), 300.3300g) 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: [Bridgeway Senior Living](#)
FACILITY ADDRESS: 111 East Washington Street
FACILITY CITY, STATE, ZIP: Bensenville, IL 60106

DOCKET NUMBER: NH 18-S0152

LICENSEE INFO: Bridgeway Senior Living, LLC
LICENSEE ADDRESS: 5750 Old Orchard Rd, Ste 420
LICENSEE CITY, STATE, ZIP: Skokie, IL 60077

Survey Date – 03/01/2018

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.

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FACILITY NAME: [Brookdale Hoffman Estates Golf Road](#)
FACILITY ADDRESS: 2150 West Golf Road
FACILITY CITY, STATE, ZIP: Hoffman Estates, IL 60169

DOCKET NUMBER: NH 18-S0247

LICENSEE INFO: S-H OPCP Hoffman Estates, LLC
LICENSEE ADDRESS: 801 Adlai Stevenson Drive
LICENSEE CITY, STATE, ZIP: Springfield, IL 62703

Survey Date – 05/25/2018

Type C violation of an occurrence for violating one or more of the following sections of the Code: 330.790a) and 330.790c)1). This instance in accordance with 330.282f) i) and j) of the Code is assessed a fine due to the violation of the sections of the Code with a high risk designation: 330.790). A fine of \$500.00.

FACILITY NAME: [Brookdale Plaza Lisle SNF](#)
FACILITY ADDRESS: 1800 Robin Lane
FACILITY CITY, STATE, ZIP: Lisle, IL 60532

DOCKET NUMBER: NH 18-C0173

LICENSEE INFO: Brookdale Living Communities of Illinois – DNC, LLC
LICENSEE ADDRESS: 801 Adlai Stevenson Drive
LICENSEE CITY, STATE, ZIP: Springfield, IL 62703

Survey Date – 04/05/2018

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), 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: Cedar Ridge Health & Rehab Ctr
FACILITY ADDRESS: One Perryman Street
FACILITY CITY, STATE, ZIP: Lebanon, IL 62254

DOCKET NUMBER: NH 18-S0047

LICENSEE INFO: Covenant Care Midwest, Inc.
LICENSEE ADDRESS: 2015 West Main Street, #111
LICENSEE CITY, STATE, ZIP: Carbondale, IL 62901

Survey Date – 01/05/2018

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

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FACILITY NAME: [Chicago Ridge Nursing Home](#)
FACILITY ADDRESS: 10602 Southwest Highway
FACILITY CITY, STATE, ZIP: Chicago Ridge, IL 60415

DOCKET NUMBER: NH 18-S0196

LICENSEE INFO: BM of Chicago Ridge, LLC
LICENSEE ADDRESS: 10602 Southwest Highway
LICENSEE CITY, STATE, ZIP: Lincolnwood, IL 60712

Survey Date – 04/18/2018

Type C violation of an occurrence for violating one or more of the following sections of the Code: 300.690a)b)c). This instance in accordance with 300.282f) and j) of the Code is assessed a fine due to the violation of the sections of the Code with a high risk designation: 300.690). A fine of \$500.00.

FACILITY NAME: [Christian Buehler Mem Home](#)
FACILITY ADDRESS: 3415 North Sheridan Road
FACILITY CITY, STATE, ZIP: Peoria, IL 61604

DOCKET NUMBER: NH 18-C0129

LICENSEE INFO: Christian Buehler Memorial
LICENSEE ADDRESS: 3415 North Sheridan Road
LICENSEE CITY, STATE, ZIP: Peoria, IL 61604

Survey Date – 03/06/2018

Type B violation of an occurrence for violating one or more of the following sections of the Code: 300.3220f. A fine of \$1,100.00.

FACILITY NAME: [Christian Nursing Home](#)
FACILITY ADDRESS: 1507 7th Street
FACILITY CITY, STATE, ZIP: Lincoln, IL 62656

DOCKET NUMBER: NH 18-C0131

LICENSEE INFO: Christian Homes, Inc.
LICENSEE ADDRESS: 208 S. LaSalle St, Ste 814
LICENSEE CITY, STATE, ZIP: Chicago, IL 60604

Survey Date – 03/07/2018

Type AA violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1010h), 300.1210a), 300.1210b), 300.1210c), 300.1620a) 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 \$50,000.00.

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FACILITY NAME: Citadel Care Center-Elgin
FACILITY ADDRESS: 180 South State Street
FACILITY CITY, STATE, ZIP: Elgin, IL 60123

DOCKET NUMBER: NH 17-C0581

LICENSEE INFO: Citadel Care Center – Elgin, LLC
LICENSEE ADDRESS: 191 North Wacker Drive, Suite 1800
LICENSEE CITY, STATE, ZIP: Chicago, IL 60606

Survey Date – 11/02/2017

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

FACILITY NAME: [Country Health](#)
FACILITY ADDRESS: 2304 C R 3000 N
FACILITY CITY, STATE, ZIP: Gifford, IL 61847

DOCKET NUMBER: NH 18-C0105

LICENSEE INFO: Country Health, Inc.
LICENSEE ADDRESS: 115 W. Jefferson St, Ste 401
LICENSEE CITY, STATE, ZIP: Bloomington, IL 61701

Survey Date – 03/28/2018

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), 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.

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FACILITY NAME: [Courtyard Healthcare Center](#)
FACILITY ADDRESS: 3601 South Harlem Avenue
FACILITY CITY, STATE, ZIP: Berwyn, IL 60402

DOCKET NUMBER: NH 18-C0175
NH 18-S0176

LICENSEE INFO: Courtyard Healthcare Center, LLC
LICENSEE ADDRESS: 5750 Old Orchard Rd, Ste 420
LICENSEE CITY, STATE, ZIP: Skokie, IL 60077

Survey Date – 03/22/2018

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)1), 300.1210d)2), 300.1210d)3), 300.1210d)5), 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), 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), 300.1210a), 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.

Total Fines of \$4,400.00.

FACILITY NAME: [Covenant Health Care Center Batavia](#)
FACILITY ADDRESS: 831 North Batavia Avenue
FACILITY CITY, STATE, ZIP: Batavia, IL 60510

DOCKET NUMBER: NH 18- C0199

LICENSEE INFO: Covenant Health Care Center, Inc.
LICENSEE ADDRESS: 801 Adlai Stevenson Drive
LICENSEE CITY, STATE, ZIP: Springfield, IL 62703

Survey Date – 03/29/2018

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)7) 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.

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FACILITY NAME: [Danville Care Center](#)
FACILITY ADDRESS: 1701 North Bowman
FACILITY CITY, STATE, ZIP: Danville, IL 61832

DOCKET NUMBER: NH 18-C0135

LICENSEE INFO: Danville Care Center, Ltd
LICENSEE ADDRESS: 5750 Old Orchard Rd, Ste 420
LICENSEE CITY, STATE, ZIP: Skokie, IL 60077

Survey Date – 02/27/2018

Type B violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1010h), 300.1010i), 300.1210a), 300.1210b), 300.1210c), 300.1210d)2), 300.1210d)5) and 300.2040c). 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)5). A fine of \$2,200.00.

FACILITY NAME: [Edwardsville Nsg & Rehab Ctr](#)
FACILITY ADDRESS: 401 St. Mary Drive
FACILITY CITY, STATE, ZIP: Edwardsville, IL 62025

DOCKET NUMBER: NH 18-C0234

LICENSEE INFO: Edwardsville Care Center, LLC
LICENSEE ADDRESS: 111 North Ottawa Street
LICENSEE CITY, STATE, ZIP: Joliet, IL 60432

Survey Date – 04/19/2018

Type B 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 \$2,200.00.

FACILITY NAME: [Fair Oaks Rehab & HCC](#)
FACILITY ADDRESS: 1515 Blackhawk
FACILITY CITY, STATE, ZIP: South Beloit, IL 61080

DOCKET NUMBER: NH 18- C0189

LICENSEE INFO: Fair Oaks Rehabilitation and Health Care Center, LLC
LICENSEE ADDRESS: 412 E. Lawrence
LICENSEE CITY, STATE, ZIP: Springfield, IL 62703

Survey Date – 04/11/2018

Type A violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.690b)c), 300.1010h)i), 300.1210b), 300.1210d)3)6), and 300.3240a)b)d). 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)d). A fine of \$25,000.00.

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FACILITY NAME: [Farmer City Rehab & Health Ctr](#)
FACILITY ADDRESS: 404 Brookview Drive
FACILITY CITY, STATE, ZIP: Farmer City, IL 61842

DOCKET NUMBER: NH 18-C0231

LICENSEE INFO: Petersen Health Care – Farmer City, LLC
LICENSEE ADDRESS: 830 West Trailcreek Drive
LICENSEE CITY, STATE, ZIP: Peoria, IL 61614

Survey Date – 05/14/2018

Type B violation of an occurrence for violating one or more of the following sections of the Code: 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: 300.3240a), 300.3240d) and 300.3240e). A fine of \$2,200.00.

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

DOCKET NUMBER: NH 17-C0333

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

Survey Date – 06/06/2017

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

FACILITY NAME: [Friendship Skilled Nsg & Rehab](#)
FACILITY ADDRESS: 826 North High Street
FACILITY CITY, STATE, ZIP: Carlinville, IL 62626

DOCKET NUMBER: NH 18-C0154

LICENSEE INFO: Covenant Care Midwest, Inc.
LICENSEE ADDRESS: 2015 W Main Street, #111
LICENSEE CITY, STATE, ZIP: Carbondale, IL 62901

Survey Date – 03/12/2018

Type A 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 \$25,000.00.

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FACILITY NAME: Friendship Skilled Nsg & Rehab
FACILITY ADDRESS: 826 North High Street
FACILITY CITY, STATE, ZIP: Carlinville, IL 62626

DOCKET NUMBER: NH 18-C0154

LICENSEE INFO: Covenant Care Midwest, Inc.
LICENSEE ADDRESS: 2015 W Main Street, #111
LICENSEE CITY, STATE, ZIP: Carbondale, IL 62901

Survey Date – 03/12/2018

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

FACILITY NAME: [Generations at McKinley Place](#)
FACILITY ADDRESS: 2530 North Monroe
FACILITY CITY, STATE, ZIP: Decatur, IL 62526

DOCKET NUMBER: NH 18-S0103

LICENSEE INFO: Generations at McKinley Place, LLC
LICENSEE ADDRESS: 6840 N. Lincoln Avenue
LICENSEE CITY, STATE, ZIP: Lincolnwood, IL 60712

Survey Date – 02/13/2018

Type B violation of an occurrence for violating one or more of the following sections of the Code: 300.610a) and 300.2090b). A fine of \$1,100.00.

FACILITY NAME: [Glenlake Terrace Nursing & Reh](#)
FACILITY ADDRESS: 2222 West 14th 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

Type A 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 \$25,000.00.

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FACILITY NAME: Glenshire Nursing & Rehab Ctre
FACILITY ADDRESS: 22660 South Cicero Avenue
FACILITY CITY, STATE, ZIP: Richton Park, IL 60471

DOCKET NUMBER: NH 17-C0408

LICENSEE INFO: Glenshire Nursing and Rehabilitation Centre, Ltd
LICENSEE ADDRESS: 191 North Wacker Drive, Suite 1800
LICENSEE CITY, STATE, ZIP: Chicago, IL 60606

Survey Date – 07/31/2017

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

FACILITY NAME: [Glenview Terrace Nursing Ctr](#)
FACILITY ADDRESS: 1511 Greenwood Road
FACILITY CITY, STATE, ZIP: Glenview, IL 60025

DOCKET NUMBER: NH 18-C0126

LICENSEE INFO: Glenview Terrace Nursing Center
LICENSEE ADDRESS: 6633 North Lincoln Avenue
LICENSEE CITY, STATE, ZIP: Lincolnwood, IL 60712

Survey Date – 02/16/2018

Type A violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1210b), 300.1210d)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: [Golfview Developmental Center](#)
FACILITY ADDRESS: 9555 West Golf Road
FACILITY CITY, STATE, ZIP: Des Plaines, IL 60016

DOCKET NUMBER: NH 18-C0143

LICENSEE INFO: Golfview Developmental Center, Inc.
LICENSEE ADDRESS: 111 S. Wacker Dr. 44th FL
LICENSEE CITY, STATE, ZIP: Chicago, IL 60606

Survey Date – 03/01/2018

Type A violation of an occurrence for violating one or more of the following sections of the Code: 350.620a) 350.1210, 350.1220j), 350.1230d) and 350.3240a). A fine of \$12,500.00.

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FACILITY NAME: [Harbor House](#)
FACILITY ADDRESS: 760 McHenry Road
FACILITY CITY, STATE, ZIP: Wheeling, IL 60090

DOCKET NUMBER: NH 18-S0208
NH 18-C0209

LICENSEE INFO: Harbor Healthcare, LLC
LICENSEE ADDRESS: 120 S. Riverside Plaza, Ste 1200
LICENSEE CITY, STATE, ZIP: Chicago, IL 60606

Survey Date – 04/27/2018

Type C violation of an occurrence for violating one or more of the following sections of the Code: 330.790c)1). This instance in accordance with 330.282f) i) and j) of the Code is assessed a fine due to the violation of the sections of the Code with a high risk designation: 330.790). A fine of \$500.00.

FACILITY NAME: Heartland Manor Nursing Center
FACILITY ADDRESS: 410 Northwest Third, P.O. Box 10
FACILITY CITY, STATE, ZIP: Casey, IL 62420

DOCKET NUMBER: NH 17-S0578

LICENSEE INFO: Heartland Manor, Inc. Nursing Center
LICENSEE ADDRESS: 410 N W Third Street, P.O. Box 10
LICENSEE CITY, STATE, ZIP: Casey, IL 62420

Survey Date – 10/27/2017

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

FACILITY NAME: [Heartland of Canton](#)
FACILITY ADDRESS: 2081 North Main Street
FACILITY CITY, STATE, ZIP: Canton, IL 61520

DOCKET NUMBER: NH 18-C0095

LICENSEE INFO: Heartland of Canton, IL, LLC
LICENSEE ADDRESS: 208 South LaSalle Street, Suite 814
LICENSEE CITY, STATE, ZIP: Chicago, IL 60604

Survey Date – 02/14/2018

Type B violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1010h), 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: 300.3240a). A fine of \$2,200.00.

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FACILITY NAME: [Heartland of Decatur](#)
FACILITY ADDRESS: 444 West Harrison Street
FACILITY CITY, STATE, ZIP: Decatur, IL 62526

DOCKET NUMBER: NH 18-C0124

LICENSEE INFO: Heartland of Decatur, IL, LLC
LICENSEE ADDRESS: 208 S. LaSalle St, Ste 814
LICENSEE CITY, STATE, ZIP: Chicago, IL 60604

Survey Date – 02/01/2018

Type A violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1210d)2), 300.1620a), 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: 300.3240a). A fine of \$25,000.00.

FACILITY NAME: [Heartland of Normal](#)
FACILITY ADDRESS: 510 Broadway
FACILITY CITY, STATE, ZIP: Normal, IL 61761

DOCKET NUMBER: NH 18-S0240

LICENSEE INFO: Heartland of Normal IL, LLC
LICENSEE ADDRESS: 208 S. LaSalle St, Ste 814
LICENSEE CITY, STATE, ZIP: Chicago, IL 60604

Survey Date – 04/25/2018

Type A violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1210b), 300.1210c), 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: [Heddington Oaks](#)
FACILITY ADDRESS: 2223 West Heading Avenue
FACILITY CITY, STATE, ZIP: Peoria, IL 61604

DOCKET NUMBER: NH 18-C0130

LICENSEE INFO: Peoria County Board
LICENSEE ADDRESS: 324 Main Street. Room 502
LICENSEE CITY, STATE, ZIP: Peoria, IL 61602

Survey Date – 02/27/2018

Type A violation of an occurrence for violating one or more of the following sections of the Code: 300.1210b), 300.1210d)2), 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.

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FACILITY NAME: [Helia Healthcare of Champaign](#)
FACILITY ADDRESS: 1915 S. Mattis Street
FACILITY CITY, STATE, ZIP: Champaign, IL 61821

DOCKET NUMBER: NH 18-S0125

LICENSEE INFO: Helia Healthcare of Champaign, LLC
LICENSEE ADDRESS: 118 W. Edwards St, Ste 200
LICENSEE CITY, STATE, ZIP: Springfield, IL 62704

Survey Date – 03/06/2018

Type A violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1210b), 300.1210d)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: [Helia Healthcare of Champaign](#)
FACILITY ADDRESS: 1915 S. Mattis Street
FACILITY CITY, STATE, ZIP: Champaign, IL 61821

DOCKET NUMBER: NH 18-C0165

LICENSEE INFO: Helia Healthcare of Champaign, LLC
LICENSEE ADDRESS: 118 W. Edwards St., Ste 200
LICENSEE CITY, STATE, ZIP: Springfield, IL 62704

Survey Date – 03/28/2018

Type AA 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 \$50,000.00.

FACILITY NAME: [Helia Healthcare of Olney](#)
FACILITY ADDRESS: 410 East Mack
FACILITY CITY, STATE, ZIP: Olney, IL 62450

DOCKET NUMBER: NH 18-C0210

LICENSEE INFO: Helia Healthcare of Olney, LLC
LICENSEE ADDRESS: 118 W. Edwards St., Ste 200
LICENSEE CITY, STATE, ZIP: Springfield, IL 62704

Survey Date – 04/05/2018

Type A violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1010h), 300.1210b), 300.1210c)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.

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FACILITY NAME: [Heritage Health Springfield](#)
FACILITY ADDRESS: 900 North Rutledge
FACILITY CITY, STATE, ZIP: Springfield, IL 62702

DOCKET NUMBER: NH 18-C0106

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

Survey Date – 02/08/2018

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), 300.1220b) 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: [Heritage Health Staunton](#)
FACILITY ADDRESS: 215 West Pennsylvania Avenue
FACILITY CITY, STATE, ZIP: Staunton, IL 62088

DOCKET NUMBER: NH 18-S0162

LICENSEE INFO: Heritage Manor Staunton
LICENSEE ADDRESS: 115 West Jefferson St, Ste 401
LICENSEE CITY, STATE, ZIP: Bloomington, IL 61701

Survey Date – 03/02/2018

Type A 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 \$25,000.00.

Type B violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1210b)2), 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 \$27,200.00.

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FACILITY NAME: [Heritage Health Mt Zion](#)
FACILITY ADDRESS: 1225 Woodland Drive
FACILITY CITY, STATE, ZIP: Mt. Zion, IL 62549

DOCKET NUMBER: NH 18-S0142

LICENSEE INFO: Heritage Manor – Mt. Zion, LLC
LICENSEE ADDRESS: 115 W. Jefferson St, Ste 400
LICENSEE CITY, STATE, ZIP: Bloomington, IL 61701

Survey Date – 03/13/2018

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: [Hickory Point Christian Village](#)
FACILITY ADDRESS: 565 West Marion Avenue
FACILITY CITY, STATE, ZIP: Forsyth, IL 62535

DOCKET NUMBER: NH 18-S0159

LICENSEE INFO: Fair Haven Christian Homes, Inc.
LICENSEE ADDRESS: 208 S. LaSalle Street, Ste 814
LICENSEE CITY, STATE, ZIP: Chicago, IL 60604

Survey Date – 03/07/2018

Type B violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1210a), 300.1210b), 300.1210c), 300.1210d)2), 300.1210d)3), 300.1210d)4)A), 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: [Hope Creek Care Center](#)
FACILITY ADDRESS: 4343 Kennedy Drive
FACILITY CITY, STATE, ZIP: Rock Island, IL 61201

DOCKET NUMBER: NH 18-C0120

LICENSEE INFO: Rock Island County
LICENSEE ADDRESS: 1504 Third Avenue
LICENSEE CITY, STATE, ZIP: Rock Island, IL 61201

Survey Date – 03/06/2018

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)2), 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.

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FACILITY NAME: [Holland Terrace](#)
FACILITY ADDRESS: 15175 State Street
FACILITY CITY, STATE, ZIP: South Holland, IL 60473

DOCKET NUMBER: NH 18-C0118

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

Survey Date – 02/08/2018

Type B violation for violating one or more of the following sections of the Code: 350.620a), 350.1060e), 350.3240a), 350.3240b) and 350.3240f). A fine of \$550.00.

FACILITY NAME: [Illinois Veterans Home Anna](#)
FACILITY ADDRESS: 792 North Main Street
FACILITY CITY, STATE, ZIP: Anna, IL 62906

DOCKET NUMBER: NH 18-C0242

LICENSEE INFO: Illinois Department of Veterans' Affairs
LICENSEE ADDRESS: 792 North Main Street
LICENSEE CITY, STATE, ZIP: Springfield, IL 62794

Survey Date – 05/29/2018

Type C violation of an occurrence for violating one or more of the following sections of the Code: 340.1505c) and 340.1505g). This instance in accordance with 340.1245f) i) and j) of the Code is assessed a fine due to the violation of the sections of the Code with a high risk designation: 340.1505g). A fine of \$500.00.

FACILITY NAME: [Integrity HC of Carbondale](#)
FACILITY ADDRESS: 120 North Tower Road
FACILITY CITY, STATE, ZIP: Carbondale, IL 62901

DOCKET NUMBER: NH 18-C0174

LICENSEE INFO: Carbondale Rehabilitation and Nursing Center, LLC
LICENSEE ADDRESS: 2015 W. Main Street, Ste 111
LICENSEE CITY, STATE, ZIP: Carbondale, IL 62901

Survey Date – 04/03/2018

Type B violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1210b), 300.1210d)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.

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FACILITY NAME: Integrity HC of Godfrey
FACILITY ADDRESS: 1623-39 West Delmar Avenue
FACILITY CITY, STATE, ZIP: Godfrey, IL 62035

DOCKET NUMBER: NH 17-C0353

LICENSEE INFO: Godfrey Healthcare & Rehabilitation Center, LLC
LICENSEE ADDRESS: 2015 West Main Street Suite 111
LICENSEE CITY, STATE, ZIP: Carbondale, IL 62901

Survey Date – 06/22/2017

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

FACILITY NAME: [Integrity HC of Marion](#)
FACILITY ADDRESS: 1301 East DeYoung
FACILITY CITY, STATE, ZIP: Marion, IL 62959

DOCKET NUMBER: NH 18-S0233

LICENSEE INFO: Marion Rehabilitation and Nursing Center, LLC
LICENSEE ADDRESS: 2015 W. Main Street, Ste 111
LICENSEE CITY, STATE, ZIP: Carbondale, IL 62901

Survey Date – 04/17/2018

Type B violation of an occurrence for violating one or more of the following sections of the Code: 300.1210a), 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.

FACILITY NAME: [Jennings Terrace](#)
FACILITY ADDRESS: 275 South LaSalle Street
FACILITY CITY, STATE, ZIP: Aurora, IL 60505

DOCKET NUMBER: NH 18-C0239

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

Survey Date – 05/16/2018

Type A violation of an occurrence for violating one or more of the following sections of the Code: 300.1010h), 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 \$25,000.00.

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FACILITY NAME: [Jerseyville Nsg & Rehab Center](#)
FACILITY ADDRESS: 1001 South State Street
FACILITY CITY, STATE, ZIP: Jerseyville, IL 62052

DOCKET NUMBER: NH 18-S0160
NH 18-C0161

LICENSEE INFO: Helia Healthcare of Jerseyville, LLC
LICENSEE ADDRESS: 118 W. Edwards Street, Ste 200
LICENSEE CITY, STATE, ZIP: Springfield, IL 62704

Survey Date – 03/26/2018

Type A violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1210b), 300.1210c), 300.1210d)5), 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)5), 300.1210d)6) and 300.3240a). A fine of \$25,000.00.

FACILITY NAME: Lakeview Rehab & Nrsg Center
FACILITY ADDRESS: 735 West Diversey
FACILITY CITY, STATE, ZIP: Chicago, IL 60614

DOCKET NUMBER: NH 17-S0382

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

Survey Date – 07/10/2017

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

FACILITY NAME: Lakeview Rehab & Nrsg Center
FACILITY ADDRESS: 735 West Diversey
FACILITY CITY, STATE, ZIP: Chicago, IL 60614

DOCKET NUMBER: NH 17-C0383

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

Survey Date – 07/10/2017

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

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FACILITY NAME: [Lena Living Center](#)
FACILITY ADDRESS: 1010 South Logan Street
FACILITY CITY, STATE, ZIP: Lena, IL 61048

DOCKET NUMBER: NH 18-S0205

LICENSEE INFO: Lena Living Center, LLC
LICENSEE ADDRESS: 150 N. Riverside Plaza, #3000
LICENSEE CITY, STATE, ZIP: Chicago, IL 60606

Survey Date – 04/12/2018

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: [Lexington Hlth Cr Ctr - Blmngdl](#)
FACILITY ADDRESS: 165 South Bloomingdale Road
FACILITY CITY, STATE, ZIP: Bloomingdale, IL 60108

DOCKET NUMBER: NH 18-S0107

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

Survey Date – 02/16/2018

Type B violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1210b), 300.1210d)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 \$2,200.00.

FACILITY NAME: [Lexington of Elmhurst](#)
FACILITY ADDRESS: 420 West Butterfield Road
FACILITY CITY, STATE, ZIP: Elmhurst, IL 60126

DOCKET NUMBER: NH 18-C0112

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

Survey Date – 03/14/2018

Type B violation of an occurrence for violating one or more of the following sections of the Code: 300.1010h), 300.1210d)1), 300.1210d)2), 300.1620a), 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: 300.3240a). A fine of \$2,200.00.

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FACILITY NAME: [Lexington of Streamwood](#)
FACILITY ADDRESS: 815 East Irving Park Road
FACILITY CITY, STATE, ZIP: Streamwood IL 60107

DOCKET NUMBER: NH 18-S0237
NH 18-C0238

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

Survey Date – 05/02/2018

Type A violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1210b), 300.1210c), 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: Manor Court of Peoria
FACILITY ADDRESS: 6900 North Stalworth Drive
FACILITY CITY, STATE, ZIP: Peoria, IL 61615

DOCKET NUMBER: NH 18-C0006

LICENSEE INFO: Residential Alternatives of Illinois, Inc.
LICENSEE ADDRESS: 285 South Farnham Street
LICENSEE CITY, STATE, ZIP: Galesburg, IL 61401

Survey Date – 11/20/2017

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

FACILITY NAME: [Manorcare of Palos Heights East](#)
FACILITY ADDRESS: 7850 W. College Drive
FACILITY CITY, STATE, ZIP: Palos Heights, IL 60463

DOCKET NUMBER: NH 18-C0180

LICENSEE INFO: Manor Care of Palos Heights, IL, LLC
LICENSEE ADDRESS: 208 S. LaSalle St, Ste 814
LICENSEE CITY, STATE, ZIP: Chicago, IL 60604

Survey Date – 03/13/2018

Type B violation of an occurrence for violating one or more of the following sections of the Code: 300.1210a), 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.

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FACILITY NAME: Manorcare of Westmont
FACILITY ADDRESS: 512 East Ogden Avenue
FACILITY CITY, STATE, ZIP: Westmont, IL 60559

DOCKET NUMBER: NH 17-C0205

LICENSEE INFO: Manor Care of Westmont, IL, LLC
LICENSEE ADDRESS: 208 S. LaSalle Street, Suite 814
LICENSEE CITY, STATE, ZIP: Chicago, IL 60604

Survey Date – 03/09/2017

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

FACILITY NAME: [Marigold Rehabilitation HCC](#)
FACILITY ADDRESS: 275 East Carl Sandburg Drive
FACILITY CITY, STATE, ZIP: Galesburg, IL 61401

DOCKET NUMBER: NH 18-C0187

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

Survey Date – 04/11/2018

Type B violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1210b), 300.1210d)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: Mayfield Care Center
FACILITY ADDRESS: 5905 West Washington
FACILITY CITY, STATE, ZIP: Chicago, IL 60644

DOCKET NUMBER: NH 17-C0487

LICENSEE INFO: Mayfield Care Center, LLC
LICENSEE ADDRESS: 5215 Old Orchard Road, Suite 960
LICENSEE CITY, STATE, ZIP: Skokie, IL 60077

Survey Date – 09/20/2017

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

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FACILITY NAME: [Mayfield Health Center](#)
FACILITY ADDRESS: 5905 West Washington
FACILITY CITY, STATE, ZIP: Chicago, IL 60644

DOCKET NUMBER: NH 18-C0220

LICENSEE INFO: Mayfield Care Center, LLC
LICENSEE ADDRESS: 5215 Old Orchard Rd, Ste 960
LICENSEE CITY, STATE, ZIP: Skokie, IL 60077

Survey Date – 04/27/2018

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)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.

FACILITY NAME: [Meadowbrook Manor Naperville](#)
FACILITY ADDRESS: 720 Raymond Drive
FACILITY CITY, STATE, ZIP: Naperville, IL 60563

DOCKET NUMBER: NH 18-C0116

LICENSEE INFO: Butterfield Health Care II, Inc.
LICENSEE ADDRESS: 150 N. Riverside Plaza, Ste 3000
LICENSEE CITY, STATE, ZIP: Chicago, IL 60606

Survey Date – 02/22/2018

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.

FACILITY NAME: [Meadowbrook Manor Naperville](#)
FACILITY ADDRESS: 720 Raymond Drive
FACILITY CITY, STATE, ZIP: Naperville, IL 60563

DOCKET NUMBER: NH 18-C0121

LICENSEE INFO: Butterfield Health Care II, Inc.
LICENSEE ADDRESS: 150 N. Riverside Plaza, Ste 3000
LICENSEE CITY, STATE, ZIP: Chicago, IL 60606

Survey Date – 03/01/2018

Type B 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 \$2,200.00.

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FACILITY NAME: [Meadowbrook Manor Naperville](#)
FACILITY ADDRESS: 720 Raymond Drive
FACILITY CITY, STATE, ZIP: Naperville, IL 60563

DOCKET NUMBER: NH 18-C0164

LICENSEE INFO: Butterfield Health Care II, Inc.
LICENSEE ADDRESS: 150 N. Riverside Plaza, Ste 3000
LICENSEE CITY, STATE, ZIP: Chicago, IL 60606

Survey Date – 03/29/2018

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: [Mercy Circle](#)
FACILITY ADDRESS: 3659 W. 99th Street
FACILITY CITY, STATE, ZIP: Chicago, IL 60655

DOCKET NUMBER: NH 18-S0144

LICENSEE INFO: Mercy Circle
LICENSEE ADDRESS: 801 Adlai Stevenson Drive
LICENSEE CITY, STATE, ZIP: Springfield, IL 62703

Survey Date – 03/16/2018

Type B violation of an occurrence for violating one or more of the following sections of the Code: 300.1210a), 300.1210b)5), 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: Midwest Rehab & Respiratory
FACILITY ADDRESS: 727 North 17th Street
FACILITY CITY, STATE, ZIP: Belleville, IL 62226

DOCKET NUMBER: NH 16-C0194

LICENSEE INFO: Midwest Rehabilitation & Respiratory Center, LLC
LICENSEE ADDRESS: 8170 McCormick Blvd, Ste 219
LICENSEE CITY, STATE, ZIP: Skokie, IL 60076

Survey Date – 03/16/2016

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

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FACILITY NAME: [Mooring of Arlington Heights](#)
FACILITY ADDRESS: 761 Old Barn Lane
FACILITY CITY, STATE, ZIP: Arlington Heights, IL 60005

DOCKET NUMBER: NH 18-S0150

LICENSEE INFO: The Moorings of Arlington Heights, LLC
LICENSEE ADDRESS: 3200 Grant Street
LICENSEE CITY, STATE, ZIP: Evanston, IL 60201

Survey Date – 03/06/2018

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: Morton Terrace H & R Centre
FACILITY ADDRESS: 191 East Queenwood Road
FACILITY CITY, STATE, ZIP: Morton, IL 61550

DOCKET NUMBER: NH 17-C0243

LICENSEE INFO: Morton Terrace Healthcare & Rehabilitation Centre, LLC
LICENSEE ADDRESS: 161 N. Clark Street, Suite 4200
LICENSEE CITY, STATE, ZIP: Chicago, IL 60601

Survey Date – 04/18/2017

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

FACILITY NAME: [Mosaic of Lakeshore, The](#)
FACILITY ADDRESS: 7200 North Sheridan Road
FACILITY CITY, STATE, ZIP: Chicago, IL 60626

DOCKET NUMBER: NH 18-C0221

LICENSEE INFO: Lake Shore Healthcare & Rehabilitation Centre, LLC
LICENSEE ADDRESS: 4600 W. Touhy Avenue, #200
LICENSEE CITY, STATE, ZIP: Lincolnwood, IL 60712

Survey Date – 04/20/2018

Type B violation of an occurrence for violating one or more of the following sections of the Code: 300.1010h), 300.1210b), 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 \$2,200.00.

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FACILITY NAME: [Niles Nrsg & Rehab Ctr](#)
FACILITY ADDRESS: 9777 Greenwood Avenue
FACILITY CITY, STATE, ZIP: Niles, IL 60714

DOCKET NUMBER: NH 18-C0218

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

Survey Date – 04/16/2018

Type A violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.690a), 300.690b), 300.690c), 300.696a), 300.696b) 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: 300.690, 300.696 and 300.1210d)6). A fine of \$25,000.00.

FACILITY NAME: North Aurora Care Center
FACILITY ADDRESS: 310 Banbury Road
FACILITY CITY, STATE, ZIP: North Aurora, IL 60542

DOCKET NUMBER: NH 17-C0166

LICENSEE INFO: Petersen Health Operations, LLC
LICENSEE ADDRESS: 830 West Trailcreek Drive
LICENSEE CITY, STATE, ZIP: Peoria, IL 61614

Survey Date – 03/07/2017

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

FACILITY NAME: [North Aurora Care Center](#)
FACILITY ADDRESS: 310 Banbury Road
FACILITY CITY, STATE, ZIP: North Aurora, IL 60542

DOCKET NUMBER: NH 18-C0158

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

Survey Date – 03/15/2018

Type B violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1210b), 300.1210d)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.

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FACILITY NAME: [Ottawa Pavilion](#)
FACILITY ADDRESS: 704 East Glover Street
FACILITY CITY, STATE, ZIP: Ottawa, IL 61350

DOCKET NUMBER: NH 18-S0245

LICENSEE INFO: Ottawa Pavilion, LTD
LICENSEE ADDRESS: 191 N. Wacker Drive, Suite 1800
LICENSEE CITY, STATE, ZIP: Chicago, IL 60606

Survey Date – 04/27/2018

Type B violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.610c)4)B)C), 300.690b), 300.690c), 300.1210d)6), 300.2210a) and 300.2210b)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: 300.1210d)6). A fine of \$2,200.00.

FACILITY NAME: Parc of Joliet, The
FACILITY ADDRESS: 222 North Hammes Avenue
FACILITY CITY, STATE, ZIP: Joliet, IL 60435

DOCKET NUMBER: NH 17-C0583

LICENSEE INFO: The Parc at Joliet, LLC
LICENSEE ADDRESS: 2201 Main Street
LICENSEE CITY, STATE, ZIP: Evanston, IL 60202

Survey Date – 11/07/2017

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

FACILITY NAME: [Parc of Joliet, The](#)
FACILITY ADDRESS: 222 North Hammes Avenue
FACILITY CITY, STATE, ZIP: Joliet, IL 60435

DOCKET NUMBER: NH 18-C0153

LICENSEE INFO: The Parc at Joliet, LLC
LICENSEE ADDRESS: 2201 Main Street
LICENSEE CITY, STATE, ZIP: Evanston, IL 60202

Survey Date – 03/15/2018

Type A 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 \$25,000.00.

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FACILITY NAME: [Pine Acres Rehab & Living Ctr](#)
FACILITY ADDRESS: 1212 South Second Street
FACILITY CITY, STATE, ZIP: DeKalb, IL 60115

DOCKET NUMBER: NH 18-S0123

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

Survey Date – 03/01/2018

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: [Pine Acres Rehab & Living Center](#)
FACILITY ADDRESS: 1212 South Second Street
FACILITY CITY, STATE, ZIP: DeKalb, IL 60115

DOCKET NUMBER: NH 18-C0186

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

Survey Date – 04/04/2018

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: [Presence McAuley Manor](#)
FACILITY ADDRESS: 400 West Sullivan Road
FACILITY CITY, STATE, ZIP: Aurora, IL 60506

DOCKET NUMBER: NH 18-S0230

LICENSEE INFO: Presence Life Connections
LICENSEE ADDRESS: 18927 Hickory Creek Drive, Ste 300
LICENSEE CITY, STATE, ZIP: Mokena, IL 60448

Survey Date – 05/10/2018

Type B violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1210b), 300.3210g), 300.3240a) 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) and 300.3240e). A fine of \$2,200.00.

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FACILITY NAME: [Presence Our Lady of Victory](#)
FACILITY ADDRESS: 20 Briarcliff Lane
FACILITY CITY, STATE, ZIP: Bourbonnais, IL 60914

DOCKET NUMBER: NH 18-C0219

LICENSEE INFO: Presence Life Connections
LICENSEE ADDRESS: 18927 Hickory Creek Dr. Ste 300
LICENSEE CITY, STATE, ZIP: Mokena, IL 60448

Survey Date – 04/20/2018

Type B 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 \$2,200.00.

FACILITY NAME: [Regency Care](#)
FACILITY ADDRESS: 2120 W. Washington Street
FACILITY CITY, STATE, ZIP: Springfield, IL 62702

DOCKET NUMBER: NH 18-S0179

LICENSEE INFO: Rutledge – Regency Operations, LLC
LICENSEE ADDRESS: 202 N. Center Street
LICENSEE CITY, STATE, ZIP: Bloomington, IL 61701

Survey Date – 04/13/2018

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: [Regency Care of Morris](#)
FACILITY ADDRESS: 1095 Twilight Drive
FACILITY CITY, STATE, ZIP: Morris, IL 60450

DOCKET NUMBER: NH 18-C0182
NH 18-S0183

LICENSEE INFO: Morris SNF Management, LLC
LICENSEE ADDRESS: 1315 W. Lawrence Avenue
LICENSEE CITY, STATE, ZIP: Springfield, IL 62704

Survey Date – 03/13/2018

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.

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

DOCKET NUMBER: NH 17-C0419

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

Survey Date – 08/03/2017

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

FACILITY NAME: [River North of Bradley H & R](#)
FACILITY ADDRESS: 650 North Kinzie
FACILITY CITY, STATE, ZIP: Bradley, IL 60915

DOCKET NUMBER: NH 18-C0167

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

Survey Date – 03/09/2018

Type B violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1210b), 300.1210c)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.

FACILITY NAME: Rosewood Care Center Galesburg
FACILITY ADDRESS: 1250 W. Carl Sandburg Drive
FACILITY CITY, STATE, ZIP: Galesburg, IL 61401

DOCKET NUMBER: NH 17-C0183

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

Survey Date – 03/02/2017

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

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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

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.

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 \$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- C0241

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

Survey Date – 04/26/2018

Type B 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 \$2,200.00.

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FACILITY NAME: [Rosewood Care Center of Moline](#)
FACILITY ADDRESS: 7300 34th Avenue
FACILITY CITY, STATE, ZIP: Moline, IL 61265

DOCKET NUMBER: NH 18-C0113

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

Survey Date – 02/22/2018

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.

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), 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.

Total Fines \$27,200.00.

FACILITY NAME: [Rosewood Care Center of Peoria](#)
FACILITY ADDRESS: 1500 W. Northmoor Road
FACILITY CITY, STATE, ZIP: Peoria, IL 61614

DOCKET NUMBER: NH 18-C0115

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

Survey Date – 03/08/2018

Type B violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1210a), 300.1210b), 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.

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FACILITY NAME: [Rosewood Care Center of Peoria](#)
FACILITY ADDRESS: 1500 W. Northmoor Road
FACILITY CITY, STATE, ZIP: Peoria, IL 61614

DOCKET NUMBER: NH 18-C0166

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

Survey Date – 04/12/2018

Type B violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1210a), 300.1210b), 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: [Snyder Village](#)
FACILITY ADDRESS: 1200 East Partridge
FACILITY CITY, STATE, ZIP: Metamora, IL 61548

DOCKET NUMBER: NH 18-S0136
NH 18-C0137

LICENSEE INFO: Metamora Community Nursing Home
LICENSEE ADDRESS: 1200 East Partridge
LICENSEE CITY, STATE, ZIP: Metamora, IL 61548

Survey Date – 03/14/2018

Type B violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1210b), 300.1210c), 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: [South Elgin Rehab & HCC](#)
FACILITY ADDRESS: 746 West Spring Street
FACILITY CITY, STATE, ZIP: South Elgin, IL 60177

DOCKET NUMBER: NH 18-C0117

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

Survey Date – 02/22/2018

Type A violation of an occurrence for violating one or more of the following sections of the Code: 300.610a), 300.1030a)2), 300.1030b), 300.1030c), 300.1210b), 300.1210c), 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 \$25,000.00.

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April - June 2018

FACILITY NAME: St. Anthony's Nursing & Rehab
FACILITY ADDRESS: 767 30th Street
FACILITY CITY, STATE, ZIP: Rock Island, IL 61201

DOCKET NUMBER: NH 17-C0365

LICENSEE INFO: St. Anthony's Nursing and Rehabilitation Center, L.L.C.
LICENSEE ADDRESS: 161 North Clark Street, Suite 4200
LICENSEE CITY, STATE, ZIP: Chicago, IL 69691

Survey Date – 07/12/2017

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

FACILITY NAME: St. Anthony's Nrsg & Rehab Center
FACILITY ADDRESS: 767 30th Street
FACILITY CITY, STATE, ZIP: Rock Island, IL 61201

DOCKET NUMBER: NH 17-C0412

LICENSEE INFO: St. Anthony's Nursing and Rehabilitation Center, L.L.C.
LICENSEE ADDRESS: 150 North Riverside Place, Suite 3000
LICENSEE CITY, STATE, ZIP: Chicago, IL 61201

Survey Date – 08/18/2017

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

FACILITY NAME: St. Anthony's Nsg & Rehab Ctr
FACILITY ADDRESS: 767 30th Street
FACILITY CITY, STATE, ZIP: Rock Island, IL 61201

DOCKET NUMBER: NH 17-C0584

LICENSEE INFO: St. Anthony's Nursing and Rehabilitation Center, L.L.C.
LICENSEE ADDRESS: 150 North Riverside Plaza, Suite 3000
LICENSEE CITY, STATE, ZIP: Chicago, IL 61201

Survey Date – 11/15/2017

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

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FACILITY NAME: [St. James Wellness Rehab Villas](#)
FACILITY ADDRESS: 1251 East Rickton Road
FACILITY CITY, STATE, ZIP: Crete, IL 60417

DOCKET NUMBER: NH 18-C0223

LICENSEE INFO: St. James Wellness Rehab and Villas, LLC
LICENSEE ADDRESS: 2201 Main Street
LICENSEE CITY, STATE, ZIP: Evanston, IL 60202

Survey Date – 04/23/2018

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), 300.1210c), 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: [Stearns Nsg & Rehab Center](#)
FACILITY ADDRESS: 3900 Stearns Avenue
FACILITY CITY, STATE, ZIP: Granite City, IL 62040

DOCKET NUMBER: NH 18-C0226

LICENSEE INFO: Stearns Nursing and Rehabilitation Center, LLC
LICENSEE ADDRESS: 901 S. 2nd Street, Ste 201
LICENSEE CITY, STATE, ZIP: Springfield, IL 62704

Survey Date – 05/03/2018

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.

FACILITY NAME: [Stearns Nsg & Rehab Center](#)
FACILITY ADDRESS: 3900 Stearns Avenue
FACILITY CITY, STATE, ZIP: Granite City, IL 62040

DOCKET NUMBER: NH 18-S0246

LICENSEE INFO: Stearns Nursing and Rehabilitation Center, LLC
LICENSEE ADDRESS: 901 S. 2nd Street, Ste 201
LICENSEE CITY, STATE, ZIP: Springfield, IL 62704

Survey Date – 05/23/2018

Type B violation of an occurrence for violating one or more of the following sections of the Code: 300.1210b)4), 300.1210d)3), 300.3240a) 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) and 300.3240a). A fine of \$2,200.00.

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FACILITY NAME: Sunrise Skilled Nursing & Rehab
FACILITY ADDRESS: 333 South Wrightsman Street
FACILITY CITY, STATE, ZIP: Virden, IL 62690

DOCKET NUMBER: NH 17-C0433

LICENSEE INFO: Covenant Care Sunrise, LLC
LICENSEE ADDRESS: 2015 West Main Street, Suite 111
LICENSEE CITY, STATE, ZIP: Carbondale, IL 62901

Survey Date – 09/01/2017

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

FACILITY NAME: [Swansea Rehab and Hlth Care Ctr](#)
FACILITY ADDRESS: 1405 North Second Street
FACILITY CITY, STATE, ZIP: Swansea, IL 62226

DOCKET NUMBER: NH 18-C0133

LICENSEE INFO: Petersen Health Care II, Inc.
LICENSEE ADDRESS: 830 West Trailcreek Drive
LICENSEE CITY, STATE, ZIP: Peoria, IL 61614

Survey Date – 02/28/2018

Type B violation of an occurrence for violating one or more of the following sections of the Code: 300.1230k) and 300.1230l). 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: 300.1230). A fine of \$2,200.00.

FACILITY NAME: [Symphony of South Shore](#)
FACILITY ADDRESS: 2425 East 71st Street
FACILITY CITY, STATE, ZIP: Chicago, IL 60649

DOCKET NUMBER: NH 18-C0206

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

Survey Date – 04/04/2018

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) 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.

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FACILITY NAME: United Methodist Village, The
FACILITY ADDRESS: 1616 Cedar
FACILITY CITY, STATE, ZIP: Lawrenceville, IL 62439

DOCKET NUMBER: NH 18-S0017

LICENSEE INFO: The United Methodist Village, Inc.
LICENSEE ADDRESS: 190 South LaSalle Street, Suite 3700
LICENSEE CITY, STATE, ZIP: Chicago, IL 60603

Survey Date – 11/21/2017

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

FACILITY NAME: [Warren Barr Lincolnshire](#)
FACILITY ADDRESS: 150 Jamestown Lane
FACILITY CITY, STATE, ZIP: Lincolnshire, IL 60069

DOCKET NUMBER: NH 18-S0229

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

Survey Date – 04/19/2018

Type A 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), 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: [West Suburban Nsg & Rehab Ctr](#)
FACILITY ADDRESS: 311 Edgewater Drive
FACILITY CITY, STATE, ZIP: Bloomingdale, IL 60108

DOCKET NUMBER: NH 18-C0194

LICENSEE INFO: West Suburban Nursing and Rehabilitation Center, LLC
LICENSEE ADDRESS: 240 FencI Lane
LICENSEE CITY, STATE, ZIP: Hillside, IL 60162

Survey Date – 03/27/2018

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), 300.1630d)e) 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.

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FACILITY NAME: [Willow Crest Nursing Pavilion](#)
FACILITY ADDRESS: 515 North Main
FACILITY CITY, STATE, ZIP: Sandwich, IL 60548

DOCKET NUMBER: NH 18-S0104

LICENSEE INFO: Willow Crest Nursing Pavilion, LTD
LICENSEE ADDRESS: 191 North Wacker Drive, Suite 1800
LICENSEE CITY, STATE, ZIP: Chicago, IL 60606

Survey Date – 02/16/2018

Type B 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 \$2,200.00.

FACILITY NAME: Willow Rose Rehab & Health
FACILITY ADDRESS: 410 Fletcher
FACILITY CITY, STATE, ZIP: Jerseyville, IL 62052

DOCKET NUMBER: NH 17-C0225

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

Survey Date – 04/11/2017

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

FACILITY NAME: Winchester House
FACILITY ADDRESS: 1125 North Milwaukee Avenue
FACILITY CITY, STATE, ZIP: Libertyville, IL 60048

DOCKET NUMBER: NH 17-S0582

LICENSEE INFO: Transitional Care of Lake County, LLC
LICENSEE ADDRESS: 1 North LaSalle Street, Suite 1350
LICENSEE CITY, STATE, ZIP: Chicago, IL 60602

Survey Date – 11/06/2017

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

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April - June 2018

FACILITY NAME: [Winchester House](#)
FACILITY ADDRESS: 1125 North Milwaukee Avenue
FACILITY CITY, STATE, ZIP: 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

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: [Windsor Estates Nsg & Rehab](#)
FACILITY ADDRESS: 18300 South Lavergne
FACILITY CITY, STATE, ZIP: Country Club Hills, IL 60478

DOCKET NUMBER: NH 18-C0100

LICENSEE INFO: McAllister Nursing and Rehab, LLC
LICENSEE ADDRESS: 9100 Karlov Avenue
LICENSEE CITY, STATE, ZIP: Skokie, IL 60076

Survey Date – 02/15/2018

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), 300.1210d)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.