Illinois State Department of Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTIONS	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 0055772	(X2) MULTIPLE CONSTRUCTION A. BUILDING B. WING	(X3) DATE SURVEY COMPLETED 01/09/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Marigold Rehabilitation Hcc	**275 EAST CARL SANDBURG DRIVE , GALESBURG, Illinois, 61401**

(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 Investigation of Complaint 25210779/2661858	S0000		
S9999	Final Observations Statement of Licensure Violations 300.610a) 300.1210a) 300.1210b) 300.1210d)1) 300.1610a)1) 300.1620a) 300.1630d) 300.3210a)2)A)B)C) 300.3220f) 300.3240a) 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 300.1210 General Requirements for Nursing and Personal Care	S9999		

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	Continued from page 1 a) Comprehensive Resident Care Plan. A facility, with the participation of the resident and the resident's guardian or representative, as applicable, must develop and implement a comprehensive care plan for each resident that includes measurable objectives and timetables to meet the resident's medical, nursing, and mental and psychosocial needs that are identified in the resident's comprehensive assessment, which allow the resident to attain or maintain the highest practicable level of independent functioning, and provide for discharge planning to the least restrictive setting based on the resident's care needs. The assessment shall be developed with the active participation of the resident and the resident's guardian or representative, as applicable. (Section 3-202.2a of the Act) 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. 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: 1) Medications, including oral, rectal, hypodermic, intravenous and intramuscular, shall be properly administered. Section 300.1610 Medication Policies and Procedures a) Development of Medication Policies 1) Every facility shall adopt written policies and procedures for properly and promptly obtaining, dispensing, administering, returning, and disposing of drugs and medications. These policies and procedures shall be consistent with the Act and this Part and shall be followed by the facility. These policies and procedures shall be in compliance with all applicable federal, State and local laws. Section 300.1620 Compliance with Licensed Prescriber's Orders a) All medications shall be given only upon the written, facsimile, or electronic order of a licensed prescriber. The facsimile or electronic order of a licensed prescriber shall be authenticated by the	S9999		

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S9999	Continued from page 2 licensed prescriber within 10 calendar days, in accordance with Section 300.1810. All orders shall have the handwritten signature (or unique identifier) of the licensed prescriber. (Rubber stamp signatures are not acceptable.) These medications shall be administered as ordered-by the licensed prescriber and at the designated time. Section 300.1630 Administration of Medication d) If, for any reason, a licensed prescriber's medication order cannot be followed, the licensed prescriber shall be notified as soon as is reasonable, depending upon the situation, and a notation made in the resident's record. Section 300.3210 General a) No resident shall be deprived of any rights, benefits, or privileges guaranteed by State or federal law, the Constitution of the State of Illinois, or the Constitution of the United States solely on account of the resident's status as a resident of a facility. 2) Residents shall have their basic human needs, including but not limited to water, food, medication, toileting, and personal hygiene, accommodated in a timely manner, as defined by the person and agreed upon by the interdisciplinary team. A) A facility shall treat each resident with respect and dignity and care for each resident in a manner and in an environment that promotes maintenance or enhancement of the resident's quality of life, recognizing each resident's individuality. B) A facility shall protect and promote the rights of the resident. C) Residents have the right to reside in and receive services in the facility with reasonable accommodation of their needs and preferences except when to do so would endanger the health or safety of the resident or other residents. Section 300.3220 Medical Care f) All medical treatment and procedures shall be administered as ordered by a physician. All new physician orders shall be reviewed by the facility's director of nursing or charge nurse designee within 24 hours after such orders have been issued to assure facility compliance with such orders. (Section 2-104(b) of the Act)	S9999		

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S9999	Continued from page 3 Section 300.3240 Abuse and Neglect a) An owner, licensee, administrator, employee or agent of a facility shall not abuse or neglect a resident. (Section 2-107 of the Act) These requirements were not met as evidenced by: Based on observation, interview and record review, the facility failed to ensure a resident was free from neglect, by failing to ensure that a resident received prescribed medications in accordance with physician orders, resulting in a failure to provide necessary care and services to attain or maintain the resident's highest practicable physical well-being, for 1 of 3 residents (R1) reviewed for medications, in a sample of 3. The facility failed to administer prescribed medications to R1 as ordered over multiple days. R1's medical record review revealed that the medications were ordered to be administered routinely; however, documentation showed missed doses without evidence of physician notification, or appropriate intervention. Staff interviews confirmed that missed medications were not escalated to nursing leadership or the attending physician. As a result of the failure to administer prescribed medications and the lack of timely assessment and intervention, R1 experienced a decline in condition and subsequently expired. The facility's failure to follow physician orders and provide appropriate monitoring and response placed R1 at risk for serious harm and resulted in actual harm and death. Findings include: The (undated) facility Medication Availability policy, directs staff to, "On admission, using Quick (computerized program), admit the resident to the facility. Enter allergies. enter physician orders within one hour of the resident entering the facility. make sure the correct date and time are entered. If after 4:00 pm, call the pharmacy notifying them of a new admission- ask to speak to a pharmacist. Review with the pharmacist which medications you will need until the next scheduled delivery. Administer meds (medications) from the EDK (emergency drug kit or convivence kit). For meds not in the EDK, request pharmacy send STAT (immediately) or use their back up pharmacy to get them to the facility. Document administration of the medication in EMAR (Electronic Medication Administration Record)." The (facility pharmacy) posted Hours of Operation and	S9999		

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S9999	Continued from page 4 Cutoff Times form, located at the facility East Wing nurse's station directs staff, "Order Cutoff Times: Monday - Friday New Orders by 4:00 PM and Saturday New Orders by 1:00 PM. STAT SAFE: The stat safe is an automated dispensing cabinet that will allow nurses access to doses of specific medication. Inventory can be customized." The (facility) STAT Safe Inventory List, dated (last update) January 2026 includes some of the following medications, "Albuterol (Bronchodilator) Nebulizer Solution, Fluoxetine (Anti-depressant) 20 MG (Milligram) tablet, Prednisone (Corticosteroid) 10 MG tablet, Simvastatin (Statin) 10 MG tablet, Spironolactone (Diuretic) 25 MG tablet, Torsemide (Diuretic) 20 MG tablet, Ipratropium (Bronchodilator) Nebulizer Solution." R1's facility Admission Record documents that R1 was admitted to the facility on 10/21/2025 from a local hospital with the following diagnoses: Acute on Chronic Respiratory Failure with Hypercapnia, Acute Respiratory distress, Chronic Obstructive Pulmonary Disease, Pulmonary Hypertension, Acute on Chronic Diastolic (Congestive) Heart Failure, Chronic Cor Pulmonal. R1's (Hospital) After Visit Summary documents that R1 was hospitalized from 9/24/2025 until 10/21/2025 and includes the following physician orders: Oxygen at 5 liters per nasal cannula continuously. Upon admission, R1 had new physician orders to start the following medications: Acetazolamide (Carbonic anhydrase inhibitor used for edema in heart failure); Clonazepam (Benzodiazepine); Ipratropium-Albuterol (Bronchodilator); Prednisone (Corticosteroid) start 10/22/25, Fluticasone (Corticosteroid) start 10/22/25. R1 also had a physician's order to continue the following medications: Albuterol (Bronchodilator); Cyanocobalamin (Supplement); Folic Acid (Supplement) and MiraLAX (Laxative). R1 also had a physician's order to continue taking Aspirin; Budeson- Glycopyrrolate-Formoterol (Bronchodilator); Fluoxetine (Antidepressant); Guaifenesin (Mucolytic); Pantoprazole (Proton Pump Inhibitor); and Simvastatin (Statin). R1's Daily Skilled Nursing Note on 10/2/25 at 2:30 P.M. document, "(R1) is alert and has short term memory problem. (R1) does not have delusions, does not hallucinate, and decision making is not impaired. Signs of delirium: none. (R1) has the following sensory or speech issues: wears glasses. (R1) has the following indicators of a mood issue: none. (R1) has the following behavioral issues: none. (R1) has the following skin issues: Scattered bruising to abdomen	S9999		

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S9999	Continued from page 5 and extremities. (R1) is incontinent of bladder. Bowel sounds are normal, has normal bowel movements, is incontinent of bowel. Apical pulse is regular, radial pulse is regular. (R1) is experiencing the following cardiovascular issues: none. (R1) has no edema. Respiratory Status- (R1) is experiencing the following breathing issues: SOB (Short of Breath) at times. (R1) Has SOB while lying flat, has shortness of breath on exertion, does not have shortness of breath or trouble breathing when sitting at rest. Lung sounds: Clear. (R1) does not have a cough and requires the following respiratory support Bi-pap and neb (nebulizer) treatments with O2 (oxygen)." R1's Nursing Progress Notes, dated 10/23/2025 at 12:32 P.M. and signed by V5/Licensed Practical Nurse document, "Nurse went into (R1's) room to administer medications at 1139 A.M. (R1) appeared that breathing had ceased. No audible heart tones; no pulse and no visual signs of life noted. DON (V2/Interim Director of Nurse) verified (R1) had expired. Staff had last talked to (R1) approximately 15 minutes prior. (R1) had several complex medical diagnoses, including respiratory failure." R1's October Physician Order Sheet includes the following medications: Enteric Coated Aspirin 81 MG daily at 8AM, Cyanocobalamin 500 MCG (Micrograms) daily at 8AM, Docusate Sodium 100 MG daily at 8AM, Ferrous Sulfate 325 MG daily at 8AM, Fluoxetine 20 MG daily at 8AM, Fluticasone Nasal Suspension daily at 8AM, Folic Acid 1 MG daily at 8AM, Prednisone 5 MG daily at 8AM, Protonix 40 MG daily at 5AM, Simvastatin 40 MG daily at 8PM, Spironolactone 25 MG daily at 8AM, Vitamin D3 1000 Units daily at 8AM, Acetazolamide 250 MG twice daily at 8AM and 4PM, AR formoterol Inhalation Nebulization Solution twice daily at 8AM and 4PM, Breztri Aerosphere Inhalation twice daily at 8AM and 4PM, Clonazepam 0.5 MG twice daily at 8AM and 4PM, Guaifenesin ER (Extended Release) 600 MG twice daily at 8AM and 8PM, Hydroxychloroquine 200 MG twice daily at 8AM and 4 PM, Torsemide 40 MG twice daily at 8AM and 4PM, Ipratropium-Albuterol Inhalation Solution via Nebulization four times daily at 8AM, 12PM, 4PM and 8PM. R1's October 2025 Medication Administration Record documents that R1 did not receive Aspirin, Cyanocobalamin, Docusate Sodium, Ferrous Sulfate, Fluoxetine, Fluticasone, Folic Acid, Prednisone, Spironolactone (Diuretic), Vitamin D3 (Supplement), Acetazolamide, Budeson- Glycopyrrolate- Formoterol, Clonazepam, Hydroxychloroquine (Anti-rheumatic), Torsemide (Diuretic), or Ipratropium-Albuterol on	S9999		

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S9999	Continued from page 6 10/22/25 or 10/23/25 at 8AM, 12PM or 4PM., as documented by V5/Licensed Practical Nurse as unavailable. No documentation that the missed medication doses was escalated to facility nurse management staff or that R1's physician was notified that R1 had missed physician ordered medications on 10/22/25 and 10/23/25 is present in R1's medical record. On 01/03/2026 at 11:33 A.M., a locked, electronic medication dispensing machine was located in the East Wing Medication Room. A list of medications available in the machine was present, and included Albuterol (Bronchodilator) Nebulizer Solution, Fluoxetine (Anti-depressant) 20 MG (Milligram) tablet, Prednisone (Corticosteroid) 10 MG tablet, Simvastatin (Statin) 10 MG tablet, Spironolactone (Diuretic) 25 MG tablet, Torsemide (Diuretic) 20 MG tablet, Ipratropium (Bronchodilator) Nebulizer Solution. On 01/02/2026 at 1:04 P.M., V5/Licensed Practical Nurse stated she has been an employee of the facility for the past 8 years as a Licensed Practical Nurse. States when a new admission comes to the facility, V8/Minimum Data Set Assessment Coordinator or V9/Assistant Director of Nurses put the orders into the computer. States pharmacy delivery of medications is made between 8 PM to 10 PM each day, except Saturday or Sunday when delivery is usually late afternoon. States if a resident is admitted prior to that, their medications should be delivered that evening. States the facility also has a locked medication cart that contains many different medications. If a resident runs out of medicine or is a new admission and their medications aren't in the facility yet, a nurse can call the pharmacy, and they will give you a code to unlock the machine to pull the medications needed. States she worked on October 22 and 23, 2025 and that R1's medications had not arrived from the pharmacy. States R1 did not receive medications on those dates. Unable to recall if medications had been placed on hold. States on 10/23/25 around 11:30 A.M. the CNAs (Certified Nursing Assistants) had gone into R1's room to deliver his noon meal tray and found him deceased. States they came and got her and she assessed R1 and found him without a pulse or respirations. On 01/02/2026 at 1:26 P.M., V10/Medical Doctor stated he was R1's primary physician. States R1's medications, including multiple diuretics, nebulizer treatments and steroids should never have been placed on hold. States R1 should have received his medications, as ordered by the physician. Unable to state if R1 not receiving his medications led to his death on 10/23/25, but stated it	S9999		

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S9999	Continued from page 7 is a very good possibility. Stated it definitely hurt R1's medical condition. Stated his expectation of the facility is that a resident's medications are available on the evening of admission, or he should be notified to modify the treatment plan for a resident. Further stated he was not notified by nursing staff on 10/21/25, 10/22/25 or 10/23/25 that R1's medications were not available. On 01/02/2026 at 2:42 P.M., V7/Advanced Practice Nurse stated she doesn't specifically recall giving an order to hold R1's medications until available. Stated her expectation is that medications should be available upon admission, or the facility should have a means to obtain medications swiftly via a local pharmacy or an in-house electronic dispensing machine. V7 stated she would not expect medications to be unavailable for 48 hours and she or V10/Medical Doctor should have been made aware of the extended time delay in obtaining R1's medications. Stated she was not notified by the facility that R1 did not receive his ordered medications on 10/21/25, 10/22/25 or 10/23/25. Stated if she had been notified, a new treatment plan could have been implemented for R1 or R1 would have been sent back to the hospital to receive treatment. On 01/05/2026 at 9:08 A.M., V13/Critical Care Pharmacist stated the delivery slip for the facility documents that the following medications were delivered for R1 on 10/21/25 at 11:18 PM, Arformoterol Inhalation, Acetazolamide, Enoxaparin and Budesonide. V13 stated the Enoxaparin and Budesonide were discontinued on 10/21/25. Stated on 10/23/25 at 12:21 AM, the following medications for R1 were delivered: Torsemide, Spironolactone, Simvastatin, Prednisone, Pantoprazole, Ipratropium-Albuterol Inhalation, Hydroxychloroquine, Fluticasone, Fluoxetine, Breztri and Albuterol. On 01/05/2026 at 11:03 A.M., V2/Interim Director of Nurses stated she was not informed by any nurse that R1's medications were not available or given to him as ordered by the physician. At that time, V2 verified that R1 did not receive physician ordered medications on 10/21/25, 10/22/25 or 10/23/25 including Aspirin on 10/22/25 and 10/23/25; Cyanocobalamin on 10/22/25 and 10/23/25; Docusate Sodium on 10/22/25 and 10/23/25; Ferrous Sulfate, Fluoxetine, Fluticasone, Folic Acid, Prednisone, Spironolactone (Diuretic), Vitamin D3 (Supplement), Acetazolamide, Budeson- Glycopyrrolate-Formoterol, Clonazepam, Hydroxychloroquine (Anti-rheumatic), Torsemide (Diuretic), or Ipratropium-Albuterol on 10/22/25 or 10/23/25.	S9999		

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S9999	Continued from page 8 On 01/05/2026 at 11:17 A.M., V5/Licensed Practical Nurse stated she did not get medications for R1 from the facility electronic medication dispensing machine on 10/21/25 or 10/22/25. Stated she did not notify R1's physician that he had not received any medications including his breathing treatments, diuretics, medication for heart failure or his prednisone. Stated she doesn't know why she did not administer R1's Diamox or Breztri Inhaler on 10/22/25 or at 8:00 AM on 10/23/25 despite them being delivered by the pharmacy on 10/21/25. Stated she was busy and was going into R1's room at 11:39 AM when R1 was found deceased. Also stated she did not notify nursing management of R1's missing medications on 10/21/25, 10/22/25 or at 8:00 AM on 10/23/25. R1's (State) Certificate of Death documents R1's Cause of Death as Acute on Chronic Congestive Heart Failure, Acute on Chronic Diastolic Heart Failure with Significant Conditions Contributing to Death as Chronic Obstructive Pulmonary Disease. "AA"	S9999		