STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTIONS	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 3001016	(X2) MULTIPLE CONSTRUCTION A. BUILDING B. WING	(X3) DATE SURVEY COMPLETED 12/09/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Charleston Rehab and Nursing	**716 EIGHTEENTH STREET , CHARLESTON, Illinois, 61920**

(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 Annual Licensure and Certification Survey	S0000		01/04/2026
S9999	Final Observations Statement of Licensure Violations: 300.615a) 300.615e) 300.615f) 300.625j) 300.625k) Section 300.615 Determination of Need Screening and Request for Resident Criminal History Record Information a) For the purpose of this Section only, a nursing facility is any bed licensed as a skilled nursing or intermediate care facility bed, or a location certified to participate in the Medicare program under Title XVIII of the Social Security Act or Medicaid program under Title XIX of the Social Security Act. e) In addition to the screening required by Section 2-201.5(a) of the Act and this Section, a facility shall, within 24 hours after admission of a resident, request a criminal history background check pursuant to the Uniform Conviction Information Act for all persons 18 or older seeking admission to the facility, unless a background check was initiated by a hospital pursuant to the Hospital Licensing Act. Background checks shall be based on the resident's name, date of birth, and other identifiers as required by the Department of State Police. (Section 2-201.5(b) of the Act) f) The facility shall check for the individual's name on the Illinois Sex Offender Registration website at www.isp.state.il.us and the Illinois Department of Corrections sex registrant search page at www.idoc.state.il.us to determine if the individual is listed as a registered sex offender.	S9999		01/04/2026

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE

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S9999	Continued from page 1 Section 300.625 Identified Offenders 300.625j) 300.625k) j) Upon admission of an identified offender to a facility or a decision to retain an identified offender in a facility, the facility, in consultation with the medical director and law enforcement, shall specifically address the resident's needs in an individualized plan of care. k) The facility shall incorporate the Identified Offender Report and Recommendation into the identified offender's care plan. (Section 2-201.6(f) of the Act) These REQUIREMENTS are NOT met as evidenced by: Based on interview and record review, the facility failed to check the correct name for a re-admitted resident who was a known identified offender (R55), failed to conduct resident criminal history background checks for four residents (R16, R31, R46, R49), failed to conduct resident criminal history background checks within 24 hours of admission for three residents (R4, R13, R66), and failed to conduct checks of the required Illinois Sex Offender and Illinois Department of Corrections Sex Registrant websites for three residents (R4, R33, R46) out of ten residents reviewed. These failures have the potential to affect all 52 residents residing in the facility. Findings 1 The Illinois Department of Public Health Identified Offenders Facility Report dated 9/24/25 documents R55 as an identified offender with an admission date to the facility on 6/14/21. This same Report documents R55 as a low-risk offender. R55's Census Detail documents R55 was originally admitted to the facility 6/14/21, with a subsequent discharge on 9/23/21. This same Census Detail documents R55 was re-admitted to the facility 6/19/23. R55's Criminal History Information Response Process (CHIRP) background check dated 6/15/23 documents R55 had no criminal convictions. R55's CHIRP background check from his original admission on 6/14/21 was not available at the facility during the survey.	S9999		

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S9999	Continued from page 2 On 12/3/25 at 11:40 AM, V1, Administrator, stated the CHIRP background check for R55 submitted on 6/15/23 had been submitted with an incorrect name, replacing a "D" where a "T" should have been, which was why R55's CHIRP from 6/15/23 had no criminal convictions. V1 stated she had just submitted a new CHIRP background check for R55 dated 12/3/25, after a state surveyor questioned the 6/15/23 CHIRP results, which documented R55 did have a conviction for aggravated battery with bodily harm in 1995. During the survey on 12/2/25 and 12/3/25, R55 was observed independently transferring from his bed to a wheelchair, from a wheelchair to the toilet, and independently mobile in the wheelchair. R55's Care Plan with dates beginning on 11/22/23, did not include any reference to R55's identified offender status. R55's Medical Diagnoses List dated 12/5/25 documents R55's diagnoses includes Schizophrenia, Schizoaffective Disorder, Anxiety, and Dementia with Mood Disorder. 2. R4's Census Detail dated 12/5/25 documents R4 was admitted to the facility 8/7/23. R4's CHIRP background check was dated for 9/6/24. R4's Electronic Medical Record did not include checks of the Illinois Sex Offender (ISO) website, nor the Illinois Department of Corrections Sex Registrant (IDOCSR) website. 3. R13's Census Detail dated 12/3/25 documents R13 was admitted to the facility 8/5/25. R13's CHIRP background check was dated for 10/1/25. 4. R16's Census Detail dated 12/9/25 documents R16 was admitted to the facility 8/27/25. R16's comprehensive Electronic Medical Record did not include a CHIRP background check. 5. R31's Census Detail dated 12/5/25 documents R31 was admitted to the facility 9/5/25. R31's comprehensive Electronic Medical Record did not include a CHIRP background check. 6. R33's Census Detail dated 12/3/25 documents R33 was admitted to the facility 10/1/20. R33's ISO and IDOCSR website checks were dated 5/3/23. 7. R46's Census Detail dated 12/5/25 documents R46 was admitted to the facility 9/8/25. R46's comprehensive Electronic Medical Record did not include a CHIRP background check as of 12/4/25. R46's ISO and IDOCSR	S9999		

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S9999	Continued from page 3 website checks were dated 11/26/25. 8. R49's Census Detail dated 12/5/23 documents R49 was admitted to the facility 9/16/25. R49's comprehensive Electronic Medical Record did not include a CHIRP background check. 9. R66's Census Detail dated 12/3/25 documents R66 was admitted to the facility 8/29/25. R66's CHIRP background check was dated for 10/1/25. On 12/5/25 at 12:20 PM, V1 Administrator, she had found some information located in the administration portion of the resident's Electronic Medical Record and acknowledged surveyors do not have access to that portion of the record. V1 further stated she could not find any information to refute the above listed missing and late background checks and website checks. V1 provided two small (adhesive note pages) indicating R4 was admitted to the facility 8/7/23 and R4's CHIRP was dated 9/6/24, R16 was admitted to the facility 8/27/25 and had no CHIRP, R31 was admitted to the facility 9/5/25 and had no CHIRP, R46 was admitted to the facility 9/8/25 and had no CHIRP, and R49 was admitted to the facility 9/16/25 and had no CHIRP. The facility's Resident Roster and Form 802 Matrix dated 12/02/25 documents 52 residents reside in the facility. (C)	S9999		