

Illinois State Department of Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTIONS		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 3000304		(X2) MULTIPLE CONSTRUCTION A. BUILDING B. WING		(X3) DATE SURVEY COMPLETED 11/07/2025	
NAME OF PROVIDER OR SUPPLIER SILVIS CENTER FOR NURSING REHAB & CARE				STREET ADDRESS, CITY, STATE, ZIP CODE 1455 HOSPITAL ROAD , SILVIS, Illinois, 61282			
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)		ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)		(X5) COMPLETION DATE	
S0000	Initial Comments		S0000				
	Annual Licensure Survey						
S9999	Final Observations		S9999				
	Statement of Licensure Findings:						
	1 of 2						
	300.3210a)1)						
	300.3210a)2)A)B)C)						
	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.						
	1) Residents shall have the right to be treated with courtesy and respect by employees or persons providing medical services or care and shall have their human and civil rights maintained in all aspects of medical care as defined in the State Operations Manual for Long-Term Care Facilities.						
	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						

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 would endanger the health or safety of the resident or other residents. This requirement in not met, as evidence by, Based on interview and record review the Facility failed to answer call lights and provide care in a timely and dignified manner for four of ten Residents reviewed (R1, R2, R10 and R13) for Resident care in a sample of ten. This failure resulted in R10 expressing frustration, negative statements and embarrassment. Findings include: Facility Call Light Accessibility and Timely Response Policy, dated 2024, documents: the purpose of this policy is to assure the Facility is adequately equipped with a call light at each Resident's bedside, toilet and bathing Facility to allow Residents to call for assistance; call lights will directly relay to a staff member or centralized location to ensure appropriate response; and all staff members who see or hear an activated call light are responsible for responding; if the staff member cannot provide what the Resident desires, the appropriate personnel should be notified; when responding to call lights, listen to the Resident's request and respond accordingly, inform Resident if you cannot meet the need and assure him/her that you will notify appropriate personnel, inform appropriate personnel of Resident needs, do not promise something you cannot deliver and if assistance is needed with a procedure, summon help by using the call light and stay with Resident until help arrives. Facility Grievance and Procedure Guidelines Policy, dated 8/2025, documents: the Facility is committed to protecting the rights of all Residents and maintaining a culture of dignity, transparency and responsiveness; Residents have the right to voice grievances without fear of coercion, discrimination, retaliation or reprisal; grievance is a concern or complaint (written or verbal) regarding care, treatment, environment, staff conduct, rights violations, safety or services; Residents/Resident Representatives have the right to file a grievance, receive prompt acknowledgment and a timely written response and be informed of the grievance process. The Facility Grievance Logs dated 6/1/25 through 11/5/25, document: concerns with call lights on 6/5/25; concerns with long call lights on 7/3/25 and 8/6/25. The Facility Resident Council Minutes, dated 6/5/25, document "concerns that Certified Nursing	S9999					

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S9999	Continued from page 2 Assistants/CNA's are turning off call lights and telling Resident's 'I will be back' and not promptly returning." The Facility Resident Council Minutes, dated 7/3/25, document old business with "concerns that Certified Nursing Assistants/CNA's are turning off call lights before Resident needs are met." a) On 11/4/25 at 11:00 am, R1 (Resident Council President) stated, "We get complaints every month that they take too long to answer the call lights. I even heard someone complain that a Resident was found sitting on the toilet for over four hours, but no one would ever admit to who did it or who it was. Everyone thinks they do not have enough staff, and I know they do the best they can, but it takes them too long sometimes to get our call lights answered and I am not sure of the solution." b) R2's Admission Record, dated 11/5/25, documents R2's primary admission (10/20/25) diagnoses including a Non-displaced Bicondylar Fracture of the Left Tibia and Fracture of the Shaft of Left Tibia. On 11/4/25, at 10:05 am, R2 (alert and oriented) sitting in recliner in room, stated, "Well, I only have one problem here, it takes them a long time to answer my call light, it normally takes them about 45 minutes, so I have to sit for a long time to get help." c) R10's Admission Record, dated 11/5/25, documents R10's primary admission (10/15/25) diagnoses including a Non-displaced Fracture of the Base of Neck of Left Femur and aftercare following Joint Replacement surgery. On 11/5/25 at 12:57 pm, R10 (alert and oriented) stated, "It takes them quite a while to answer my call light sometimes over a half an hour." On 11/4/25 at 12:54 pm, V13 (R10's Spouse) stated, "I come every single day to visit my wife, and I am usually here until almost dark. There is just not enough help on the weekends, and it can take well over a half an hour, if not more, for anyone to come help. She needs help to the bed and to the bathroom, I would help her, but they will not let me help her or I would." d) On 11/4/25 at 10:02 am, R13 stated, "I have been sitting here for over an hour waiting for them to change my brief and help me to bed. I just finished therapy, but therapy just pushes me back to my room and sets me here right inside my room, and they say that it is not their job to help me to bed, so I have to wait on one of aides to help me. Also, the doctor came and saw me during that time, so I have been sitting here for over an hour and now I have gone to the bathroom in			S9999			

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S9999	Continued from page 3 my brief. It normally takes them 45 minutes to answer my call lights, so this is not something new." On 11/5/25 at 1:55 pm, V1 (Administrator) stated, "I am aware that we have an issue with call lights and we have been working on that issue." (B) 2 of 2 300.2100 Section 300.2100 Food Handling Sanitation Every facility shall comply with the Department's rules entitled "Food Code." (Source: Amended at 49 Ill. Reg. 760, effective December 31, 2024 This requirement in not met, as evidence by, Based on observation, interview and record review the Facility failed to label/date food items stored in the refrigerator and maintain a sanitary food environment during a meal pass. This failure has the potential to affect all 71 Residents residing in the Facility. Findings include: The Facility Food Storage Guidelines Policy, dated 9/2025, documents; the Facility will follow safe handling and storage of all foods and supplies; open items will be labeled and stored in tightly covered containers; foods in the refrigerator will be covered, labeled and dated and foods will be used by its use-by date, frozen or discarded; and label leftover foods with the common name, date and time of storage. The Facility hand Hygiene Policy, dated 6/2025, documents: all staff will perform proper hand hygiene procedures to prevent the spread of infection to other personnel, Residents and visitors; hand hygiene is a general term for cleaning your hands by handwashing with soap and water or the use of an antiseptic hand rub also known as alcohol-based hand rub; staff will perform hand hygiene when indicated; when hands are visibly dirty; and after handling contaminated objects. The Facility Menu, dated 11/2/25, documents a lunch menu (11/4/25) of ham and potato casserole, beet salad, dinner roll and fruit cup. On 11/4/25 at 9:49 am, the Facility refrigerator in the			S9999			

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S9999	Continued from page 4 undated/unlabeled red and brown liquid drink (juice); a full kitchen tray of undated/unlabeled brown individual covered containers (power pudding); a tray of vanilla pudding (dated 10/27/25) and a tray of mixed vanilla and chocolate pudding (dated 10/27/25). The main designated kitchen freezer had a full gallon size baggie of chocolate chip cookies (undated). The Facility auxiliary dishwashing room refrigerator had a tray of mixed vanilla and chocolate pudding (dated 10/27/25), two half full, open containers of orange drink (undated), three individual serving size bowls with plastic lids of dry oatmeal (undated) and four pitcher containers of undated/unlabeled red and orange drink (juice). On 11/4/25 at 12:11 pm, during the lunch meal pass, V7 (Certified Nursing Assistant/CNA) requested more individual fruit containers from V5 (Dietary). V5 walked through the kitchen door into the Facility dining room and was handling approximately six individual single serve containers of mandarin oranges. A container of mandarin oranges fell out of V5's arms/hands onto a disposable cup of coffee (without a lid) that was sitting on a Resident room tray cart. The disposable full cup of coffee and one container of mandarin oranges fell onto the floor. V7 (CNA) picked up the empty disposable coffee cup and mandarin oranges off the floor. V7 disposed of the disposable coffee cup into the trash can and proceeded to air dry the individual mandarin orange container by swinging it back and forth in the air. V7 then proceeded to place the individual mandarin orange container onto a room tray that was on the room tray cart. V7 did not perform any hand hygiene. On 11/4/25 (12:00 pm through 12:30 pm), during the lunch meal pass, V7 (Certified Nursing Assistant/CNA) and V8 (CNA) were preparing room trays. V7 and V8 retrieved a plastic six-ounce cup, with bare hands and fingers, filled the cups with ice from a black plastic bin into the cup, filled the cup with juice and placed it onto each room tray. V7's and V8's fingers and hands came in contact with the ice during each cup that was filled. On 11/4/25 at 9:58 pm, V5 (Dietary) stated, "I made the pitchers of drinks this morning, but I did not date them," On 11/4/25 at 9:59 am, V6 (Dietary Manager) stated, "The power pudding is not outdated, but I did not put dates on it. I also did not think that putting dates on the drinks was necessary because we just made them and plan on using them today for lunch." V6 verified that			S9999			

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S9999	Continued from page 5 all food should be dated. On 11/5/25 at 1:45 pm, V1 (Administrator) stated, "Yes, all food that is stored in the refrigerators and freezers should be dated. Also, the staff should not be using the drink cup to scoop up ice for the drinks or picking up food off of the floor and using it for a room tray. I will have to educate the staff on infection and hand hygiene." (C)			S9999			