

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTIONS		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 0044891		(X2) MULTIPLE CONSTRUCTION A. BUILDING B. WING		(X3) DATE SURVEY COMPLETED 04/08/2026	
NAME OF PROVIDER OR SUPPLIER ALDEN DEBES REHAB & HCC				STREET ADDRESS, CITY, STATE, ZIP CODE 550 SOUTH MULFORD AVENUE , ROCKFORD, Illinois, 61108			
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S0000	Initial Comments Complaint Investigations 2613997/2972921 2614055/2973694			S0000			
S9999	Final Observations Statement of Licensure Violation 300.610a) 300.1210b) 300.1210d)1) 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 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,			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 intravenous and intramuscular, shall be properly administered. These requirements were not met as evidenced by: Based on interview and record review the facility failed to ensure residents were free from significant medication errors for 20 of 23 residents (R1-R20) reviewed for medication errors in the sample of 23. This failure resulted in R1 and R2 experiencing insomnia. This failure resulted in R1 experiencing increased pain and discomfort. The findings include: 1.R1's current care plan showed R1 received medications for treatment of insomnia, Type 2 Diabetes, neuropathy (nerve pain), and restless leg syndrome. The plan showed facility nursing staff were to administer medications as ordered for treatment of these conditions. The care plan showed R1 was cognitively intact. R1's March 2026 Medication Administration Record (MAR) showed the following physician orders for R1: Lantus Insulin 100 units/milliliters (ml), inject 25 units subcutaneously (SQ) daily at 8:00 PM for treatment of Type 2 Diabetes. Melatonin 3 mg (milligrams), give one tablet daily at 8:00 PM for insomnia. Pregabalin 100 mg, give one tablet daily at 8:00 PM for pain management. R1's MAR showed R1 did not receive these medications on 3/28/26. On 4/8/26 at 8:30 AM, R1 stated, "One evening a couple of weeks ago, I didn't get my meds. Our nurse never showed up. I didn't get my insulin. My blood sugar was a little higher the next morning but not awful. It was hard to sleep because I get meds for pain and sleep. In fact, that was one of the nights I didn't sleep at all. I couldn't get comfortable. I had pain in my legs from my neuropathy." 2.R2's current care plan showed R2 received medications for treatment of depression and insomnia. The plan showed facility nursing staff were to administer medications as ordered for treatment of these conditions. R2's March 2026 MAR showed the following			S9999			

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S9999	Continued from page 2 physician orders for R2: Trazadone 50 mg, give one tablet daily at 8:00 PM for depression. Melatonin 3 mg, give two tablets daily at 8:00 PM for depression and insomnia. R2's MAR showed R2 did not receive these medications on 3/28/26. On 4/8/26 at 8:30 AM, R2 stated she did not receive her evening medications on 3/28/26 because her nurse did not show up for her shift. R2 stated, "I didn't sleep well that night. I kept waking up. I was tired the next day." 3.R3's current care plan showed R3 received medications for treatment of hyperlipidemia, insomnia, and pain. The plan showed facility nursing staff were to administer medications as ordered for treatment of these conditions. R3 was cognitively intact. R3's March 2026 MAR showed the following physician orders for R3: Nabumetone 750 mg, give one tablet twice a day, at 8 AM and 8 PM, for joint pain. Entresto 24-26 mg, give one tablet twice a day, at 8 AM and 8 PM, for hyperlipidemia. Trazadone 50 mg, give one tablet daily at 8:00 PM for sleep disturbances. Atorvastatin 20 mg, give one tablet daily at 8:00 PM for hyperlipidemia. R3's MAR showed R3 did not receive her 8:00 PM medications on 3/28/26. On 4/8/26 at 8:15 AM, R3 stated on 3/28/26, "I never got my evening meds that night. We didn't have a nurse. My pain wasn't too awful that night." 4.R4's current care plan showed R4 had diagnoses including epilepsy, hypertension, depression, and glaucoma. R4's March 2026 MAR showed the following physician orders for R4: Vimpat 100 mg, give one table twice a day, at 8 AM and 8 PM, for treatment of epilepsy.			S9999			

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S9999	Continued from page 3 Metoprolol Tartrate 25 mg, give one table twice a day, at 8 AM and 8 PM, for hypertension. Mirtazapine 7.5 mg, give one tablet daily at 8:00 PM for depression. Trazadone 50 mg, give ½ tablet daily at 8:00 PM for depression. Latanoprost eye drops 0.0005%, install one drop to both eyes daily at 8:00 PM for glaucoma. R4's MAR showed R4 did not receive her 8:00 PM medications on 3/28/26. On 4/8/26 at 8:20 AM, R4 stated, on 3/28/26, "I didn't get my evening meds at all that night." A facility list dated 3/28/26 showed R5-R20 also did not receive their 8:00 PM medications on 3/28/26. On 4/8/26 at 11:20 AM, V2 Director of Nursing stated R1-R20 did not receive their 8:00 PM medications on 3/28/26 because "the nurse assigned to their wing from 6 PM-10PM never showed up." V2 stated she was not notified that the nurse did not show up for her shift until 3/29/26. V2 stated each resident in the facility "must be assigned to a nurse 24 hours a day, 7 days a week to provide skilled nursing to these residents." On 4/8/26 at 1:30 PM, V1 Administrator stated R1-R20 did not receive their medications on 3/28/26 because the nurse assigned their wing did not show up. V1 stated she was not notified of the incident until 3/29/26. On 4/8/26 at 10:40 AM, V8 Nurse Practitioner stated the expectation is that each resident is under the care of a nurse 24/7 while residing in the facility and resident medications are administered as ordered. V8 stated if residents do not receive pain medications and medications for sleep as ordered, it could "potentially" cause increased pain and insomnia for residents. V8 stated, "(R4) takes Vimpat for seizures so missing a dose could potentially put her at increased risk for seizures." The facility's Medication Pass Guidelines policy dated January 2025 showed resident medications are to be administered at the correct time, as prescribed by physician order, by a licensed nurse. The Facility Assessment Tool dated 4/8/26 showed the facility is to provide skilled nursing care to each resident which includes the provision of care and			S9999			

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S9999	Continued from page 4 the administration of medications by a licensed nurse, 24 hours a day, 7 days a week. (B)			S9999			