

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTIONS		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 0027987		(X2) MULTIPLE CONSTRUCTION A. BUILDING B. WING		(X3) DATE SURVEY COMPLETED 02/26/2026	
NAME OF PROVIDER OR SUPPLIER FAIRHAVEN CHRISTIAN RET CENTER				STREET ADDRESS, CITY, STATE, ZIP CODE 3470 NORTH ALPINE ROAD , ROCKFORD, Illinois, 61114			
(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			03/13/2026	
	Annual Licensure & Certification Survey						
S9999	Final Observations		S9999			03/13/2026	
	Statement of Licensure Violations						
	300.610a)						
	300.1010h)						
	300.1210a)						
	300.1210b)						
	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 300.1010 Medical Care Policies						
	h) The facility shall notify the resident's physician of any accident, injury, or significant change in a resident's condition that threatens the health, safety or welfare of a resident, including, but not limited to, the presence of incipient or manifest decubitus ulcers or a weight loss or gain of five percent or more within a period of 30 days. The facility shall obtain and record the physician's plan of care for the care or treatment of such accident, injury or change in condition at the time of notification.						
	Section 300.1210 General Requirements for Nursing and Personal Care						
	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						

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 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. These requirements were not met as evidenced by: Based on interview and record review, the facility failed to identify a significant weight loss for a resident (R4), failed to notify a resident's physician, dietician, and power of attorney for a significant weight loss and failed to obtain consistent meal intakes. These failures resulted in R4 experiencing a significant weight loss with no nutritional interventions for 22 days. This applies to 1 of 6 residents reviewed for nutrition in the sample of 28. The findings include: R4's electronic face sheet printed on 2/26/26 showed R1 has diagnoses including but not limited to chronic kidney disease stage 3, urinary tract infection, chronic obstructive pulmonary disease, and Alzheimer's disease. R4's facility assessment dated 1/19/26 showed R1 has no cognitive impairment and has not experienced weight loss. R4's care plan dated 10/24/25 showed, "My health problems may impact my nutritional status...monitor and record food intakes, monitor/record weight. Notify physician and family of significant weight change." On 2/25/26 at 8:57AM, R4 stated, "I have had a weight loss since I moved in here a few months ago. I don't think I take any nutritional supplements but			S9999			03/13/2026

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S9999	Continued from page 2 I'm not sure." R4's weight record showed on 11/12/2025 R4 weighed 124.4 lbs. On 02/11/26, R4 weighed 114.2lbs which is a -8.2% loss within 3 months. R4's dietician note dated 1/12/26 showed, "Notable downward trend in weight since admission with significant weight loss of 5.5% from October to November. Weight has since stabilized, however remains down overall...weight stability desired...Current plan of care remains appropriate as tolerated. Goal for weight and appetite stability." R4's physician's orders dated 1/20/26 showed, "Weekly weights x4 weeks to monitor downward weight trend." No weights were documented in R4's medical record for 1/21 or 1/28. The first weight for R4 after the 1/20/26 physician's order was on 2/4/26 (14 days after the order was placed and showed R4's significant weight loss). R4's meal intake logs for January and February 2026 showed R4's meal intakes were not documented/recorded on 29 out of the 57 days. On 2/26/26 at 10:48AM, V12 (Licensed Practical Nurse) stated the CNA's (Certified Nursing Assistants) obtain the weights and will give them to the nurse. We will give them to nursing administration to enter. If there is a significant weight change, we will obtain a reweigh to ensure it is accurate. We will do it the next day or day after so we make sure we get the weight. If it's a true significant weight loss, then we notify the physician and we put a dietary slip in the dietician's box to have her evaluate for interventions. I'm not sure how often the dietician is here. I think maybe once a month. V12 stated, "(R4) had a significant weight change but didn't get weighed in January. From December to February she had a significant weight loss. They reweighed and it is still a significant weight loss. February 4th she was 113lbs and reweighed on February 11th and she was 114.2lbs. If a resident is unavailable when their weight is due, then we would try and get it when they return to facility or I leave it open on the orders and tell the next shift to get the weight so we can ensure it is done." On 2/26/26 at 10:56AM, V3 (Director of Nursing) stated, "CNA's obtain the weights and give them to the nurse's and the nurse is entering them unless there is a discrepancy then they call nursing administration for further direction. If a resident is unavailable for their scheduled weight, then the	S9999				03/13/2026	

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S9999	Continued from page 3 nurse should enter a one-time order for the weight to be completed the next shift or the next day, whichever is more convenient for the resident. I think the dietician is here monthly, but she also does remote work too. If a significant weight change is noted, the nurses notify the resident's physician and power of attorney and we document that in a progress notes. We wait for direction from the physician which is usually a referral to dietician and maybe a supplement in the meantime. The dietician will send me reports for weights and any interventions when she does remote work. The last report I got from her was on 2/20/26 and she made no recommendations for (R4)." V3 then obtained the weight book for R4's unit and confirmed no weights were written down for R4 on 1/20 or 1/28. On 2/26/26 at 11:39AM, V11 (Registered Dietician) stated, "I am in the facility every other week, but I do assessments remotely on a weekly basis. I document a progress note for every resident I perform a review or assessment on. I run a weight change report once or twice a month to check for weight changes. If the staff note a weight change, they will send me a referral by e-mail or put it in my folder at the nurse's station. (R4) is on my list to review today. She lost a significant amount of weight from November to present. She did not have a weight obtained last month which is a problem because she is supposed to be a monthly weight at the very least. She had a weight loss shortly after she was admitted and stabilized and has now had another weight change. I ran my report last week and then again today. I will be recommending a health shake once or twice a day to see how she accepts that. I did not get notified on 2/4 of (R4's) significant weight change. I just pulled the report last week and haven't done my assessments yet. I would say this is a problem that I haven't been notified. I would have requested a reweigh to ensure it was accurate and since it was, I would have implemented a nutritional shake right away to hopefully stabilize or increase her weight." The facility's policy titled, "Policy and Procedure for Resident Weights" dated 9/22/25 showed, "Policy: To monitor weights and weight changes that may indicate a significant weight change in the resident's nutritional status. Significant changes in weight...7.5% gain or loss in 3 months...4. All weights must be documented in the weight book and in (electronic medical record)...6. The clinical nurse manager or designee will complete the paperwork (fax) found in the weight book to notify the resident's Doctor/Nurse Practitioner of weight changes...8. Weekly weights will be done as			S9999			03/13/2026

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S9999	Continued from page 4 follows...b. any resident with a 5% or greater weight loss or gain over the past month. C. any resident with a physician's order for weekly weights." "B"			S9999			03/13/2026