STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	ASL510164	A. BUILDING: _____ B. WING _____	C 07/12/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
ENCORE VILLAGE	350 W SCHAUMBURG RD SCHAUMBURG, IL 60194

(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) COMPLETE DATE
A 000	Initial Comment Complaint Investigation IL202657 295.2010b)2)3)A-H) Facility Reported Incident IL202656 No Deficiencies cited.	A 000		
A2010	Section 295.2010 Termination of Residency This Regulation is not met as evidenced by: Violation Section 295.2010 Termination of Residency b) Involuntary termination of residency 2) A 30 day written notice of involuntary residency termination shall be provided to the resident, the resident's representative, or both, and the ombudsman. (Section 80(b) of the Act) 3) The notice shall be on a form prescribed by the Department and shall contain all of the following: A) The stated reason for the residency termination; B) The proposed date of the residency termination; C) A statement of the resident's right to appeal; D) The steps that the resident or the resident's representative must take to initiate an appeal;	A2010		

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A2010	Continued From page 1 E) A statement of the resident's right to continue to reside in the establishment until a decision is rendered; F) A toll free telephone number to initiate an appeal; G) A written hearing request form, together with a postage paid, pre-addressed envelope to the Department; and (Section 80(b) of the Act) H) The name, address, and telephone number of the person at the establishment offering relocation assistance pursuant to subsection (b)(1). Based on interview and record review, the facility failed to issue a resident a notice of involuntary discharge for one resident (R1) reviewed for involuntary discharge in a sample of two. Findings include: R1 admitted to the facility on 10/13/25 with a diagnosis of Dementia and CHF. R1's medical record documents R1 was sent to the hospital on 2/22/26 and admitted for CHF Exacerbation. R1's progress note dated 3/10/26 documented by E2, DON, documents "IDT meeting held with (E3, Social Worker) and therapy manager with (R1's POA) over the phone. Discussed that due to (R1)'s increase level of care needs and management of behaviors; she does not meet the safety criteria to return to her AL (Assisted Living) apartment. Voiced understanding. Briarwood team to assist family with transition."	A2010		

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A2010	Continued From page 2	A2010		

R1's progress note dated 3/16/26 documented ny E1, Executive Director, documents "Resident will be transferring at the HCC due to a higher level of care need. Per family, POA, apartment will be vacated no later than 4/17/2026. IDT have been notified. Resident is currently at the HCC for rehab then transfer to LTC."

On On 7/11/26 at 9:00 am, E1 (Executive Director), was asked for the involuntary discharge (IVD) paperwork presented to R1 and R1's power of attorney (POA). E1 stated that R1 was not given an IVD becuase R1's POA agreed to have R1 transfered to a different faciltiy. E1 stated that R1 was sent to the hospital for low oxygen and then discharged from the hospital to (Company's Skilled Nursing Facility (SNF)) for rehab. While R1 was still at the SNF, E1 had a conversation with the family that R1 would need a higher level of care. After speaking to the family, R1's POA agreed to have R1 discharged after rehab instead of going back to Assisted Living. E1 was asked if at any point the facility told the family they refused to take R1 back after Rehab. E1 stated, "No, we talked to the family about R1 needing a higher level of care, the family was in agreement, so we found her placement in long-term care, but they decided to take her to an Assisted Living facitlity in (Out of State)."

On 7/11/26 at 9:53 am, R1's POA was asked to describe the timeline of events that lead to R1 being discharged. R1's POA stated "(R1) was living in AL and was sent to the hospital due to a CHF exacerbation. After a couple of days, (R1) was then discharged from the hospital to the (SNF) portion of (Facility). (R1) was in rehab for 2 weeks and then I got call from (E3) saying that (R1) can't stay in rehab anymore and she wasn't allowed to discharge back to AL. I mentioned that

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A2010	Continued From page 3	A2010		

(R1) has a life contract and that's when (E3) said she'll have to call me back. She called me back and when I questioned (E3) about (R1) not being able to go back to AL, (E3) told me it wasn't an option. That (R1) had to discharge from rehab to a higher level of care and wasn't allowed to go back to AL. I wasn't given a choice or paperwork that (R1) couldn't go back."

On 7/11/23 at 10:36 am, E1 was asked when R1 was discharged to a higher level of care, where did the facility document what needs could not be met? E1 replied "That will be whatever SNF has. Family was the one who shared that information with us that resident will be staying in (SNF) for (Long-Term Care) therefore needs to vacate the apartment as there is no need for an AL Apt since she will not be returning.

On 7/11/236 at 10:55 AM, E3, SNF Social Services, was asked why R1 she wasn't allowed to return to AL and what was the needs the AL facility could not meet. E3 stated "I don't know what needs couldn't be met. That wasn't my decision. You'd have to ask (E2, DON). I was just told that R1 couldn't go back to AL, so that's what was relayed to the family. From what I understand, (R1) didn't pass her home safety evaluation."

On 7/11/26 at 11:28 am, E2 DON, was asked why R1 was told she could not go back to AL and what needs couldn't be met. E2 stated "We discussed with (R1)'s POA that R1 needed psych services. R1 had a lot of paranoia and we were concered for her safety when she was in her apartment behind closed doors." E2 stated she remembers the conversation with the family about R1 not being able to return to AL, but doesn't remember any details of what was actually discussed.

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A2010	Continued From page 4 On 7/11/26 at 1:20 pm, E1 was asked again about the conversation she had with R1's POA about R1 not being able to return to the facility and why the facility didn't issue an IVD. E1 stated "When I talked to (R1's POA) she told me that she was discharging her (R1) from the (SNF) and taking her to an (AL) place up in (Out of State). She didn't menion anyhting that she didn't have an option." E1 was asked about E2 and E3 telling R1 she could not return to AL. E1 stated "I was not aware they told her she didn't have an option and couldn't return to (AL). Had I known, we would have followed our (IVD) procedure"	A2010		