STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	ASL510246	A. BUILDING: _____ B. WING _____	C 06/22/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
MILL CREEK ALZHEIMER'S SCC	3319 GINGER CREEK DR SPRINGFIELD, IL 62711

(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 Incident Report Investigation IL 202382 Allegation can be substantiated. 295.6000 a)1)2)13	A 000		
A6000	Section 295.6000 Resident Rights This Regulation is not met as evidenced by: Section 295.6000 Resident Rights Type 2 Violation a) No resident shall be deprived of any rights, benefits, or privileges guaranteed by law, the Constitution of the State of Illinois, or the Constitution of the United States solely on account of his or her status as a resident of an establishment, nor shall a resident forfeit any of the following rights: 1) The right to live in an environment that promotes and supports each resident's dignity, individuality, independence, self-determination, privacy, and choice and to be treated with consideration and respect; 2) The right to respect for bodily privacy and dignity at all times, especially during care and treatment; 13) The right to be free of abuse or neglect or financial exploitation or to refuse to perform labor; Based on record review and interview, the establishment failed to ensure residents maintian the right to respect of bodily privacy and dignity, and the right to be free of abuse. These failures	A6000		

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A6000	Continued From page 1 caused harm to a residents, (R2, R3, and R4.) Findings include: The 06-12-2026 Incident Report was reviewed. The incident report includes documentation that on 06-12-2026 at 4:27pm, staff reported that R1 was observed kissing R2 on the cheek. Staff were able to separate and redirect both R1 and R2. Shortly afterwards, staff reported that R1 was observed to have a hand underneath R3's shirt, and that R1 and R3 were separated. The incident report also includes documentation that E1 (Executive Director) was told by a family member that R1 was observed on 06-11-2026 patting R2's leg and genital area. Documentation also includes that all resident's power of attorneys were notified and that the residents' nurse practitioner was also notified. Documentation includes that all residents will be monitored for sign and symptoms of distress, that R1 will be redirected away from female residents. Documentation also includes that R1's wife lives in another establishment and that staff will remind R1 that R1's spouse lives elsewhere, and that staff will engage R1 in activities. This incident was also reported to the Department. The establishment's investigation of the incident includes witness statements. E3's (Resident Assistant,) statement includes documentation that E3 witnessed the incident involving R1 and R2 and that she intervened immediately, redirecting R1 away from R2. Documentation includes that R2 did not appear to be upset. E4's (Resident Assistant,) statement includes documentation that E4 witnessed the incident between R1 and R2, that R2 had a smile on her face after being kissed by R1, and that she intervened immediately. Documentation also	A6000		

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A6000	Continued From page 2	A6000		

includes that E4 witnessed the incident between R1 and R3 and that she intervened immediately to separate both residents. Documentation includes that R1 and R3 did not say anything and that R3 did not appeear to be upset.

The establishment's incident reports were reviewed for the past six months. No other incidents of resident to resident sexual assault were noted.

R1's record was reviewed; including but not limited to: service plan, physician certification, and progress notes. R1 was admitted to the establishment on 07-01-2025 and R1's diagnoses include dementia. R1's Saint Louis University Mental Status (SLUMS) examination score is two out of 30. R1's 03-19-2026 service plan includes documentation that R1 will be re-directed away from female residents and that staff will engage R1 in programming activities.

R2's record was reviewed, including but not limited to service plan, physician certification, and progress notes. R2's diagnoses include dementia. R2's SLUMS examination score is one out of 30. R2's 03-20-2026 service plan includes documentation added 06-12-2026 that staff will monitor R2 for any signs and symptoms of distress, pain, or discomfort.

R3's record was reviewed, including but not limited to service plan, physician certification, and progress notes. R3's diagnoses include Alzheimer's disease. R3's SLUMS examination score is zero out of 30. R3's 03-02-2026 service plan includes documentation added on 06-12-2026 that R3 will be monitored by staff for any signs and symptoms of distress, pain, or discomfort.

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A6000	Continued From page 3 R4's record was reviewed, including but not limited to service plan, physician certification, and progress notes. R4's diagnoses include Alzheimer's disease. R4's SLUMS examination score is zero out of 30. R4's 05-12-2026 service plan includes documentation added 06-12-2026 that staff will monitor R4 for any signs of distress, pain, or discomfort. Z1 was interviewed during the investigation and states that staff made him aware of the incident with R1. Z1 states that he doesn't think R4 was harmed and that he doesn't even think she remembers the incident. Z1 states that R4 doesn't remember who he is sometimes and that he thinks everything was handled well with the situation. E1 was interviewed during the investigation. E1 states that R1 thinks that female residents are his wife. E1 states that R1's wife lives at another establishment. E1 states that families for R1 through R4 were all made aware of the incident with R1 and that none of them were upset. E1 states that this is not an everyday occurrence for R1; as R1 has had no previous sexual behaviors and that R1 has not had any since this incident. E1 states that she doesn't believe R1 had any intent of harm towards the female residents. E1 states that none of the residents had any side effects noted following the incident and that none of the four residents remembered the incident occurring when she did an investigation.	A6000		