STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	ASL510096	A. BUILDING: _____ B. WING _____	07/10/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
CARRIAGE CROSSING SENIOR LIVING	909 GREEN MILL RD ARCOLA, IL 61910

(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 Annual Licensure Survey Violation: 295.2040 d)	A 000		
A2040	Section 295.2040 Disaster Preparedness This Regulation is not met as evidenced by: TYPE 1 VIOLATION -Repeat Section 295.2040 Disaster Preparedness d) The establishment shall conduct a tornado drill on each shift during February of each year for employees. Base on record review and interviews, the establishment failed to conduct tornado drills on all three shifts in the month of February. This failure creates a substantial probability of severe harm (or death) to a resident or residents. Findings include: Review of establishment tornado drills for 2026 noted only one tornado drill completed on 4/27/26 on first shift. On 7/9/26 at 12:25 P.M., E7 (Maintenance Director) stated that he was not aware that tornado drills were supposed to be done on all three shifts every year in the month of February. E7 confirmed that only the one tornado drill was completed on 4/27/26.	A2040		