STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	145308	A. Building B. Wing	04/24/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
River View Rehab Center	50 North Jane Elgin, IL 60123

For information on the nursing home's plan to correct this deficiency, please contact the nursing home or the state survey agency.

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information)
F 0600 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Protect each resident from all types of abuse such as physical, mental, sexual abuse, physical punishment, and neglect by anybody. **NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on interview and record review the facility failed to protect a resident from sexual abuse for (R4). This failure affected (R4 &R5) reviewed for sexual abuse in the sample of 7.The findings include:R4's facility assessment dated [DATE] shows R4 has no cognitive impairment. R5's facility assessment dated [DATE] shows R5 is moderately cognitively impaired. The Facility Reported Incident (FRI) sent to the state agency dated 4/20/26 with date of report as 4/14/26, documents: Allegation: Sexual Abuse, Abuse was substantiated. The FRI documents that R5 touched R4 inappropriately. R4 was sent to the hospital for physical exam and R5 was sent for psychiatric evaluation. R4 was also moved to another floor. The report also shows that R4 said R5 touched her breast, denied touching her lower part, and they did not have sex. R5 stated he did not do anything wrong.On 4/24/26 at 10 AM, R4 was sitting in her wheelchair alert and pleasant in the common area. R4 stated a couple of weeks ago, I woke up with [R5] kissing me all over my face while rubbing his hands on both of my breasts. I immediately screamed at him get the f--k out of my room! R4 said she recalled being so angry at that time, about it. Since then, she has been moved to first floor. R5 had not attempted to go near her. On 4/24/26 at 10:15 AM, R5 was in his room lying in bed with his eyes closed. When this surveyor asked to speak to R5. R5 stated if this was about the incident 9 days ago, he was not going to talk about it, he will not admit or deny to anything, he had spoken to the police, and that was the end of that, besides it was an old issue.On 4/24/26 at 12:07 PM, V5 (Psyche Rehab Staff) said R4 came to her on 4/14/26 and said R5 groped" her. R5 was rubbing her breast while kissing her. R4 said she woke up to R5 offering me cigarettes so he could touch me, I kicked him out of my room, get out! V5 said this was sexual abuse so she reported the incident to the Social Service Director (SSD-V7) and Administrator (V1) immediately. On 4/24/26 at 11:23 AM, V4 (Registered Nurse-RN) said she was the Nurse working on 4/14/26. V4 said she was the nurse of R4 and R5. V4 said V2 (Director of Nursing) informed her to transfer R5 to a psych unit, that R5 had touched R4 inappropriately. R4 was being moved to first floor. R4 was also being sent to the hospital for medical exams. R4 was sent to a local hospital. R5 was sent to the psych unit by petition.On 4/2/26 at 11:38, V2 (Director of Nursing-DON) said it was reported to her that R5 touched R4 inappropriately. V2 said R5 was sent out for psych eval and R4 was sent to the local hospital for evaluation. R4 and R5 were discharged back to the facility. R4 was moved from 2nd floor to first floor away from R5. R4 is wheelchair bound. R5 is up and about independently. Both R4 and R5 were being monitored closely.R4's hospital records dated 4/14/26 timed at 1:46 PM show, you had general checkup today, you are being discharged . No new orders noted.R5's progress notes dated 4/14/26 timed at 5:29 PM show, R5 was being sent back to the facility after a psych eval was completed.On 4/24/26 at 11: 31 AM, (V7) Social Service Director) SSD said she was the one who completed the abuse investigation when R4 reported that R5 entered her room, kissed her, and R5 rubbed both of her breast. R4 demonstrated the contact by using a rubbing motion with her right hand pointing to both of her breasts. V7 (SSD) said R4 noticed R5 was giving her cigarettes prior to the incident and being extra helpful to her by pushing her around in her wheelchair. The investigation resulted in sexual abuse being substantiated. R4 and R5 are now on different floors. (continued on next page)

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE

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F 0600 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	It was important for residents to feel safe. Abuse of any kind was not tolerated at the facility.The facility policy on Abuse Prevention and Reporting (undated) documents, This facility affirms the right of our residents to be free from abuse, neglect, exploitation, misappropriation of property, deprivation of goods and services by staff, or mistreatment. This facility therefore prohibits abuse, neglect exploitation, misappropriation of property and mistreatment of residents. This will be done by: .Implementing systems to promptly and aggressively investigate all reports and allegations of abuse, neglect, exploitation, misappropriation of property and mistreatment, and making the necessary changes to prevent future occurrences. Abuse means any physical or mental injury or sexual assault inflicted upon a resident other than by accidental means. Sexual abuse includes but not limited to sexual harassment sexual coercion or sexual assault including non-consensual to non-competent to consent sexual activity. Sexual abuse is nonconsensual sexual contact of any type with resident. Sexual abuse includes but not limited to, unwanted intimate touching of any kind specially shows of breasts and perennial area.