

Department of Health & Human Services
Centers for Medicare & Medicaid Services

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Form Approved OMB
No. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 145620	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 06/16/2026
NAME OF PROVIDER OR SUPPLIER Evervella of Swansea		STREET ADDRESS, CITY, STATE, ZIP CODE 100 Rosewood Village Drive Swansea, IL 62220	
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 0550 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Honor the resident's right to a dignified existence, self-determination, communication, and to exercise his or her rights. **NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on interview and record review, the Facility failed to answer call lights timely for 2 of 6 residents (R1, R3) reviewed for resident rights in the sample of 6. Findings include: 1-R1's Face Sheet documents R1 was admitted to the facility on [DATE] with diagnoses including chronic obstructive pulmonary disease (COPD) and age-related physical debility. R1's Minimum Data Set (MDS) dated [DATE] documented R1 was cognitively intact. On 6/11/26 at 1:50 PM, R1 stated it usually takes about 30 minutes for staff to respond after pressing the call light. 2-R3's Face Sheet documents R3 was admitted to the facility on [DATE] with diagnoses including diabetes mellitus and heart disease. R3's MDS dated [DATE] documented R3 was cognitively intact. On 6/11/26 at 12:55 PM, R3 stated sometimes call light waits take a long time, and it is usually worse on weekends due to short staffing. On 6/11/26 at 12:34 PM, V5, Ombudsman, stated residents have been complaining that call lights are not being answered in a timely manner. The Facility's Resident Council Meeting Minutes dated 3/31/26 document staff response time getting ready for bed as an issue. The Facility's Resident Council Meeting Minutes dated 4/30/26 document long call light response time as an issue. On 6/16/26 at 7:40 AM, V1, Administrator, stated call light response time has been an issue, so all staff were in-serviced on 6/15/26 regarding call light policy, timeliness, and resident requests. The Facility's Call Light Policy documents staff will respond to residents' requests and needs in a timely and courteous manner.		

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