STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	145732	A. Building B. Wing	05/14/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Arc at Normal	509 North Adelaide Normal, IL 61761

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 ensure residents were free from physical abuse for two (R3 and R4) of three residents reviewed for abuse in a total sample of 17 residents.Findings include:R4's Care Plan printed on 5/14/2026 documents an admission date of 01/16/2024. The Care Plan Documents R4 with the following diagnoses Anxiety, Dementia with Mood Disturbances, Hypothyroidism, Gastro-Esophageal Reflux Disease, Hypertension, Supraventricular Tachycardia, Vitamin D Deficiency, Alzheimer's Disease with Late Onset, and Major Depressive Disorder. The Care Plan further documents R4 wanders the unit aimlessly and may attempt to exit seek or pace the unit. R4's Care Plan dated 1/21/2025 documents potential for aggressive behavior related to Dementia. R4 may become combative with cares and attempt to kick, hit, push, grab, or bite others with interventions to observe R4's location and change in aggression level. Provide diversion when in common areas.R4's Care Plan dated 3/5/2026 documents R4 has potential to be physically aggressive due to Dementia; R4 may hit, kick, push or scratch others.R4's Care plan dated 12/20/2025 documents a focus on R4's wandering behavior with interventions to distract residents from wandering by offering pleasant diversions, structured activities, food, conversation, television or a book.R4's Minimum Data Set (MDS) dated [DATE] documents R4 has severe cognitive impairment.R4's Incident Note dated 4/5/2026 documents Employee reported an alleged physical altercation between two residents. Residents immediately separated. POA's, MD, police and ombudsmen notified of alleged physical altercation.On 5/14/2026 at 12:25 p.m., R4 was up in Broda chair in the common area. R4 attempted to interview but was not able to comprehend the questions.R3's Care Plan printed on 5/14/2026 documents an admission date of 08/23/2024. The Care Plan documents R3's diagnoses as Hypo-Osmolality and Hyponatremia, Metabolic Encephalopathy, Polydipsia, Atrioventricular Block, Depression, History of [NAME] Thrombosis and Embolism, Blood and Blood-Forming Organs Disorders Involving the Immune Mechanism, Mild Cognitive Impairment, Sarcoidosis of Lung, Parkinson's Disease, Dementia, Psychotic Disturbances, Mood Disturbances, Anxiety, Sleep Apnea, Neurocognitive Disorder with Lewy Bodies, Parkinsonism.R3's Minimum Data Set (MDS) dated [DATE] documents R3 as cognitively intact.R3's Incident Note dated 4/5/2026 documents Employee reported an alleged physical altercation between two residents. Residents immediately separated. POA's, MD, police and ombudsmen notified of alleged physical altercation.On 5/14/2026 at 9:58 a.m., R3 was sitting in R3's chair in R3's room. R3 stated R4 wandered in R3's room one day and R4 grabbed the TV remote, R3 took the remote back from R4 and R4 hit R3 in the face. R3 stated that R3 hit R4 back to R4's face.On 5/14/2026 at 11:54 a.m., V4 Licensed Practical Nurse (LPN) stated V4 was on duty on 4/5/2026 and responded to R3's room after V4 heard R3 yelled. V4 stated R4 informed V4 that R4 wandered to R3's room and took R3's television (TV) remote control. R3 stated R3 took the TV remote back from R4, and R4 hit R3 to R3's face. R3 stated that R3 hit R4 back.On 5/14/2026 at 11:59 a.m., V5 Certified Nurse Assistant (CNA) stated V5 was on duty on 4/5/2026. V5 stated V5 heard R3 yelling get out of my room, don't hit me in the face again! V5 stated when V5 went to check on R3, R4 was coming out from R3's room. V5 (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	stated R3 told V5 that R4 hit R3 in R3's face. V5 stated R4 was self-ambulatory at the time of the incident and R4 is known to wander around the unit.On 5/14/2026 at 12:17 p.m., V1 Administrator stated during V1's investigation, R3 told V1 that R4 wandered to R3's room and grabbed R3's remote. R3 took the remote back and R4 hit R3. R3 told V1 that R3 hit R4 back. V1 stated R3 and R4 hitting each other was a form of abuse and should have been prevented.Facility's Abuse Prevention and Reporting dated March 2026 documents This facility affirms the right of 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. In order to do so, the facility has attempted to establish a resident sensitive and resident secure environment. The purpose of this policy is to assure that the facility is doing all that is within its control to prevent occurrences of abuse, neglect, exploitation, misappropriation of property, deprivation of good and services by staff and mistreatment of residents. This will be done by:Establishing an environment that promotes resident sensitivity, resident security and prevention of mistreatment.Identifying occurrences and patterns of potential mistreatment.