

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 145753	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 01/21/2026
NAME OF PROVIDER OR SUPPLIER LA Bella of Danville		STREET ADDRESS, CITY, STATE, ZIP CODE 1701 North Bowman Danville, IL 61832	

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)
<p>F 0725</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Many</p>	<p>Provide enough nursing staff every day to meet the needs of every resident; and have a licensed nurse in charge on each shift.</p> <p>Based on interview and record review, the facility failed to ensure sufficient licensed nursing staff were present for each shift in each building. This failure has the potential to affect all 54 residents residing in the South Building. Findings include: The Facility Assessment Tool dated 12/2024 through 12/2025 documents the following: Staffing Plan for licensed nurses including Registered Nurse (RN) and Licensed Practical Nurses (LPN): Refer to facility assessment and CMS minimum staffing rule. This same record further documents staffing should include one RN each shift and three LPN's for night shift. The Daily Nurse Staffing Sheets dated 1/1/2026 through 1/20/2026 documents no RN coverage for at least 8 consecutive hours a day on 1/3/2026, 1/4/2026, 1/11/2026, and 1/17/2026. This same record documents on 1/17/2026, the facility had no RN's and/or LPN's working the 11pm to 7am shift in the South Building. Further documents two LPN's working night shift in the north building. On 1/21/26 at 9:16am, V8 Assistant Director of Nursing confirmed there was no RN coverage for 8 consecutive hours in the facility on 1/3/2026, 1/4/2026, 1/11/2026, and 1/17/2026. V8 stated the nursing management staff are on-call on weekends if needed. On 1/21/25 at 2:50pm, V2 Director of Nursing stated V2 was notified by V1 Administrator at 8pm on 1/17/26 of no nursing coverage for the 11pm to 7am shift for the south building. V2 stated V2 worked from 3am to 5am. The Facility's Midnight Census Report dated 1/15/2026 documents 54 residents reside in the south building of the facility.</p>

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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<p>F 0727</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Many</p>	<p>Have a registered nurse on duty 8 hours a day; and select a registered nurse to be the director of nurses on a full time basis.</p> <p>Based on interview and record review, the facility failed to have a Registered Nurse (RN) providing services for at least eight consecutive hours a day, seven days a week. This failure has the potential to affect all 138 residents currently residing in the facility. Findings include: The Facility Assessment Tool dated 12/2024 through 12/2025 documents the following: Staffing Plan for licensed nurses including Registered Nurses (RN): Refer to facility assessment and CMS minimum staffing rule. This same record further documents staffing should include one RN per shift. The Daily Nurse Staffing Sheets dated 1/1/2026 through 1/20/2026 documents no RN coverage for at least 8 consecutive hours a day on 1/3/2026, 1/4/2026, 1/11/2026, and 1/17/2026. On 1/21/26 at 9:16am, V8 Assistant Director of Nursing confirmed there was no RN coverage for 8 consecutive hours in the facility on 1/3/2026, 1/4/2026, 1/11/2026, and 1/17/2026. V8 stated the nursing management staff are on-call on weekends if needed. Resident Council Meeting Minutes for October, November, and December 2025 document short staffing and staffing concerns. The Facility's Midnight Census Report dated 1/15/2026 documents 138 residents reside in the facility.</p>		