

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 146123	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 01/13/2026
NAME OF PROVIDER OR SUPPLIER Lacon Rehab and Nursing		STREET ADDRESS, CITY, STATE, ZIP CODE 401 9th Street Lacon, IL 61540	
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 0921</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Many</p>	<p>Make sure that the nursing home area is safe, easy to use, clean and comfortable for residents, staff and the public.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on observation, interview, and record review, the facility failed to provide adequate heating and hot water and failed to maintain the building in good repair. This has the potential to affect 59 residents residing in the facility. Findings include: The facility's Homelike Environment/Maintenance policy, revised 12/1/25, documents that housekeeping and maintenance services are necessary to maintain a sanitary, orderly, and comfortable interior. This form documents that the facility is to be comfortable and have safe temperature levels. The facility's Cold Weather policy, revised 11/24/25, documents that the facility will conduct regular building maintenance and inspection, including maintenance of heating and air conditioning systems and thermostats. The facility's Resident Call Bells policy, revised 11/5/24, documents that the facility will be adequately equipped to allow residents to call for staff assistance through a communication system which relays the call directly to a staff member or to centralized staff work area from each resident's bedside, toilet, and bathing facilities. The communication system shall be checked regularly to ensure operability and that it can be reached by the resident. On 1/12/25 at 10:30am, a tour was conducted throughout the facility with V3, Maintenance Director. Water temperatures were taken in various rooms, and observations were made of the bathrooms and shower rooms. The water temperatures on the 100 hall ranged from 110 degrees Fahrenheit to 116 degrees Fahrenheit. The water temperatures on the 200 hall ranged from 75 to 77 degrees Fahrenheit. V3 stated that there has been a problem with a mixing valve on the 200 hall, which was supposed to be fixed last week when the plumber was here, but apparently it is not. R8's bathroom (room [ROOM NUMBER]) did not have running water to the sink or the toilet. There was a wet bath blanket on the floor under the sink and a black slimy-looking substance in the toilet. room [ROOM NUMBER]'s bathroom did not have running water. There were wet, yellow-stained bath blankets on the floor under the sink. The toilet had a black, slimy-looking substance in it, and a black mold-like area in front of the toilet. V3 stated that the sink and the toilet are clogged, and he has not had a chance to fix them. V3 stated that he was going to check the mixing valve for the hot water on the 200 hall side and turn up the boiler. At 2:30pm V3 verified that the water and room temperatures remained the same. The ceiling tiles across the entire front hallway were discolored with brownish stains, and a mildew smell was noted. V3 stated that when they turned up the boilers, the condensation leaked into the tiles. V3 stated that he is the only maintenance person and tries to keep up with all the repairs, but it is hard. On 1/12/26 at 11:15am, R1 was sitting in his room with a jacket on and wrapped in a blanket. R1 stated that it is always cold on the southeast side of the building. R1 also stated that it smells moldy in the front of the building, and the ceiling tiles appear to be wet. The walls behind R1's chair had gouges in the wall, with the plaster crumbling out onto the floor. R1 pushed his call light, which came on, but when he released his thumb from the button, the call light shut off. The</p> <p>(continued on next page)</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
FORM CMS-2567 (02/99) Previous Versions Obsolete	Event ID:	Facility ID: 146123
		If continuation sheet Page 1 of 2

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<p>F 0921</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Many</p>	<p>call light on bed two was only open wires; there was no call button at the end of the cord. At 11:30am, R2 was in his room with a long-sleeve shirt on and a coat. R2 stated that it was warm in his room till Saturday afternoon. R2 stated that he told staff on Saturday and Sunday that it was too cold in his room, but did not get a response. R2 stated that he stayed in his bed on Sunday, wrapped in his covers. At 11:45am, R3 was in her room with a long-sleeve shirt on and a shawl over her shoulders. R3 had a blanket over her legs. R3 stated that it is cold in her room. R3 had a clock on the wall in her room, which showed the time and temperature, which was 63 degrees Fahrenheit. On 1/13/26 at 9:30am, R5 was ringing a handheld bell to call for assistance. R5 stated that he does not have a call light, but his roommate does. R5 also stated that there is no hot water in his room. R6 and R7 verified that there is no hot water in their rooms. room [ROOM NUMBER] and 211 call lights stayed on the entire day, and room [ROOM NUMBER]'s call light would go on by itself. On 1/13/26 at 9:30am, V1, Administrator, verified that the water and room temperatures are not at the proper temperatures. V1 verified that there are a lot of repairs that need to be done, but with only one person, it is hard to keep up. V1 stated that the condensation built up on the pipes and leaked onto the ceiling tiles. On 1/13/25 at 10:00am, V9, Certified Nursing Assistant, stated that room [ROOM NUMBER] and 211 call lights ring all the time. V9 stated room [ROOM NUMBER]'s call light will go on by itself. V9 also verified that the water gets warm on the 200 side of the building, but not hot. V9 stated that water is heated in an electric tea pot at the nurses' station, then used to shower or wash up. V9 stated that the issues with the water and the call lights have been going on for quite some time. On 1/13/26 at 10:30am, V3 stated that water temperature on the 200 side of the building was running in the mid-seventies. V3 stated that there is a problem with the mixing valve. V3 also stated that the boiler was just fixed, but it is not heating right on the 100 side of the building. The facility's Daily Census Sheet, printed 1/12/26, documents a census of 59.</p>		