

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

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No. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  146169	(X2) MULTIPLE CONSTRUCTION  A. Building B. Wing	(X3) DATE SURVEY COMPLETED  08/29/2025
NAME OF PROVIDER OR SUPPLIER  Fargo Health Care Center		STREET ADDRESS, CITY, STATE, ZIP CODE  1512 West Fargo Chicago, IL 60626	
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 - Some	Honor the resident's right to a dignified existence, self-determination, communication, and to exercise his or her rights.  (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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<p>F 0550</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p><b>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY**</b> Based on observation, interviews and review of records the facility failed to provide admission contract/agreement packets in a timely manner to 5 out of 5 residents (R1, R6, R7, R8 and R9). Findings include: R1 is [AGE] years old, initially admitted on [DATE]. R1 medical diagnosis includes hypertension, major depression (single episode), bipolar disorder, anxiety disorder. Per MDS assessment of R1 dated 06/20/2025, R1 has a BIMS (Brief Interview of Mental Status) score of 15 or cognition is intact. On 08/26/2025 at 10:12 AM, R1 stated that facility let him sign a contract for services recently. R1 presented a Resident admission Packet. R1 stated that it is a contract for services and terms and condition for resident to be in the facility. R1 stated that he dislikes the contract because there are blank areas and missing pages. R1 stated that facility did not give him enough time to review the contract. R1 stated that V1 (Administrator) called him to a meeting. In that meeting, V1 told him that he told other residents not to sign the contract which was not true. V1 stated that he was upset because the contract may change his living arrangement. R1 said, I have been living for two (2) and a half year and I don't want to change what I can and cannot do because of the contract. On 08/26/2025 at 12:36 PM, V6 (MDS Coordinator/Licensed Practical Nurse) stated that the only time she encountered R1 about admission contract was when there was a meeting on the conference room. R1 came in saying don't force me to sign. V1 (Administrator) told R1 to talk in her office. On 08/26/2025 at 01:01 PM V3 (Director of Social Services/PRSD) stated that admission contract includes policies and regulation, resident rights, position and payment. Facility is three (3) years behind in providing resident admission contracts to residents already in the facility. For that reason, facility hired a consultant (V5). V3 stated that admission contract packet needs to be provided during admission. V3 stated that admission contract is important because it provides information about living in a nursing home. V3 stated that R1 was provided admission contract about a month ago. Per R1's record (face sheet), R1 has been a resident in the facility since 01/10/2023. On 08/26/2025 at 01:29 PM, V1 (Administrator) stated that every resident coming in the facility needs admission contract. V1 stated that about seven (7) months ago when she did an audit there are residents that was not offered an admission contract. V1 stated that V5 (Social Service Consultant/Outside Vendor) was hired to address this issue by offering admission contracts to residents. V1 stated that admission contracts need to be given to residents upon admission. V1 stated that R1 did not sign the admission contract. V1 provided list of five (5) residents that does not have admission contracts based on facility's audit. Five (5) residents are as follows: R1 first admission date 01/10/2023, R6 first admission date 10/05/2023, R7 first admission date 02/11/2025, R8 first admission date 10/03/2023 and R9 first admission date 06/03/2024. Majority of residents (R1, R6, R8 and R9) were without admission contracts for more than a year after admitted in the facility. Facility was requested to provide policy and procedure to address concerns related to residents not provided Resident Admissions Packet / Contract during or at the time of admission. Facility presented admission Policies dated 01/2025 that does not include providing residents admission Packet / Contract during or at the time of admission. Per facility's Resident admission Packet (by Health Care Council of Illinois) dated 12/2022. The admission packet is a contract that defines the relationship between resident and facility. It provides the following: Facility's rights and obligations, resident's rights and obligations, financial agreement between facility and residents, term and termination of the contract with automatic renewal every year and other stipulations that will affect both residents and facility.</p>		