

Fondulac Rehabilitation and Health Care Center

Report ID: CCN 145266
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§ 1 Facility Identity

Facility	Fondulac Rehabilitation and Health Care Center
CCN	145266
Location	901 ILLINI DRIVE, EAST PEORIA, IL, 61611
Ownership type	For profit - Corporation
Certified beds	98

§ 2 CMS Federal Record

Civil money penalties on file	\$146,601
Deficiency citations — current cycle	17 (70% vs prior 24 months (10))
Deficiency citations — prior 24 months	10
Immediate Jeopardy — current cycle	0
Actual-harm (G+) citations — current cycle	1
Special Focus Facility status	Not listed
Abuse icon	No

§ 3 Federal Penalties in Context

This facility — penalties on file	\$146,601
IL state average	\$105,530 (this facility is 1.4× the IL average)
National average	\$31,239 (this facility is 4.7× the national average)

Averages are CMS-published per-facility fine amounts for the same snapshot. Figures and multiples are stated as published; no inference is drawn here.

§ 4 Current-Cycle Deficiencies

The current survey cycle records the following 17 federal deficiency citations (CMS F-tags). Scope/severity is CMS's own A–L grade; "Immediate Jeopardy" is CMS's most serious classification.

F-TAG	FINDING (CMS)	SCOPE/SEV.	SOURCE
F760	Ensure that residents are free from significant medication errors.	G	Standard survey
F727	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.	F	Standard survey
F880	Provide and implement an infection prevention and control program.	F	Standard survey
F803	Ensure menus must meet the nutritional needs of residents, be prepared in advance, be followed, be updated, be reviewed by dietician, and meet the needs of the resident.	F	Complaint
F812	Procure food from sources approved or considered satisfactory and store, prepare, distribute and serve food in accordance with professional standards.	F	Complaint
F623	Provide timely notification to the resident, and if applicable to the resident representative and ombudsman, before transfer or discharge, including appeal rights.	E	Standard survey
F625	Notify the resident or the resident's representative in writing how long the nursing home will hold the resident's bed in cases of transfer to a hospital or therapeutic leave.	E	Standard survey
F656	Develop and implement a complete care plan that meets all the resident's needs, with timetables and actions that can be measured.	E	Standard survey
F755	Provide pharmaceutical services to meet the needs of each resident and employ or obtain the services of a licensed pharmacist.	E	Standard survey
F645	PASARR screening for Mental disorders or Intellectual Disabilities	D	Standard survey
F686	Provide appropriate pressure ulcer care and prevent new ulcers from developing.	D	Standard survey

F690	Provide appropriate care for residents who are continent or incontinent of bowel/bladder, appropriate catheter care, and appropriate care to prevent urinary tract infections.	D	Standard survey
F756	Ensure a licensed pharmacist perform a monthly drug regimen review, including the medical chart, following irregularity reporting guidelines in developed policies and procedures.	D	Standard survey
F758	Implement gradual dose reductions(GDR) and non-pharmacological interventions, unless contraindicated, prior to initiating or instead of continuing psychotropic medication; and PRN orders for psychotropic medications are only used when the medication is necessary and PRN use is limited.	D	Standard survey
F770	Provide timely, quality laboratory services/tests to meet the needs of residents.	D	Standard survey
F609	Timely report suspected abuse, neglect, or theft and report the results of the investigation to proper authorities.	D	Complaint
F610	Respond appropriately to all alleged violations.	D	Complaint

§ 5 Ownership & Chain Context

Ownership record	Chain: PETERSEN HEALTH CARE (12 facilities); Owner on file: PETERSEN, MARK (individual)
Ownership chain	PETERSEN HEALTH CARE (12 facilities)
Penalties vs chain average	\$146,601 vs \$102,503 (1.4× the chain average)
Current deficiencies vs chain average	17 vs 10.8 (1.6× the chain average)

§ 6 CMS Care Compare Star Ratings

Overall	1 / 5 (state avg 2.6 · US avg 3)
Health inspection	1 / 5 (state avg 2.8 · US avg 2.8)
Staffing	1 / 5 (state avg 2.1 · US avg 2.9)
Quality measures (QM)	3 / 5 (state avg 3 · US avg 3.7)

§ 7 Record Provenance

CMS data as of	Jun 2026
Independent verification	https://www.medicare.gov/care-compare/details/nursing-home/145266
Snapshot SHA-256	10bcc0825d61f3b7abcf98098a2d5e1014cdc8e3c1d49d1462435772a68fa694
Methodology & version	v1.0 — https://www.caregiverhelpnow.com/methodology

§ 8 For Your Attorney

1. The full survey file (Form 2567) for each inspection cited above is available from the state survey agency or by FOIA request.
 2. Quarterly staffing data: CMS Payroll-Based Journal (PBJ) public use files, CCN 145266.
 3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash 10bcc0825d61.
 4. Deficiency F-tags cited above are searchable in CMS QCOR (qcor.cms.gov).
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This snapshot is a frozen record of CMS Care Compare data as of Jun 2026. Independently verifiable at the URL above. Generated by CareSentinel under Nodal Logics LLC. Compiled under CareSentinel methodology v1.0, documented at <https://www.caregiverhelpnow.com/methodology>; the Snapshot SHA-256 above pins this record to that methodology version.

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