

Timbercreek Rehab and Health Care Center

Report ID: CCN 145275
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§ 1 Facility Identity

Facility	Timbercreek Rehab and Health Care Center
CCN	145275
Location	2220 STATE STREET, PEKIN, IL, 61554
Ownership type	For profit - Corporation
Certified beds	202

§ 2 CMS Federal Record

Civil money penalties on file	\$196,504
Deficiency citations — current cycle	23 (130% vs prior 24 months (10))
Deficiency citations — prior 24 months	10
Immediate Jeopardy — current cycle	1
Actual-harm (G+) citations — current cycle	1
Special Focus Facility status	SFF candidate
Abuse icon	Yes — CMS abuse icon currently listed

§ 3 Federal Penalties in Context

This facility — penalties on file	\$196,504
IL state average	\$105,530 (this facility is 1.9× the IL average)
National average	\$31,239 (this facility is 6.3× 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 23 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
F689	Ensure that a nursing home area is free from accident hazards and provides adequate supervision to prevent accidents.	L • Immediate Jeopardy	Complaint
F580	Immediately tell the resident, the resident's doctor, and a family member of situations (injury/decline/room, etc.) that affect the resident.	G	Complaint
F944	Conduct mandatory training, for all staff, on the facility's Quality Assurance and Performance Improvement Program.	F	Complaint
F725	Provide enough nursing staff every day to meet the needs of every resident; and have a licensed nurse in charge on each shift.	F	Complaint
F880	Provide and implement an infection prevention and control program.	F	Standard survey
F881	Implement a program that monitors antibiotic use.	F	Standard survey
F584	Honor the resident's right to a safe, clean, comfortable and homelike environment, including but not limited to receiving treatment and supports for daily living safely.	E	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
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
F695	Provide safe and appropriate respiratory care for a resident when needed.	E	Standard survey
F686	Provide appropriate pressure ulcer care and prevent new ulcers from developing.	D	Complaint
F690	Provide appropriate care for residents who are continent or incontinent of bowel/bladder,	D	Complaint

	appropriate catheter care, and appropriate care to prevent urinary tract infections.		
F697	Provide safe, appropriate pain management for a resident who requires such services.	D	Complaint
F600	Protect each resident from all types of abuse such as physical, mental, sexual abuse, physical punishment, and neglect by anybody.	D	Complaint
F641	Ensure each resident receives an accurate assessment.	D	Standard survey
F645	PASARR screening for Mental disorders or Intellectual Disabilities	D	Standard survey
F655	Create and put into place a plan for meeting the resident's most immediate needs within 48 hours of being admitted	D	Standard survey
F657	Develop the complete care plan within 7 days of the comprehensive assessment; and prepared, reviewed, and revised by a team of health professionals.	D	Standard survey
F686	Provide appropriate pressure ulcer care and prevent new ulcers from developing.	D	Standard survey
F689	Ensure that a nursing home area is free from accident hazards and provides adequate supervision to prevent accidents.	D	Standard survey
F692	Provide enough food/fluids to maintain a resident's health.	D	Standard survey
F693	Ensure that feeding tubes are not used unless there is a medical reason and the resident agrees; and provide appropriate care for a resident with a feeding tube.	D	Standard survey
F761	Ensure drugs and biologicals used in the facility are labeled in accordance with currently accepted professional principles; and all drugs and biologicals must be stored in locked compartments, separately locked, compartments for controlled drugs.	D	Standard survey

§ 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	\$196,504 vs \$102,503 (1.9× the chain average)
Current deficiencies vs chain average	23 vs 10.8 (2.1× 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)	1 / 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/145275
Snapshot SHA-256	fadb5b355966ee63f4d9135bbd3f4a1b45943ca7ff1cd56ae5a2e328f1270843
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 145275.
3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash fadb5b355966.
4. Deficiency F-tags cited above are searchable in CMS QCOR (qcor.cms.gov).

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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