

ACCOLADE HC OF PAXTON ON PELLs

Report ID: CCN 145603

Generated: 2026-07-23T18:51:03.708Z

§ 1 Facility Identity

Facility	ACCOLADE HC OF PAXTON ON PELLs
CCN	145603
Location	1001 EAST PELLs STREET, PAXTON, IL, 60957
Ownership type	For profit - Limited Liability company
Certified beds	106

§ 2 CMS Federal Record

Civil money penalties on file	\$153,560
Deficiency citations — current cycle	20 (900% vs prior 24 months (2))
Deficiency citations — prior 24 months	2
Immediate Jeopardy — current cycle	0
Actual-harm (G+) citations — current cycle	3
Special Focus Facility status	Not listed
Abuse icon	No

§ 3 Federal Penalties in Context

This facility — penalties on file	\$153,560
IL state average	\$105,530 (this facility is 1.5× the IL average)
National average	\$31,239 (this facility is 4.9× 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 20 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
F686	Provide appropriate pressure ulcer care and prevent new ulcers from developing.	G	Complaint
F699	Provide care or services that was trauma informed and/or culturally competent.	G	Complaint
F686	Provide appropriate pressure ulcer care and prevent new ulcers from developing.	G	Standard survey
F801	Employ sufficient staff with the appropriate competencies and skills sets to carry out the functions of the food and nutrition service, including a qualified dietician.	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	Standard survey
F812	Procure food from sources approved or considered satisfactory and store, prepare, distribute and serve food in accordance with professional standards.	F	Standard survey
F882	Designate a qualified infection preventionist to be responsible for the infection prevent and control program in the nursing home.	F	Standard survey
F880	Provide and implement an infection prevention and control program.	F	Complaint
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
F600	Protect each resident from all types of abuse such as physical, mental, sexual abuse, physical punishment, and neglect by anybody.	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

F628	Provide the required documentation or notification related to the resident's needs, appeal rights, or bed-hold policies.	D	Complaint
F689	Ensure that a nursing home area is free from accident hazards and provides adequate supervision to prevent accidents.	D	Complaint
F550	Honor the resident's right to a dignified existence, self-determination, communication, and to exercise his or her rights.	D	Standard survey
F688	Provide appropriate care for a resident to maintain and/or improve range of motion (ROM), limited ROM and/or mobility, unless a decline is for a medical reason.	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
F695	Provide safe and appropriate respiratory care for a resident when needed.	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
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	Complaint
F692	Provide enough food/fluids to maintain a resident's health.	D	Complaint

§ 5 Ownership & Chain Context

Ownership record	Chain: ACCOLADE HEALTHCARE (7 facilities); Owner on file: FREEDMAN, MOSHE (individual)
Ownership chain	ACCOLADE HEALTHCARE (7 facilities)
Penalties vs chain average	\$153,560 vs \$70,293 (2.2× the chain average)
Current deficiencies vs chain average	20 vs 10.9 (1.8× 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/145603
Snapshot SHA-256	d535f34a8f3557e1d4ef68310bb9b580ebb5b7a52c2e2ab62b3a7dfb56c2cc96
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 145603.
 3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash d535f34a8f35.
 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.

CareSentinel operates as an independent legal-advertising service, not a law firm, and does not recommend, endorse, or vouch for any attorney (ABA Model Rule 5.4). This document restates the public federal record only; it is not legal advice and forms no attorney-client relationship. Inspection findings are point-in-time CMS survey results, not a determination that any specific resident was harmed.