SOUTH ELGIN LIVING & REHAB CENTER

Report ID: CCN 145825
Generated: 2026-07-23T19:21:42.872Z

§ 1 Facility Identity

Facility	SOUTH ELGIN LIVING & REHAB CENTER
CCN	145825
Location	746 WEST SPRING STREET, SOUTH ELGIN, IL, 60177
Ownership type	For profit - Corporation
Certified beds	90

§ 2 CMS Federal Record

Civil money penalties on file	$230,403
Deficiency citations — current cycle	17 (467% vs prior 24 months (3))
Deficiency citations — prior 24 months	3
Immediate Jeopardy — current cycle	0
Actual-harm (G+) citations — current cycle	2
Special Focus Facility status	Not listed
Abuse icon	**Yes — CMS abuse icon currently listed**

§ 3 Federal Penalties in Context

This facility — penalties on file	$230,403
IL state average	$105,530 (this facility is 2.2× the IL average)
National average	$31,239 (this facility is 7.4× 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
F600	Protect each resident from all types of abuse such as physical, mental, sexual abuse, physical punishment, and neglect by anybody.	G	Complaint
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.	G	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
F684	Provide appropriate treatment and care according to orders, resident’s preferences and goals.	E	Standard survey
F740	Ensure each resident must receive and the facility must provide necessary behavioral health care and services.	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
F759	Ensure medication error rates are not 5 percent or greater.	E	Standard survey
F880	Provide and implement an infection prevention and control program.	E	Standard survey
F881	Implement a program that monitors antibiotic use.	E	Standard survey
F582	Give residents notice of Medicaid/Medicare coverage and potential liability for services not covered.	D	Standard survey
F583	Keep residents' personal and medical records private and confidential.	D	Standard survey
F677	Provide care and assistance to perform activities of daily living for any resident who is unable.	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
F813	Have a policy regarding use and storage of foods brought to residents by family and other visitors.	D	Standard survey

§ 5 Ownership & Chain Context

Ownership record	Chain: LINEAGE HEALTHCARE (5 facilities); Owner on file: PARKWAY BANK AND TRUST COMPANY (organization)
Ownership chain	LINEAGE HEALTHCARE (5 facilities)
Penalties vs chain average	$230,403 vs $164,664 (1.4× the chain average)
Current deficiencies vs chain average	17 vs 14.2 (1.2× 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	2 / 5 (state avg 2.1 · US avg 2.9)
Quality measures (QM)	2 / 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/145825
Snapshot SHA-256	26d4649dee4c059d5c37a59d4fd6eb5c77562cabede990a91c8cc28d49c07584
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 145825.
3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash 26d4649dee4c.
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.