



**LONG TERM  
CARE GUIDE  
FOR  
NORTHWESTERN  
ILLINOIS**

Boone, Carroll, DeKalb, Jo Daviess, Lee, Ogle,  
Stephenson, Whiteside and Winnebago Counties

**NORTHWESTERN ILLINOIS  
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## PREFACE

The Northwestern Illinois Area Agency on Aging (NIAAA) is a not-for-profit agency authorized by the Illinois Department on Aging to plan, coordinate, and administer programs for older persons in northwestern Illinois including Boone, Carroll, DeKalb, Jo Daviess, Lee, Ogle, Stephenson, Whiteside and Winnebago counties. NIAAA's goal is to develop a comprehensive network of services for older persons in order to assist them to remain independent and in their own homes as long as possible.

NIAAA works at the local level with agencies servicing seniors listed in this directory to coordinate services and pool resources. NIAAA also funds social and nutrition services with Title III Older Americans Act Funds under a three year area plan. These services are available to individuals sixty years of age and older on a donation basis. No person is denied service due to unwillingness or inability to contribute. Please contact the NIAAA office for further information.

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NIAAA is physically accessible and programmatically accessible to people with disabilities.

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# INTRODUCTION

Northwestern Illinois Area Agency on Aging has developed the ***Long Term Care Facility Guide for Northwestern Illinois*** to help individuals become careful consumers of long term care. The intent of the guide is to provide basic information on how to choose the best facility to meet your loved one's needs.

Use this guide as a starting point in your search. While the information in this guide will be helpful, it will be just as important to tour several facilities, talk to staff and residents and ask many questions. If possible, we encourage you to take your loved one on visits to potential facilities before a decision is made.

Information in this directory has been expanded to provide information on each long term care facility in northwestern Illinois. The expanded information should be helpful as you evaluate the facilities in your area. Each long term care facility is unique with different strengths, weaknesses and features.

As the regional area agency covering northwestern Illinois, Northwestern Illinois Area Agency on Aging can provide additional information and assistance regarding long term care. Feel free to call our agency at (800) 542-8402 or (815) 226-4901. Please feel free to provide us with feedback on the format and/or content of this guide.

# LONG TERM CARE FACILITIES BY COUNTY — AT A GLANCE

## **BOONE COUNTY**

Homebridge Rehabilitation and Nursing  
Maple Crest Care Center  
Northwoods Care Centre

## **CARROLL COUNTY**

Big Meadows  
Carroll County Good Samaritan Center

## **DEKALB COUNTY**

Bethany Health Care and Rehab Center  
DeKalb County Rehab and Nursing Center  
Oak Crest  
Pine Acres Rehab and Living Center  
Sandwich Rehabilitation and Health Care  
Shabbona Healthcare Center, Inc.  
Willow Crest Nursing Pavilion

## **JO DAVIESS COUNTY**

Elizabeth Nursing Home  
Galena-Stauss Senior Care Community  
Morgan Memorial Home

## **LEE COUNTY**

Amboy Healthcare and Rehabilitation Center  
Dixon Healthcare and Rehabilitation Center  
Franklin Grove Nursing Center  
Heritage Nursing Center

## **OGLE COUNTY**

Neighbors Rehabilitation Center  
Oregon Healthcare Center  
Pinecrest Manor  
Polo Rehabilitation and Healthcare Center  
Rochelle Gardens Health Care  
Rochelle Rehabilitation and Healthcare Center

## **STEPHENSON COUNTY**

Freeport Rehab & Health Care Center  
Lena Living Center  
Manor Court of Freeport  
Parkview Home  
Provena St. Joseph Center  
Stephenson Nursing Center

## **WHITESIDE COUNTY**

Coventry Living Center  
Four Seasons Living Center  
Harbor Crest Home  
Parkway Center  
Pleasant View  
Prophets Riverview  
Resthave Home of Whiteside County  
Rock Falls Rehabilitation & Health Care Center  
Sterling Pavilion  
Tammerlane Health Care Center  
Transitions Nursing and Rehabilitation Center  
Winning Wheels

## **WINNEBAGO COUNTY**

Alden Alma Nelson Manor  
Alden Park Strathmoor  
Alpine Fireside Health Center  
Amberwood Care Centre  
Asta Care Center of Rockford  
East Bank Center  
Fair Oaks Rehab & Health Care Center  
Fairhaven Christian Retirement Center  
Fairview Nursing Plaza  
Medina Manor Nursing Center  
P.A. Peterson Center for Health  
Provena Cor Mariae Center  
Provena St. Anne Center  
River Bluff Nursing Home  
Rosewood Care Center  
Willows Health and Rehabilitation Center



# LONG TERM CARE FACILITY GUIDE



## What will I learn from using this guide?

Northwestern Illinois Area Agency on Aging has developed this guide to help older adults, family members and caregivers choose a long term care facility. This guide will provide a wealth of information and options and can be used as a starting point in your decision-making process.

Using this guide you will:

- Determine when long term care is needed
- Make sure other options have been explored
- Consider payment options
- Learn about facilities available in your community
- Review specific information about long term care facilities you may be interested in
- Know what questions to ask when choosing a facility
- Learn how to obtain quality care

## Before I consider care in long term care facility, what community service options are available?

Before you decide that a long term care facility is the only option, make sure you explore other community services:

- **Home Care Services** are available under Medicare, insurance or private pay. Depending on the type of care needed, hourly rates for in-home care range from \$12 per hour (home care aide) to \$41 per hour (nursing care). 24-hour in-home care costs over \$100 a day. For more information on home care options, call NIAAA at (800) 542-8402 for a copy of the *NIAAA Home Care Guide*.
- **Subsidized home care** is available for eligible individuals through the Illinois Department on Aging Community Care Program. Asset limits apply along with other eligibility criteria. Contact NIAAA or case management agencies listed in Appendix 3 of this Guide for more information.
- **Home Delivered Meals** including a sack lunch may also be an option. Contact Information and Assistance agencies listed in Appendix 3 for more information.
- **Adult Day Service** provides activities, meals and socialization. Adult day service is particularly helpful for caregivers who are working or need respite. Adult day service costs from \$30 a day to \$60 a day. A Community Care Program subsidy may be available. Call NIAAA or your local case management agency listed in Appendix 3 for more information.

- **Assisted Living Facilities** provide housing, meals, housekeeping, personal care and health related services. Assisted living does not provide 24-hour nursing home care. Contact NIAAA for more information and to request NIAAA's *Guide to Assisted Living In Northwestern Illinois*
- **Supportive living facilities** provide housing, meals, housekeeping and personal care and are subsidized by Medicaid. Income and asset requirements apply. For more information contact your local Case Coordination Unit or the NIAAA office.
- **Other states** may have additional options such as residential care, adult foster care, and group homes. Contact the NIAAA office or the national Eldercare Locator service at 1-800-677-1116 or go to [www.aoa.gov](http://www.aoa.gov) for more information.

### **How will I know when long term care facility care is needed?**

Most individuals move to a long term care facility from the hospital after surgery or a serious illness. Frequently, not enough time is available in a medical crisis to explore all options. It's best to gather information in advance before a crisis forces a quick decision. Take time to explore what is needed and be a careful consumer.

Care in a long term care facility should be explored when an individual:

- Cannot be left alone and needs 24 hour supervision.
- Has a need for daily medical care or assistance with medications.
- Falls frequently with other concerns about safety.
- Has problems with mobility and other activities needed to stay at home.

Ideally, the whole family should be involved in the decision, especially the individual moving to the long term care facility. It is also important to seek the opinion of the family physician.

A free screening and consultation is available to help decide if long term care is the most appropriate choice. Case Coordination Units (list in Appendix 3) are available to make a home or hospital visit to complete an assessment and discuss service options. Case Coordination Units are responsible for completing the required screening that must take place before an individual enters a long term care facility.

### **How can I find which long term facilities are in my immediate area?**

Page ii of the Introduction to this guide contains a list of long term living facilities by county. A list is also available on the Illinois Department of Public Health website: [www.idph.state.il.us](http://www.idph.state.il.us). Complete information on each facility in northwestern Illinois by county is contained in Appendix 3 of this guide.

### **What types of care are available?**

Long term care facilities may have one or more levels of care:

**Skilled nursing care** provides medical nursing care on a 24 hour basis by registered nurses, licensed practical nurses and nurses aides. Physical, occupational and other therapies are also available. This level of care is the most similar to hospital care.

**Intermediate care** provides 24 hour nursing care on a less intense level. Intermediate care is for residents who have long term illness but whose condition is stable.

**Sheltered care** provides less intensive health care. Emphasis is on personal care and socialization. Sheltered care provides assistance with bathing, dressing, ambulation and meal preparation. Some health services are provided such as supervision of medications, monitoring and supervision of stable medical conditions. Sheltered care does not provide routine nursing care and residents must generally be independent with most activities.

### **What types of services do facilities provide?**

Care provided in a long term care facility is designed to restore and maintain the resident's highest level of physical, mental, emotional and social well being. Services provided include:

- Food services
- Nursing services
- Physician services
- Pharmaceutical services
- Social services
- Therapy
- Activities

### **Are all long term living facilities the same?**

While all long term care facilities are required to provide the same core group of services, long term care living facilities differ in the following ways:

- Some long term care facilities are small while others are very large.
- Facilities may be owned by a for-profit, not-for-profit organization or unit of government.
- They may be individually operated or part of a large chain of facilities.
- Some are part of larger housing complexes offering additional levels of service.
- Some facilities accept Medicaid while some limit the number of Medicaid residents.
- Special medical services may or may not be available.
- The ratio of those over 60 to those under 60 may differ.

### **How can I choose the right facility?**

Your first consideration in choosing a long term care living facility should be the level of care offered. Does it match the level the individual needs? Another important consideration is location. Is the facility conveniently located for frequent visits? Staffing is also very important. Does the facility have adequate staff? Do staff treat residents with respect? Do they respond to need for assistance quickly? If financial help is needed, does the facility take Medicaid? Is a limit put on the number of Medicaid beds?

The checklist located in Appendix 1, Section I will help you choose the facility that is right for you. The Long Term Care Ombudsman Program (listed in Appendix 3) will provide additional help on how to choose a long term care facility.

## What should I look for in a long term care facility?

When considering a long term care facility, it is important to:

- Visit more than one facility.
- Tour each facility.
- Review each facility's marketing packet.
- Ask questions and use the checklist included in Appendix 1 at the end of this section.
- Visit each facility several times and at different times.
- Make an unannounced visit.
- Talk to residents in the facility to ask about their experiences.
- Talk to as many staff at the facility as possible.
- Get information from the Illinois Department of Public Health and your local ombudsman (listed in Section V).



Under state and federal law, every person in a long term care facility has the right to good care. The law requires that nursing homes help residents “attain or maintain” their highest level of physical, mental and emotional well-being.

## What type of paperwork is required?

Each long term care facility has its own admission application and contract. Admission applications require detailed information about the individual's health status, savings and income. A contract must also be signed. The contract will outline services provided, costs (including deposit information) and the rights and duties of the resident. The resident, resident's legal representative or member of the resident's immediate family must sign the contract. Make sure you read and fully understand the contract since it contains important information. Ask questions about anything you do not understand. Do not sign the contract unless all questions are answered. Consider having another family member review the contract. It is preferable to have your attorney review the contract since it is a legal document.

## How much does care in a long term care facility cost?

In the United States, the average daily cost of long term care is \$192 or over \$70,080 a year. In northwestern Illinois, annual costs range from \$128 to \$190 a day. Costs vary among facilities due to factors such as level of care, double/single rooms and other charges. Additional charges in most facilities are medical services, drugs, therapy, diagnostic services and personal services such as telephone, laundry, haircuts, etc.

When you visit the facility, make sure you ask:

- How much is the monthly rate and what is covered?
- What are the extra charges?
- Is a deposit required and is it refundable?
- How often do fees increase?
- Does the home accept Medicare, Medicaid and private insurance?
- Is there a limit on the number of Medicaid patients the home accepts?



## What are the sources of payment?

Most long term care costs are paid for privately out-of-pocket. Other payment sources include Medicaid (50% all individuals have this payment source), Medicare (2%). A small percentage of individuals have private insurance or coverage through Veterans Benefits:

**Private Pay:** Income, savings and other assets are used to pay for care.

**Medicare:** Medicare payment is short-term and is only available for skilled nursing care. Medicare will only pay for a maximum of a 100 days, although usually the number of days paid for are much less. Medicare is limited to individuals with a “qualified” illness preceded by a hospital stay of at least 3 days. Other Medicare requirements also apply. In order to receive Medicare payment, the nursing home must be Medicare certified.

**Medicaid:** A facility must be certified by the Medicaid program in order to accept Medicaid. Medicaid is a state/federally funded program providing assistance to financially needy individuals meeting income, asset and other criteria. Medicaid coverage is available for both skilled and intermediate care. If Medicaid payment is needed now or if it will be needed in the future, make sure the facility is Medicaid certified. If the facility does not take Medicaid or limits the number of Medicaid beds (called Medicaid distinct part), the facility can discharge the resident when funds run out. The resident will have to relocate to a facility with an available Medicaid bed.

To be eligible for Medicaid, an individual’s assets must be \$2,000 or less. An individual can also have a prepaid burial plan or life insurance valued at \$1,500 or less and keep \$30 a month in spending money. An individual’s home is exempt if he/she expects to return home within the next six months.

Medicaid requirements are complex and it is important to apply as soon as possible. The Department of Human Services determines Medicaid eligibility. Call your local office (Appendix 3) to obtain an application and make an appointment. Information on how to apply can also be obtained from staff at the long term care facility, the Long Term Care Ombudsman Program, the local senior information and assistance site, NIAAA or the local Case Coordination Unit (also included in Appendix 3).

Special Medicaid rules apply if an individual is married and one spouse needs nursing home care. Assets and/or income can be transferred from the individual needing nursing home care to a spouse. The couple’s residence is exempt. All exempt marital assets and non-exempt assets (up to the \$101,640 limit) of the community spouse are protected.

If the income of the community spouse is less than \$2,541, an income transfer from the nursing home spouse may be allowed to raise the monthly income to this level. If the community spouse has monthly income more than \$2,541, the community spouse may be asked to pay a portion of the nursing home costs.

For more information, call Prairie State Legal Services (Appendix 3) to request a copy of the booklet “Financial Help for In-Home Care and Nursing Home Care” (also on the PSLS website) or request the Spousal Impoverishment pamphlet from the Department of Human Services (Appendix 3).

**Veterans:** Eligible veterans may qualify for veterans' coverage; however, only a limited number of nursing homes have contracts to provide care. The long term care facility listings in Appendix 2 specify whether a facility has a contract with the Veterans Office.

The only Veterans Nursing Home in the northern part of Illinois is:

Illinois Veterans Home - LaSalle  
1015 O'Connor Avenue  
LaSalle, Illinois 61301  
815-223-0303  
Total Beds: 120  
Licensed: Skilled Care  
Alzheimer's Section

A long waiting list exists so it is important to apply early.

**Wartime Veterans' Improved Pension Program :**

The Veteran's Administration offers a program called the Improved Pension Program. This program provides financial assistance to wartime veterans and/or their surviving spouses who reside in long term care or assisted living facilities. Many American wartime veterans are unaware that they may be entitled to this pension benefit, which can pay out over \$1,500 per month.

An application must be completed and other criteria must be met in order to be eligible for the program. The application is over 30 pages long and must be completed accurately, or you must start the whole application process over. There is help however.

The American Association for Wartime Veterans (AAWV) helps complete these applications for free. The AAWV serves as an information catalyst for these individuals, educating them about the monies available through this Federal program mandated by Congress and administered by the Veterans Administration

For more information, visit the AAWV website at [www.usawarvet.com](http://www.usawarvet.com) or call 1-800-850-4947.

**Insurance:** If your relative has purchased long term care insurance, contact the company or your agent to determine what benefits are available. By the time nursing home care is needed, it is usually too late to purchase long term care insurance since the person will have a pre-existing condition or the long term care insurance premium will be unaffordable.

## **What other suggestions would be helpful in choosing a long term care facility?**

The following “Tips” and long term care facility checklist will help you decide which is the most appropriate home for your relative:

- Contact your long-term care ombudsman (Appendix 3) and ask for assistance. Ombudsmen visit nursing homes regularly and provide information to help choose a nursing home that best meets your relative’s needs.
- If your relative will be entering the facility directly from a hospital, hospital staff such as social workers or nurses are available to help. If help is not offered, make sure to ask for social work assistance.
- If you think your family member is not ready to be discharged from the hospital, you have the right to appeal. When you receive the notice of discharge, immediately call the phone number listed on the discharge notice and request assistance with an appeal.
- If your relative is being discharged from the hospital, do not feel pressured to choose the first home with a vacancy. However, if the hospital finds a bed for your relative within a 50 mile radius and the bed is refused, the patient is immediately liable for the remainder of the hospital bill. You may appeal this decision, or you may want to consider temporary placement in another long term care facility while you continue your search.
- Nursing homes are selective in accepting residents. Expect to be asked questions about income and assets.
- Visit as many nursing homes as you can (a minimum of three is recommended). Make an appointment with the admissions coordinator to arrange for a tour. Use the checklist contained in the appendix to help remember features of each home. Make a follow-up unannounced visit at a later date at a different time of day to observe meals and activities and talk to staff and residents.
- The location of the nursing home is a very important consideration. It will affect how frequently you may visit your loved one. Nursing home residents need to have frequent visitors to get the best care.
- Talk to friends, relatives or neighbors you know who have recently used long term care facilities. Their opinion and experience may help you make a decision.
- Ask for and read the most current Illinois Department of Public Health Inspection Report. This report identifies conditions which state inspectors identified during an annual or more frequent visit. Inspection reports must be made available at each nursing home, the Illinois Department of Public Health and the long-term care ombudsman (Appendix 3) also have copies.
- The Center for Medicare and Medicaid Services website ([www.medicare.gov](http://www.medicare.gov)) go to “nursing home compare”) contains information on nursing homes and quality indicators, or you may call 1-800-MEDICARE for information.

- The Illinois Department of Public Health website, [www.idph.state.il](http://www.idph.state.il), contains information about violations found by the Illinois Department of Public Health during inspections.

### **What are my rights after I move to a long term living facility?**

Residents of long term care facilities retain all rights as a U.S. citizen and are also covered by a special bill of rights outlined in the Illinois Nursing Home Care Reform Act. Residents have rights relating to medical care and treatment, financial rights, personal rights, civil rights and others including:

- Full exercise of religion.
- Uncensored communication and access to visitors.
- Respect and privacy in medical and personal care.
- Wear own clothes and keep and use personal property.
- Refuse to perform manual labor for the facility.
- Retain a personal doctor.
- Obtain detailed medical information about one's condition.
- Participate in planning one's care and treatment, including access to medical records.
- Choose alternative treatments or refuse medical treatment.
- Be free of restraints except as ordered by the physician.
- Not be transferred or discharged against will (except for non-payment, medical or safety reasons).
- Manage one's own affairs.
- Have ready access to funds.
- Be free of abuse and neglect.

This is only a partial list of residents' rights. To obtain a detailed brochure on residents' rights in long term care facilities, contact the NIAAA office or your local ombudsman (Refer to Appendix 3).

### **Can a resident be forced to leave?**

A resident can only be transferred or discharged for:

- Non-payment.
- Medical reasons.
- Resident physical safety.
- Physical safety of other residents, facility staff or facility visitors.

The facility must follow the following steps for termination including:

- A 30-day written notice of termination.
- The right to appeal.
- The right to remain in the facility until the appeal decision is made by an Illinois Department of Public Health Hearing Officer.

Contact the long term care ombudsman program (Appendix 3) for more information.



## **Which agency regulates long term care facilities?**

Nursing homes in Illinois are licensed, regulated, inspected and/or certified by a number of public and private agencies at the state (Illinois Department of Public Health) and federal level (U.S. Department of Health and Human Services Health Care Financing Administration).

The Illinois Department of Public Health ensures nursing homes in Illinois comply with Illinois laws and federal regulations. The Illinois Department of Public Health licenses long term care facilities and ensures facilities are providing proper care. Annual unannounced on-site inspections are made and complaints are investigated by the agency.

Reports of nursing home violations (neglect, abuse, other violations) can be made 24 hours a day to the Illinois Department of Public Health's Hotline at **(800) 252-4343**. Complaints can also be submitted in writing (specific details and supporting documentation preferred) to:

Illinois Department of Public Health  
535 W. Jefferson  
Springfield, IL 62761

A complaint can be filed anonymously. It is against the law to retaliate against a resident for filing a complaint. The Illinois Department of Public Health must investigate complaints alleging abuse or neglect within seven days. If a resident's life or safety is at risk, a complaint must be investigated within 24 hours. All other complaints must be investigated within 30 days. Illinois Department of Public Health reports can be found at [www.idph.state.il.us](http://www.idph.state.il.us).

## **Where can I get legal advice?**

Prairie State Legal Services provides legal advice and representation on legal matters for seniors aged 60 and older. Legal advice regarding nursing home care is generally limited to Medicare and Medicaid requirements, living wills, powers of attorney and guardianship and involuntary discharge. Prairie State Legal Services may be able to help with an appeal related to the discharge. Since this program is funded through federal Older Americans Act funds, a fee is not charged for service; however, donations are accepted. Call Prairie State's Telephone Counseling Service listed in Appendix 3

## **Where else can I find help if I have problems or concerns?**

If you have problems about any aspect of care in a long term care facility, it is important that your concern be addressed. You will first want to contact the facility administrator to discuss the issue. All details and concerns about the problem should be discussed. The administrator should look into the concerns and get back to you promptly.

If continuing concerns exist, the Long Term Care Ombudsman Program provides information on resolving concerns and complaints. Anyone can use the ombudsman service including assisted living residents, their friends, relatives, administrators, employees or other concerned citizens.

Ombudsmen provide information, assistance, and community education about long term care issues and the rights of residents (refer to Appendix 3).

**Criminal acts** in nursing homes, such as theft and abuse, should also be reported to the local police. Do not hesitate to call if a problem exists. Private legal action can be taken against the nursing home, however, first familiarize yourself with state and federal nursing home requirements. It will be important to obtain an attorney knowledgeable in nursing home law.

**Private legal or civil action** can be taken against a long term care facility if state or federal nursing home requirements are violated. Obtain an attorney knowledgeable with nursing home law.

### **Where can I find additional information about long term care?**

For additional information on long term care contacts contact:

- National Citizen's Coalition for Nursing Home Reform, [www.nccnhr.org](http://www.nccnhr.org) has an excellent resource *Nursing Homes: Getting Good Care There*. The book is also available through the Long Term Care Ombudsman program or NIAAA.
- Illinois Department of Public Health; *How to Select a Nursing Home*, go to [www.idph.state.il.us/public/books/finding](http://www.idph.state.il.us/public/books/finding) for a list of long term care facilities anywhere in the nation, (800) 677-1116 or [anhbroc.htm](http://anhbroc.htm).
- The Eldercare Locator for help t [www.aoa.gov](http://www.aoa.gov) at the Eldercare Locator link.
- The September, 2004 issue of Consumer Reports issued a nursing home watch list. Go to [www.consumerreports.org](http://www.consumerreports.org).
- Illinois Citizens for Better Care is a statewide consumer action organization dedicated to improving the lives of residents. Contact Illinois Citizens for Better Care, 220 South State, Chicago, IL 60604, (312) 663-5120.
- The Alzheimer's Association ([www.alz.org](http://www.alz.org)) has a tip sheet on *Visiting Tips* and a booklet on how to choose a dementia care facility.

### **Where can I find information for me, a caregiver?**

Caregiving does not end when a loved one enters a long term care facility. Information and support services are available for caregivers to provide advice, consultation and support with many issues. Contact the NIAAA office, the local Information and Assistance agency or your local Case Coordination Unit (listed in Appendix 3) for information on caregiver support services available in your area such as support groups and educational programs.

### **What should I know before placement in a long term care facility?**

It will be important for both the person entering the long term care facility and the caregiver to prepare for placement. Many aspects of the physical move must be handled along with emotional issues related to placement. Make sure you get support and advice.

Practical considerations also need to be handled such as what to bring and what valuables not to bring to the facility.

## **What should I know after placement?**

After your relative enters a long term care facility, keep the following in mind:

- Educate yourself about quality care and make sure your relative receives quality care.
- Visit often. Your active and continued involvement in your relative's care is important.
- Monitor your relative for changes in condition such as skin breakdown, weight loss, cleanliness. Bring concerns to staff's attention.
- Get to know the staff and compliment their good efforts. Feel free to raise any concerns and ask as many questions as needed.
- Your relative will need to go through a period of adjustment. Try to be supportive as possible, even though you may feel conflicted and guilty.
- Attend care plan meetings which are scheduled every 3 months. Care plans meetings are strategy sessions when many nursing home staff, the resident and family meet to discuss meals, activities, therapy and care. The meetings are opportunities to raise questions and address concerns.
- Attend the family council meetings to learn more about the facility and to provide advice on issues.

## **What help is available to return to the community?**

Contact the NIAAA office or your local Case Coordination Unit (listed in Appendix 3) for information on programs and services to assist a long term care facility resident return to the community.

The **Home Again Program** is available in Boone and Winnebago Counties funded through a grant from the Illinois Department on Aging through Northwestern Illinois Area Agency on Aging. The Home Again program assists older individuals in returning to the community. Those eligible for the program must currently be living in a long term care facility in Boone or Winnebago County, be age 60 and over, meet asset criteria and have a desire to live independently in the community. The individual must be able to safely leave the facility with a plan of in-home care.

To assist transitioning the individual home, funds are available for one-time expenses and in-home services. Case management service for this program is available through:

Visiting Nurses Association (VNA)  
4223 East State Street  
Rockford, IL 61108  
Phone: (815) 971-3502  
E-mail: [vnaweb@rhsnet.org](mailto:vnaweb@rhsnet.org)  
Website: [www.rhsnet.org/about/vna.aspx](http://www.rhsnet.org/about/vna.aspx)

**APPENDIX 1**  
**LONG TERM CARE FACILITY CHECKLIST**

## LONG TERM CARE FACILITY CHECKLIST

	Facility A Yes/No	Facility B Yes/No	Facility C Yes/No
<b>LICENSURE/ACCREDITATION</b>			
Does the home have a current license from the state?	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
If the person needs and is eligible for financial benefits through the Medicare or Medicaid programs, is the home certified to participate in those government programs?	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Does the home provide special services, such as specific diet or therapy, that the resident needs?	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Is the general atmosphere of the home warm, pleasant and cheerful?	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Is the administrator courteous and helpful?	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Are staff members cheerful, courteous and enthusiastic?	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Do staff members show genuine interest in and affection for residents?	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Do residents look well cared for and generally content?	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Are residents allowed to wear their own clothes, decorate their rooms and keep a few prized possessions on hand?	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Is there a place for private visits with family and friends?	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Is there a written statement of residents' rights?	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
As far as you can tell, are these points being carried out?	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Do residents, other visitors and volunteers speak favorably about the home?	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
<b>LOCATION</b>			
Is the home near family and friends?	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
<b>GENERAL PHYSICAL CONSIDERATIONS</b>			
Is the facility clean and orderly?	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Is it reasonably free of unpleasant odors??	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Are toilet and bathing facilities easy for disabled patients to use?	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Is the facility well-lighted?	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Are rooms well-ventilated and kept at a comfortable temperature?	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
<b>SAFETY</b>			
Are wheelchair ramps provided where necessary?	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Is the facility free of obvious hazards, such as obstacles to residents, hazards underfoot, unsteady chairs?	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Are there grab bars in toilet and bathing facilities and handrails on both sides of hallways?	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Do bathtubs and showers have non-slip surfaces?	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Are there smoke detectors, an automatic sprinkler system and portable fire extinguishers?	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Is there automatic emergency lighting?	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Are exits clearly marked and exit signs illuminated?	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Are exit doors unobstructed and unlocked from inside?	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Are certain areas posted with no smoking signs?	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Do staff, residents and visitors observe them?	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Is an emergency evacuation plan posted in prominent locations?	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>

## LONG TERM CARE FACILITY CHECKLIST

	Facility A Yes/No	Facility B Yes/No	Facility C Yes/No
<b>MEDICAL, DENTAL, AND OTHER SERVICES</b>			
Does the home have an arrangement with an outside dental service to provide residents with oral care when necessary?	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
In case of medical emergencies, is a physician available at all times, either on staff or on call?	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Does the home have arrangements with a nearby hospital for quick transfer of nursing home residents in an emergency?	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Is emergency transportation readily available?	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
<b>PHARMACEUTICAL SERVICES</b>			
Are pharmaceutical services supervised by a qualified pharmacist?	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Is a room set aside for storing and preparing drugs?	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Does a qualified pharmacist maintain and monitor a record of each resident's drug therapy?	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
<b>NURSING SERVICES</b>			
Is at least one registered nurse (RN) or licensed practical nurse (LPN) on duty day and night?	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Is an RN on duty during the day, seven days a week (for skilled nursing homes)?	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Does an RN serve as director of nursing services (for skilled nursing homes)?	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Are nurse or emergency call buttons located at each resident's bed and in toilet and bathing facilities?	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
<b>FOOD SERVICE</b>			
Is the kitchen clean and reasonably tidy?	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Is food needing refrigeration not left standing out on counters?	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Is waste properly disposed of?	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Ask to see the meal schedule. Are there at least three meals served each day?	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Are meals served at normal hours, with plenty of time for leisurely eating?	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Are nutritious between-meal and bedtime snacks available?	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Are residents given enough food?	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Does the food look appetizing?	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Sample a meal. Is the food tasty and served at the proper temperature?	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Does the meal being served match the posted menu?	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Are special meals prepared for residents who require therapeutic diets?	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Is the dining room attractive and comfortable?	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Do residents who need help in eating, whether in the dining room or in their own rooms, get it?	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>

	Home A Yes/No	Home B Yes/No	Home C Yes/No
<b>REHABILITATION THERAPY</b>			
Is a full-time program of physical therapy available for residents who need it?	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Are occupational therapy and speech therapy available for residents who need them?	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
<b>SOCIAL SERVICES AND RESIDENT ACTIVITIES</b>			
Are there social services available to aid residents and their families?	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Does the nursing home have a varied program of recreational, cultural and intellectual activities for residents?	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Is there an activities coordinator on the staff?	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Is suitable space available for resident activities?	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Are tools and supplies provided?	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Are activities offered for residents who are relatively inactive or confined to their rooms?	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Look at the activities schedule. Are activities provided each day? Are some activities scheduled in the evening?	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Do residents have an opportunity to attend religious services and talk with their clergymen, both in and outside the home?	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
<b>RESIDENTS' ROOMS</b>			
Does each room open onto a hallway?	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Does each room have a window to the outside?	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Does each resident have a reading light, a comfortable chair, and closet space and drawers for personal belongings?	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Is there fresh drinking water within reach?	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Is there a curtain or screen available to provide privacy for each bed whenever necessary?	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Do bathing and toilet facilities have adequate privacy?	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
<b>OTHER AREAS OF THE NURSING HOME</b>			
Is there a lounge where residents can chat, read, play games, watch television or just relax away from their rooms?	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Is a public telephone available for resident's use?	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Does the nursinghome have an outdoor areaa where residents can get fresh air and sunshine?	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
<b>FINANCIAL AND RELATED MATTERS</b>			
Do the estimated monthly costs (including extra charges) compare favorably with those of other homes?	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Is a refund made for unused days paid for in advance?	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Are visiting hours convenient for residents and visitors?	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Are these and other important matters specified in the contract?	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>

Checklist compiled by the Illinois Department of Public Health

**APPENDIX 2**  
**LONG TERM CARE FACILITIES**  
**BY COUNTY**



**BOONE  
COUNTY**

**HOMEBRIDGE REHABILITATION AND NURSING**  
1701 Fifth Avenue, Belvidere, IL 61008

**Phone:** 815/547-5451 **Fax:** 815/544-1901  
**E-Mail:** **Website:**  
**Contact Person:** Jim and Marilyn Palazzo **Administrator:** Jim and Marilyn Palazzo

**Skilled Care:**  Yes  No  
**Intermediate Care:**  Yes  No  
**Medicare Certified:**  Yes  No **Medicaid Certified:**  Yes  No  
**Veterans Contract:**  Yes  No **Ownership Status:** For profit.

**Available Medical Services:** Occupational, physical and speech therapy and rehabilitation department. Long term care, short term care, hospice unit. We manage orthopedic, neurological, and cardiac patients after their stay in the hospital.

**OTHER LEVELS OF CARE**

**Respite Care:** Yes  
**Sheltered Care:**  Yes  No  
**Independent:**  Yes  No  
**Entrance Fee:** None.

**SERVICES OFFERED**

**Activities:** Many in-house activities; have bus to take clients on outings.  
**Beauty Shop:** Yes.  
**Transportation:** Yes.  
**Laundry:** Yes.  
**Home-like Features:** Residents can bring their own dressers, night stands, TV and pictures.  
**Religious:** All faiths are welcome.  
**Telephone:** Phone can be set-up if requested, but there is an extra charge.  
**Cable TV/Satellite:** Have cable in the facility.  
**Alz./Dementia:** Do not have a specific unit for these residents.

**OTHER INFORMATION**

**Smoking:** Non-smoking facility; designated areas outdoors.  
**Resident Council:** Yes.  
**Visiting Hours:** Have very flexible hours, usually 8:00 am to 8:00 pm.  
**Pets:** Yes, animals must be on a leash and have up-to-date shots.

**MAPLE CREST CARE CENTRE**  
**4452 Squaw Prairie Road, Belvidere, IL 61008**

**Phone:** 815/547-6377      **Fax:** 815/547-3857  
**E-Mail:** maplecrestmarie@hotmail.com      **Website:** www.maplecrestcares.com  
**Contact Person:** Judie Wright      **Administrator:** Judie Wright

**Skilled Care:**       Yes     No    \$143 per day semi-private and \$156 per day private.  
**Intermediate Care:**       Yes     No    \$143 per day semi-private and \$156 per day private.  
**Medicare Certified:**       Yes     No    **Medicaid Certified:**     Yes     No  
**Veterans Contract:**       Yes     No    **Ownership Status:**    Limited liability company.

**Available Medical Services:** PT, OT, ST, wound care, special diets, post surgical care, respiratory care and skilled nursing, stroke/heart care, orthopedic, long term care and short term care. Big, new therapy room with kitchen, full bathroom for OT use.

**OTHER LEVELS OF CARE**

**Respite Care:**      Yes.  
**Sheltered Care:**       Yes     No  
**Independent:**       Yes     No  
**Entrance Fee:**      No

**SERVICES OFFERED**

**Activities:**      Activities 7 days a week. Families invited, screen building on 14 acres for resident use. WiFi, Wii machine, outings.  
**Beauty Shop:**      Yes, full service with volunteers as well as paid beautician.  
**Transportation:**      Keenage bus  
**Laundry:**      Laundry included in daily rate. Free laundry labels.  
**Home-like Features:**      Residents can bring their own furniture. Staff assignments have been modified to provide individual care. Aviary, aquariums, waterfall—flower program with master gardener.  
**Religious:**      Various programs.  
**Telephone:**      Rooms have hook-ups, families arrange for service. WIFI Computer use in lounge.  
**Cable TV/Satellite:**      Satellite included in daily rate.  
**Alz./Dementia:**      No designated unit. Alarmed exit doors.

**OTHER INFORMATION**

**Smoking:**      Smoke-free facility. Large auxiliary and volunteer program.  
**Resident Council:**      Meets monthly.  
**Visiting Hours:**      All reasonable hours.  
**Pets:**      Can visit family member. Aquariums and large bird sanctuary. Pet therapy, visiting 4H.



**CARROLL  
COUNTY**

**BIG MEADOWS**  
**1000 Longmoor, Savanna, IL 61074**

**Phone:** 815/273-2238 **Fax:** 815/273-7294  
**E-Mail:** bigmeadows@aheinc.biz **Website:** www.aheinc.biz  
**Contact Person:** Julie Johnson **Administrator:** JoEllen McCaskey

**Skilled Care:**  Yes  No  
**Intermediate Care:**  Yes  No \$150 per day, all private rooms.  
**Medicare Certified:**  Yes  No **Medicaid Certified:**  Yes  No  
**Veterans Contract:**  Yes  No **Ownership Status:** For profit.

**Available Medical Services:** PT, OT, ST.

**OTHER LEVELS OF CARE**

**Respite Care:** \$155 per day.  
**Sheltered Care:**  Yes  No  
**Independent:**  Yes  No  
**Entrance Fee:**

**SERVICES OFFERED**

**Activities:** Two full time CTRs on staff, full service RT department. Multiple monthly outings and groups available. Wide variety of recreational opportunities are provided daily, including evenings, weekends and holidays.  
**Beauty Shop:** Full service shop.  
**Transportation:** Full time driver on staff to assist with medical appointments.  
**Laundry:** Full service.  
**Home-like Features:** Plants, pets and children.  
**Religious:** Various religious groups offered, including bible-study and church services.  
**Telephone:** Available in each resident room; all private rooms.  
**Cable TV/Satellite:** Cable TV \$15 per month.  
**Alz./Dementia:** Fully integrated in life of facility; certified dementia care specialist.

**OTHER INFORMATION**

**Smoking:** Non-smoking facility.  
**Resident Council:** Meets monthly—highly involved.  
**Visiting Hours:** Unrestricted.  
**Pets:** Live in pets—currently 1 dog, 2 cats, 1 rabbit and many birds.

**CARROLL COUNTY GOOD SAMARITAN CENTER**  
1006 North Lowden, Mt. Carroll, IL 61053

**Phone:** 815/244-7715      **Fax:** 815/244-3127  
**E-Mail:**      **Website:** www.good-sam.com  
**Contact Person:**      **Administrator:** Jennifer Dunk

**Skilled Care:**       Yes    No  
**Intermediate Care:**       Yes    No  
**Medicare Certified:**       Yes    No      **Medicaid Certified:**       Yes    No  
**Veterans Contract:**       Yes    No      **Ownership Status:** Not-for-profit.

**Available Medical Services:** PT, OT, ST, wound care, infectious disease isolation, special diets.

**OTHER LEVELS OF CARE**

**Respite Care:** Yes.  
**Sheltered Care:**  Yes       No  
**Independent:**  Yes       No  
**Entrance Fee:** N/A

**SERVICES OFFERED**

**Activities:** Scheduled activities seven days a week.  
**Beauty Shop:** Full service shop open to all residents.  
**Transportation:** For activities and doctor appointments.  
**Laundry:** Laundry and labeling of clothing free of charge.  
**Home-like Features:**  
**Religious:** Christian, affiliated with the Lutheran Church.  
**Telephone:** One phone jack in every room.  
**Cable TV/Satellite:** Cable through Mediacom—\$10 per month charge.  
**Alz./Dementia:** Yes, but no special care unit.

**OTHER INFORMATION**

**Smoking:** Outside only.  
**Resident Council:** Meets monthly.  
**Visiting Hours:** Unrestricted.  
**Pets:** Yes, birds and fish. Some residents have their own pets.

**DEKALB  
COUNTY**



**BETHANY HEALTH CARE AND REHAB CENTER**  
3298 Resource Parkway, DeKalb, IL 60115

**Phone:** 815/756-5526 **Fax:** 815/756-6399  
**E-Mail:** Bethany@tutera.com **Website:** Bethanynursingrehab.com  
**Contact Person:** Kim Zamora **Administrator:** Amrit Jacob

**Skilled Care:**  Yes  No  
**Intermediate Care:**  Yes  No  
**Medicare Certified:**  Yes  No **Medicaid Certified:**  Yes  No  
**Veterans Contract:**  Yes  No **Ownership Status:** For profit.

**Available Medical Services:** Physical therapy, occupational therapy, speech therapy, wound care, infectious disease isolation, personalized diets, 24 hr respite care, limited bariatric services.

**OTHER LEVELS OF CARE**

**Respite Care:** Available as necessary.  
**Sheltered Care:**  Yes  No  
**Independent:**  Yes  No  
**Entrance Fee:** Please call for information.

**SERVICES OFFERED**

**Activities:** Scheduled activities for all levels of care, outings.  
**Beauty Shop:** Full service shop open to all residents (weekends by appointment).  
**Transportation:** Transportation arranged for medical appointments.  
**Laundry:** Laundry is provided in room and board charges. Facility will label all clothing.  
**Home-like Features:**  
**Religious:** Weekly religious services.  
**Telephone:** Hook-up available; service is charged to resident. Local phone available at no charge.  
**Cable TV/Satellite:** Hook-up available; service is charged to resident.  
**Alz./Dementia:** N/A

**OTHER INFORMATION**

**Smoking:** A smoke-free facility. Dedicated areas available outside facility.  
**Resident Council:** Council meets monthly. Food committee also meets monthly.  
**Visiting Hours:** 8:00 a.m. to 8:00 p.m., or by appointment. Unrestricted for hospice patients.  
**Pets:** Families encouraged to bring family animals. Must be vaccinated.

**DEKALB COUNTY REHAB AND NURSING CENTER**  
2600 North Annie Glidden Road, DeKalb, IL 60115

**Phone:** 815/758-2477 **Fax:** 815/217-0451  
**E-Mail:** **Website:** www.dekalbcounty.org  
**Contact Person:** **Administrator:** Catherine Anderson, R.N.

**Skilled Care:**  Yes  No  
**Intermediate Care:**  Yes  No  
**Medicare Certified:**  Yes  No **Medicaid Certified:**  Yes  No  
**Veterans Contract:**  Yes  No **Ownership Status:** County.

**Available Medical Services:** Physical therapy, occupational therapy, speech therapy, IV therapy, wound care, infectious disease isolation, special diets, respiratory care, tracheotomy care, enteral feeding care.

**OTHER LEVELS OF CARE**

**Respite Care:** No  
**Sheltered Care:**  Yes  No  
**Independent:**  Yes  No  
**Entrance Fee:** \$2,000 fee for Medicaid applied residents.

**SERVICES OFFERED**

**Activities:** Scheduled activities for all levels of care, including 1:1 and outings into the community.  
**Beauty Shop:** Full service shop available to all residents.  
**Transportation:** Transportation will be arranged for medical appointments when needed.  
**Laundry:** Laundry is provided free to all residents. Facility will label clothing. Personal washing machine available or resident use, resident must arrange for own laundry supplies.  
**Home-like Features:**  
**Religious:** Weekly bible study. Weekly services through community churches.  
**Telephone:** Residents may arrange own cell phone services.  
**Cable TV/Satellite:** Hook-ups are available in each room.  
**Alz./Dementia:** Specialized, locked unit.

**OTHER INFORMATION**

**Smoking:** Smoke-free facility.  
**Resident Council:** Council meets twice monthly.  
**Visiting Hours:** 8:00 a.m. to 8:00 p.m. daily. Other arrangements available.  
**Pets:** Welcome to visit.



**PINE ACRES REHABILITATION & LIVING CENTER**  
1212 South Second Street, DeKalb, IL 60115

**Phone:** 815/758-8151 **Fax:** 815/758-6832  
**E-Mail:** dkemna-kahne@pineacresdekalb.com **Website:** www.pineacresdekalb.com  
**Contact Person:** Dalena Kemna-Kahn **Administrator:** Dalena Kemna-Kahn

**Skilled Care:**  Yes  No \$162—\$187 per day  
**Intermediate Care:**  Yes  No \$143—\$168 per day  
**Medicare Certified:**  Yes  No **Medicaid Certified:**  Yes  No  
**Veterans Contract:**  Yes  No **Ownership Status:** For profit.

**Available Medical Services:** OT/PT/ST  
Special diets, respiratory care, wound care, Alzheimer's care

**OTHER LEVELS OF CARE**

**Respite Care:** Yes  
**Sheltered Care:**  Yes  No  
**Independent:**  Yes  No  
**Entrance Fee:**

**SERVICES OFFERED**

**Activities:** 7 days per week, all levels of care, frequent outings  
**Beauty Shop:** 5 days per week  
**Transportation:** TransVac door-to-door service available thru Voluntary Action Center.  
**Laundry:**  
**Home-like Features:** Natural wake-up, flexible meals, birds on premise, dog therapy.  
**Religious:** Chaplain available for worship services and one-on-one discussions.  
**Telephone:** Yes, private phone available for \$30 per month.  
**Cable TV/Satellite:** Yes, no charge.  
**Alz./Dementia:** Yes, 16 bed special care unit.

**OTHER INFORMATION**

**Smoking:** Non-smoking facility.  
**Resident Council:** Yes, meets monthly.  
**Visiting Hours:** Open.  
**Pets:** Pet therapy available 4 days per week. Individual pets considered on a case-by-case basis.

**SANDWICH REHABILITATION & HEALTH CARE**  
902 East Arnold Street, Sandwich, IL 60548

**Phone:** 815/786-8409 **Fax:** 815/786-3830  
**E-Mail:** kheuertz@petersenhealthcare.net **Website:** Petersenhealthcare.net  
**Contact Person:** Kathy Todd **Administrator:** Kathleen Heuertz, RN, MS

**Skilled Care:**  Yes  No  
**Intermediate Care:**  Yes  No  
**Medicare Certified:**  Yes  No **Medicaid Certified:**  Yes  No  
**Veterans Contract:**  Yes  No **Ownership Status:** Limited liability company.

**Available Medical Services:** Physical, occupational and speech therapies.

**OTHER LEVELS OF CARE**

**Respite Care:** Yes.  
**Sheltered Care:**  Yes  No  
**Independent:**  Yes  No  
**Entrance Fee:**

**SERVICES OFFERED**

**Activities:** Scheduled activities, outings into the community.  
**Beauty Shop:** Yes.  
**Transportation:** Yes, by Fox Valley Older Adults, Open Door and facility owned van.  
**Laundry:** Free of charge to all residents.  
**Home-like Features:** Carpeting, pictures, residents allowed to bring own furniture.  
**Religious:** Yes.  
**Telephone:** Located at nurses station, but a jack in each room and resident can have phone installed.  
**Cable TV/Satellite:** Basic cable is included.  
**Alz./Dementia:** Alarmed doors.

**OTHER INFORMATION**

**Smoking:** Smoke-free facility, designated area outside.  
**Resident Council:** Yes, meets monthly.  
**Visiting Hours:** Unrestricted situational; posted 10 am—8 pm.  
**Pets:** No, but they are allowed to visit.

**SHABBONA HEALTHCARE CENTER, INC.**  
**409 West Comanche Avenue, Shabbona, IL 60550-9790**

**Phone:** 815/824-2194 **Fax:** 815/824-2188  
**E-Mail:** **Website:**  
**Contact Person:** Sherri Whitmer **Administrator:** Sherri Whitmer

**Skilled Care:**  Yes  No \$132 per day semi-private, \$160 per day private.  
**Intermediate Care:**  Yes  No \$132 per day semi-private, \$160 per day private.  
**Medicare Certified:**  Yes  No **Medicaid Certified:**  Yes  No  
**Veterans Contract:**  Yes  No **Ownership Status:** For profit.

**Available Medical Services:** physical, occupational, speech therapies, wound care, special diets.  
Kishwaukee Community Hospital for all emergencies.

**OTHER LEVELS OF CARE**

**Respite Care:** 1 to 30 day respite offered. \$132 per day semi-private, \$160 per day private.  
**Sheltered Care:**  Yes  No  
**Independent:**  Yes  No  
**Entrance Fee:** None required.

**SERVICES OFFERED**

**Activities:** On-site scheduled for all levels daily, including outings.  
**Beauty Shop:** On-site, Monday through Thursday.  
**Transportation:** Unavailable at this time. Arrangements are made for medical needs.  
**Laundry:** \$1.25 per day.  
**Home-like Features:**  
**Religious:** Non-denominational.  
**Telephone:** Hook-up available, but resident must arrange own services.  
**Cable TV/Satellite:** Standard TV stations, cable in common rooms.  
**Alz./Dementia:** Twenty bed unit Stage II. SCU/dementia unit—\$155.00 per day.

**OTHER INFORMATION**

**Smoking:** Posted hours outside.  
**Resident Council:** First Monday of the month.  
**Visiting Hours:** 10:00am to 8:00 pm.  
**Pets:** Visiting allowed.

**WILLOW CREST NURSING PAVILION**  
**515 North Main Street, Sandwich, IL 60548**

**Phone:** 815/786-8426 **Fax:** 815/786-1621  
**E-Mail:** **Website:** www.dynamichc.com  
**Contact Person:** Debra Skipper **Administrator:** Pam Ingold

**Skilled Care:**  Yes  No  
**Intermediate Care:**  Yes  No  
**Medicare Certified:**  Yes  No **Medicaid Certified:**  Yes  No  
**Veterans Contract:**  Yes  No **Ownership Status:** For profit.

**Available Medical Services:** Respiratory, physical, occupational and speech therapies.

**OTHER LEVELS OF CARE**

**Respite Care:** Yes.  
**Sheltered Care:**  Yes  No  
**Independent:**  Yes  No  
**Entrance Fee:** No

**SERVICES OFFERED**

**Activities:** Yes, various daily activities scheduled as well as scheduled outings.  
**Beauty Shop:** Yes.  
**Transportation:** Yes, own van for appointments and outings.  
**Laundry:** Yes.  
**Home-like Features:** Yes.  
**Religious:** Yes.  
**Telephone:** Resident phone on each floor. Resident can have private phone installed at his/her own cost.  
**Cable TV/Satellite:** Service provided in every room.  
**Alz./Dementia:** No special unit, but will accept Alzheimer's patients.

**OTHER INFORMATION**

**Smoking:** No, must be at least 18 feet from building.  
**Resident Council:** Yes.  
**Visiting Hours:** Open.  
**Pets:** Pets are welcome to visit.

**JO DAVIESS  
COUNTY**



**ELIZABETH NURSING HOME**  
540 Pleasant Street, Elizabeth, IL 61028

**Phone:** 815/858-2275

**Fax:** 815/858-3656

**E-Mail:**

**Website:**

**Contact Person:** Nancy Schuldt

**Administrator:** Karen Heidenreich

**Skilled Care:**  Yes  No

**Intermediate Care:**  Yes  No \$153 per day semi-private (17 beds), \$163 per day private (15 beds), \$173 per day private room with private shower.

**Medicare Certified:**  Yes  No **Medicaid Certified:**  Yes  No

**Veterans Contract:**  Yes  No **Ownership Status:** For profit.

**Available Medical Services:** Physical therapy and rehab services available ; special diets, contracted wound care specialists. Also have 23 assisted living units available.

**OTHER LEVELS OF CARE**

**Respite Care:** No

**Sheltered Care:**  Yes  No

**Independent:**  Yes  No

**Entrance Fee:** No

**SERVICES OFFERED**

**Activities:** Seven days a week.

**Beauty Shop:** Open four days a week, independent use permitted.

**Transportation:** Can be arranged through several area agencies.

**Laundry:** Included in daily room rate.

**Home-like Features:**

**Religious:** Protestant and Catholic services; 13 area agencies.

**Telephone:** Available hook-up in rooms.

**Cable TV/Satellite:** Included at no additional charge.

**Alz./Dementia:** Case-by-case, alarmed door, no locked unit.

**OTHER INFORMATION**

**Smoking:** Non-smoking facility.

**Resident Council:** Meets monthly, first Wednesday of the month.

**Visiting Hours:** 10:00 am to 8:00 pm.—24 hours if resident is in agreement.

**Pets:** Visiting pet therapy and family pets welcome to visit.

**GALENA-STAUSS SENIOR CARE COMMUNITY**  
215 Summit Street, Galena, IL 61036

**Phone:** 815/776-7222 **Fax:**  
**E-Mail:** **Website:** Wwww.galenastauss.org  
**Contact Person:** Peggy Stockel **Administrator:** Peggy Stockel

**Skilled Care:**  Yes  No  
**Intermediate Care:**  Yes  No  
**Medicare Certified:**  Yes  No **Medicaid Certified:**  Yes  No  
**Veterans Contract:**  Yes  No **Ownership Status:**

**Available Medical Services:** Occupational, physical and speech therapy.

**OTHER LEVELS OF CARE**

**Respite Care:** Yes  
**Sheltered Care:**  Yes  No  
**Independent:**  Yes  No  
**Entrance Fee:** No

**SERVICES OFFERED**

**Activities:** Community events and outings, cards, crafts, holiday and birthday celebrations, board games, courtyard walk and musical programs.  
**Beauty Shop:** Yes.  
**Transportation:** Yes.  
**Laundry:** Yes.  
**Home-like Features:**  
**Religious:** Spiritual programs.  
**Telephone:** Yes  
**Cable TV/Satellite:** Yes  
**Alz./Dementia:** No unit, but accept dementia residents if their needs can be met.

**OTHER INFORMATION**

**Smoking:** No  
**Resident Council:** Yes, monthly.  
**Visiting Hours:** Unlimited  
**Pets:** Pet therapy—cats, birds and fish on-site. Pets allowed to visit.

**MORGAN MEMORIAL HOME**  
**501 East Front Avenue, Stockton, IL 61085**

**Phone:** 815/947-2215      **Fax:** 815/947-2027  
**E-Mail:** morganmemorial@bhawk.net      **Website:** Hospital-data.com/hospitals/  
morgan-memorial-home-stockton.html  
**Contact Person:** Paula Haas      **Administrator:** Paula Haas

**Skilled Care:**       Yes     No  
**Intermediate Care:**       Yes     No  
**Medicare Certified:**       Yes     No      **Medicaid Certified:**     Yes     No  
**Veterans Contract:**       Yes     No      **Ownership Status:**    Ind. proprietorship.

**Available Medical Services:** Wound care, special diets.

**OTHER LEVELS OF CARE**

**Respite Care:** No  
**Sheltered Care:**       Yes     No  
**Independent:**       Yes     No  
**Entrance Fee:** No

**SERVICES OFFERED**

**Activities:** Scheduled activities for all levels of care, including outings into the community.  
**Beauty Shop:** Full service shop for all residents.  
**Transportation:**  
**Laundry:** Provided free to all residents.  
**Home-like Features:**  
**Religious:** Sunday worship services.  
**Telephone:** Rooms are equipped with hook-ups; residents arrange their own service.  
**Cable TV/Satellite:** Hook-ups available in each room free of charge.  
**Alz./Dementia:** No unit, but dementia residents are accepted.

**OTHER INFORMATION**

**Smoking:** Smoke-free facility. Designated area outside for smoking.  
**Resident Council:** Councils meet monthly to provide feedback to the facility.  
**Visiting Hours:** 10 am - 8 pm  
**Pets:** Pets allowed to visit.

**LEE  
COUNTY**

**AMBOY HEALTHCARE AND REHABILITATION CENTER**  
15 West Wasson Road, Amboy, IL 61310

**Phone:** 815/857-2550      **Fax:** 815/857-4016  
**E-Mail:** admin@amboyhealthcare.com      **Website:** Amboyhealthcare.com  
**Contact Person:**      **Administrator:** Lynn McCoy

**Skilled Care:**       Yes    No  
**Intermediate Care:**       Yes    No  
**Medicare Certified:**       Yes    No      **Medicaid Certified:**       Yes    No  
**Veterans Contract:**       Yes    No      **Ownership Status:** For profit.

**Available Medical Services:** Physical Therapy, Occupational Therapy, Speech Therapy

**OTHER LEVELS OF CARE**

**Respite Care:** Yes.  
**Sheltered Care:**  Yes    No  
**Independent:**  Yes    No  
**Entrance Fee:** No

**SERVICES OFFERED**

**Activities:** Yes, daily.  
**Beauty Shop:** Yes.  
**Transportation:** Yes.  
**Laundry:** Yes.  
**Home-like Features:** Yes.  
**Religious:** Yes.  
**Telephone:** Yes.  
**Cable TV/Satellite:** Yes.  
**Alz./Dementia:** No unit, but will accept residents on a case-by-case basis.

**OTHER INFORMATION**

**Smoking:** Non-smoking facility; smoking permitted outside in designated areas.  
**Resident Council:** Resident and family council monthly.  
**Visiting Hours:** 10 am - 8 pm with flexible schedules for family members  
**Pets:** Visiting pets are allowed..

**DIXON HEALTHCARE AND REHABILITATION CENTER**  
800 Division Street, Dixon, IL 61021

**Phone:** 815/284-3393 **Fax:** 815/284-2066  
**E-Mail:** admin@dixonhealthcare.com **Website:** Dixonhealthcare.com  
**Contact Person:** Brittany Rowe **Administrator:** Brittany Rowe

**Skilled Care:**  Yes  No  
**Intermediate Care:**  Yes  No  
**Medicare Certified:**  Yes  No **Medicaid Certified:**  Yes  No  
**Veterans Contract:**  Yes  No **Ownership Status:** For profit.

**Available Medical Services:** Skilled nursing and rehabilitation. PT/OT/St available. IV and tracheotomy care. Therapeutic diets, wound care.

**OTHER LEVELS OF CARE**

**Respite Care:** Yes.  
**Sheltered Care:**  Yes  No  
**Independent:**  Yes  No  
**Entrance Fee:** N/A

**SERVICES OFFERED**

**Activities:** Daily, including evenings and weekends.  
**Beauty Shop:** Beauticians come in once a week.  
**Transportation:** Facility van available—first come, first served basis.  
**Laundry:** Personal laundry done free of charge.  
**Home-like Features:**  
**Religious:** At least twice weekly.  
**Telephone:** Residents can have their own phones in rooms.  
**Cable TV/Satellite:** Cable TV.  
**Alz./Dementia:** Secure Alzheimer's Unit.

**OTHER INFORMATION**

**Smoking:** Smoke-free facility. Dedicated area outside.  
**Resident Council:** Meets monthly.  
**Visiting Hours:** 10:00 a.m. to 8:00 p.m. and other hours as needed.  
**Pets:** Visiting privileges if safe and inoculated.

**FRANKLIN GROVE NURSING CENTER**  
502 N. State Street, Franklin Grove, IL 61031

**Phone:** 815/456-2374 **Fax:** 815/456-2250  
**E-Mail:** **Website:**  
**Contact Person:** Kathy Clark **Administrator:** Jill Gee

**Skilled Care:**  Yes  No  
**Intermediate Care:**  Yes  No  
**Medicare Certified:**  Yes  No **Medicaid Certified:**  Yes  No  
**Veterans Contract:**  Yes  No **Ownership Status:** For profit.

**Available Medical Services:**

**OTHER LEVELS OF CARE**

**Respite Care:** Yes.  
**Sheltered Care:**  Yes  No  
**Independent:**  Yes  No  
**Entrance Fee:**

**SERVICES OFFERED**

**Activities:** Yes, daily.  
**Beauty Shop:** Yes.  
**Transportation:** Yes, own van.  
**Laundry:** Yes.  
**Home-like Features:** Yes.  
**Religious:** Yes.  
**Telephone:** Yes.  
**Cable TV/Satellite:** Yes.  
**Alz./Dementia:** Have similar patients; but no specialized unit

**OTHER INFORMATION**

**Smoking:** Non-smoking facility, designated areas outside.  
**Resident Council:** Resident and family council monthly.  
**Visiting Hours:** Open.  
**Pets:** Pets are allowed to visit.

**HERITAGE SQUARE**  
**620 North Ottawa Avenue, Dixon, IL 61021**

**Phone:** 815/288-2251 **Fax:** 815/288-6821  
**E-Mail:** mak.heritagesquare@comcast.net **Website:** www.heritagesquaredixon.com  
**Contact Person:** MaryAnn Knoll **Administrator:** Bonnie O'Connell  
 Social Services Dir./Admissions  
**Skilled Care:**  Yes  No  
**Intermediate Care:**  Yes  No  
**Medicare Certified:**  Yes  No **Medicaid Certified:**  Yes  No  
**Veterans Contract:**  Yes  No **Ownership Status:** Not-for-profit.

**Available Medical Services:** Physical Therapy, Occupational Therapy, Speech Therapy

**OTHER LEVELS OF CARE**

**Respite Care:** Yes  
**Sheltered Care:**  Yes  No  
**Independent:**  Yes  No  
**Entrance Fee:** No

**SERVICES OFFERED**

**Activities:** Yes, daily.  
**Beauty Shop:** Yes.  
**Transportation:** Yes.  
**Laundry:** Yes.  
**Home-like Features:** Yes.  
**Religious:** Yes.  
**Telephone:** Yes, per resident One time hook up fee \$50.00 and \$35 a month  
**Cable TV/Satellite:** Yes provided in daily rate  
**Alz./Dementia:** No.

**OTHER INFORMATION**

**Smoking:** Non-smoking facility.  
**Resident Council:** Resident and family council monthly.  
**Visiting Hours:** Open.  
**Pets:** Pet visits.



**OGLE  
COUNTY**

**NEIGHBORS REHABILITATION CENTER**  
811 West Second Street, Byron, IL 61010

**Phone:** 815/234-2511 **Fax:** 815/234-3114  
**E-Mail:** neighbors@neighborsbyron.com **Website:** neighborsrehab.com  
**Contact Person:** **Administrator:**

**Skilled Care:**  Yes  No Rates vary with care.  
**Intermediate Care:**  Yes  No  
**Medicare Certified:**  Yes  No **Medicaid Certified:**  Yes  No  
**Veterans Contract:**  Yes  No **Ownership Status:** For profit.

**Available Medical Services:** All skilled care. Therapies, nursing, hospice, Alzheimer's.

**OTHER LEVELS OF CARE**

**Respite Care:** Yes, also day care at \$30 per day.  
**Sheltered Care:**  Yes  No  
**Independent:**  Yes  No  
**Entrance Fee:** N/A

**SERVICES OFFERED**

**Activities:** Many varied per individual. Community outings.  
**Beauty Shop:** Yes, full service shop for all residents.  
**Transportation:** Yes, bus for medical appointments, activities, but does not accommodate all residents' needs.  
**Laundry:** Laundry is free to all.  
**Home-like Features:** Neighborhood concept, extended hour breakfast, menu choices, restaurant -style meals.  
**Religious:** All.  
**Telephone:** Resident's choice.  
**Cable TV/Satellite:** Yes.  
**Alz./Dementia:** Yes, locked unit—individual programming.

**OTHER INFORMATION**

**Smoking:** Smoke-free facility, can smoke outside.  
**Resident Council:** Meets monthly.  
**Visiting Hours:** 8:00 a.m. to 9:00 p.m.  
**Pets:** Visiting pets.

**OREGON HEALTHCARE CENTER**  
811 South 10th Street, Oregon, IL 61061

**Phone:** 815/732-7994 **Fax:** 815/732-7998  
**E-Mail:** **Website:**  
**Contact Person:** Jennifer Black **Administrator:** Dana Payton

**Skilled Care:**  Yes  No  
**Intermediate Care:**  Yes  No  
**Medicare Certified:**  Yes  No **Medicaid Certified:**  Yes  No  
**Veterans Contract:**  Yes  No **Ownership Status:** For profit.

**Available Medical Services:** Wound care, tracheotomy, physical, occupational and speech therapy, respiratory treatments and restorative care.

**OTHER LEVELS OF CARE**

**Respite Care:** Yes, VA, hospice and private.  
**Sheltered Care:**  Yes  No  
**Independent:**  Yes  No  
**Entrance Fee:**

**SERVICES OFFERED**

**Activities:** Varied, seven days a week.  
**Beauty Shop:** On-site.  
**Transportation:** Yes, but a fee for private transportation  
**Laundry:** Free-commercial, large capacity, high temperature and smaller capacity, variable temperature units.  
**Home-like Features:**  
**Religious:** Scheduled several times per week; variety available (Mass, church service, bible study).  
**Telephone:** Available, private hook-up extra charge.  
**Cable TV/Satellite:** Free in common rooms, extra charge in residents' rooms.  
**Alz./Dementia:** Activities geared to stimulate cognition.

**OTHER INFORMATION**

**Smoking:** Dedicated indoor and outdoor areas.  
**Resident Council:** Meets monthly.  
**Visiting Hours:** Open — flexibility allowed to meet individual and family needs.  
**Pets:** Pet visits as requested.

**PINECREST MANOR (and Pinecrest Terrace)  
414 South Wesley Avenue, Mt. Morris, IL 61054**

**Phone:** 815/734-4103      **Fax:** 815/734-7318  
**E-Mail:** cdavis@pinecrestcommunity.org      **Website:** www.pinecrestcommunity.org  
**Contact Person:** Carol Davis      **Administrator:** Carol Davis

**Skilled Care:**       Yes    No      Rate information available on request.  
**Intermediate Care:**       Yes    No  
**Medicare Certified:**       Yes    No      **Medicaid Certified:**       Yes    No  
**Veterans Contract:**       Yes    No      **Ownership Status:**      Not-for-profit.

**Available Medical Services:** Physical therapy, occupational therapy, speech therapy, IV therapy, wound care, respiratory care, special diets, outpatient therapy, specialized dementia care. Affiliation with University of Illinois Medical School.

**OTHER LEVELS OF CARE**

**Respite Care:** Yes.  
**Sheltered Care:**       Yes       No      Rate information available upon request.  
**Independent:**       Yes       No  
**Entrance Fee:** Only for independent living.

**SERVICES OFFERED**

**Activities:** Scheduled activities for all levels of care, including outing to the community.  
**Beauty Shop:** Full service shop open to all residents.  
**Transportation:** Facility vehicles are used for scheduled activities and scheduled medical appointments.  
**Laundry:** Included free to all residents. Washing machines and dryers are on each floor of independent living for resident use.  
**Home-like Features:**  
**Religious:** Full-time chaplain, multi-denominational services, chapel.  
**Telephone:** Hook-ups available in each room.  
**Cable TV/Satellite:** Hook-ups available in each room.  
**Alz./Dementia:** Pinecrest Terrace — specialized unit—secure outdoor area provided.

**OTHER INFORMATION**

**Smoking:** Smoke-free facility.  
**Resident Council:** Monthly Resident Council meets to provide feedback to the facility.  
**Visiting Hours:** Unrestricted.  
**Pets:** Many facility pets—visiting pet program.



**ROCHELLE GARDENS CARE CENTER**  
1021 Caron Road, Rochelle, IL 61068

**Phone:** 815/562-4047 **Fax:** 815/562-8017  
**E-Mail:** jwright@petersenhealthcare.net **Website:** www.petersenhealthcare.net  
**Contact Person:** Patty Troxel, Adm/SS **Administrator:** Judith Wright

**Skilled Care:**  Yes  No  
**Intermediate Care:**  Yes  No  
**Medicare Certified:**  Yes  No **Medicaid Certified:**  Yes  No  
**Veterans Contract:**  Yes  No **Ownership Status:** For profit.

**Available Medical Services:** Physical, occupational and speech therapies, and special diets.

**OTHER LEVELS OF CARE**

**Respite Care:** Available as occupancy permits.  
**Sheltered Care:**  Yes  No  
**Independent:**  Yes  No  
**Entrance Fee:** No, call for current rates.

**SERVICES OFFERED**

**Activities:** Scheduled activities for all levels of care, including outings.  
**Beauty Shop:** Full service shop open to all residents.  
**Transportation:** Transportation for medical appointments and activities.  
**Laundry:** Laundry is provided free to all residents.  
**Home-like Features:**  
**Religious:** Services for all types of religions.  
**Telephone:** Rooms are equipped with hook-ups. Resident must arrange own service.  
**Cable TV/Satellite:** Hook-ups available in each room. Service is free.  
**Alz./Dementia:** No unit, but dementia residents are accepted.

**OTHER INFORMATION**

**Smoking:** Smoke-free facility. There is a dedicated area outside the facility.  
**Resident Council:** Meets monthly to provide feedback to the family.  
**Visiting Hours:** Unrestricted.  
**Pets:** Visiting pet program.

**ROCHELLE REHABILITATION & HEALTHCARE CENTER WEST**  
900 North Third Street, Rochelle, IL 61068

**Phone:** 815/562-4111 **Fax:** 815/562-1722  
**E-Mail:** jconner@petersenhealthcare.net **Website:** www.petersenhealthcare.net  
**Contact Person:** Deb Fettrell **Administrator:** Deb Fettrell

**Skilled Care:**  Yes  No  
**Intermediate Care:**  Yes  No  
**Medicare Certified:**  Yes  No **Medicaid Certified:**  Yes  No  
**Veterans Contract:**  Yes  No **Ownership Status:** For profit.

**Available Medical Services:** Physical therapy, occupational therapy, IV therapy, speech therapy, wound care, infectious disease isolation, respiratory care, special diets, tracheotomy care, dental services and blood services.

**OTHER LEVELS OF CARE**

**Respite Care:** Available as occupancy permits.  
**Sheltered Care:**  Yes  No  
**Independent:**  Yes  No  
**Entrance Fee:**

**SERVICES OFFERED**

**Activities:** Scheduled activities for all levels of care, including outings in the community.  
**Beauty Shop:** Full service shop open to all residents.  
**Transportation:** The facility vehicle is used for medical appointments, scheduled activities and scheduled shopping trips.  
**Laundry:** Laundry is provided free to all residents.  
**Home-like Features:**  
**Religious:** Church services three or more times a week; communion available.  
**Telephone:** Hook-ups are available in each room; residents must arrange their own services.  
**Cable TV/Satellite:** Service is free of charge.  
**Alz./Dementia:**

**OTHER INFORMATION**

**Smoking:** Designated area outside facility.  
**Resident Council:** Meets once a month to provide feedback to facility.  
**Visiting Hours:** Unrestricted.  
**Pets:** Visiting pet program.

**STEPHENSON  
COUNTY**



**FREEPORT REHAB AND HEALTH CARE CENTER**  
900 South Kiwanis Drive, Freeport, IL 61032

**Phone:** 815/235-6196      **Fax:** 815/235-5365  
**E-Mail:** freeport@tutera.com      **Website:**  
**Contact Person:**      **Administrator:** Erica Springer

**Skilled Care:**       Yes     No  
**Intermediate Care:**       Yes     No  
**Medicare Certified:**       Yes     No      **Medicaid Certified:**       Yes     No  
**Veterans Contract:**       Yes     No      **Ownership Status:** Not-for-profit.

**Available Medical Services:** Occupational, physical and speech therapy.

**OTHER LEVELS OF CARE**

**Respite Care:** Yes. Short Term care also available.  
**Sheltered Care:**  Yes     No  
**Independent:**  Yes     No  
**Entrance Fee:** Yes, dependent on circumstances.

**SERVICES OFFERED**

**Activities:** Daily varied activities for residents.  
**Beauty Shop:** Yes.  
**Transportation:** Facility van.  
**Laundry:** Yes.  
**Home-like Features:**  
**Religious:** All faiths welcome.  
**Telephone:** Outlets in rooms; up to the family to provide and pay for phone.  
**Cable TV/Satellite:** Rooms have cable hook-up and flat screen TVs.  
**Alz./Dementia:** No separate facility, but do have Alzheimer's/dementias residents.

**OTHER INFORMATION**

**Smoking:** Non-smoking facility.  
**Resident Council:** Yes.  
**Visiting Hours:** Open.  
**Pets:** No live in pets, but visits are allowed. Humane Society beings pets for visits.

**LENA LIVING CENTER**  
1010 South Logan, Lena, IL 61048

**Phone:** 815/369-2900      **Fax:**  
**E-Mail:** lenalivingcenter@verizon.net      **Website:** www.lenalivingcenter.com  
**Contact Person:** David Lenzo      **Administrator:** David Lenzo

**Skilled Care:**       Yes     No  
**Intermediate Care:**       Yes     No  
**Medicare Certified:**       Yes     No      **Medicaid Certified:**       Yes     No  
**Veterans Contract:**       Yes     No      **Ownership Status:** For-profit.

**Available Medical Services:** Occupational, physical and speech therapy.

**OTHER LEVELS OF CARE**

**Respite Care:** Yes.  
**Sheltered Care:**  Yes     No  
**Independent:**       Yes     No  
**Entrance Fee:** None.

**SERVICES OFFERED**

**Activities:** Varied and numerous activities for client to participate in.  
**Beauty Shop:** Yes.  
**Transportation:** No. Use school buses or independent van service.  
**Laundry:** Yes.  
**Home-like Features:** May bring dresser, bed, pictures, etc. Meal choices, flexible meal schedules.  
**Religious:** Accept all faiths.  
**Telephone:** Phones are available for use, and cell phones are permitted.  
**Cable TV/Satellite:** Provided.  
**Alz./Dementia:** No separate facility, but do have Alzheimer's/dementia residents.

**OTHER INFORMATION**

**Smoking:** No.  
**Resident Council:** Yes.  
**Visiting Hours:** Open.  
**Pets:** Facility has birds and pet visits are allowed.

**MANOR COURT OF FREEPORT**  
2170 West Navajo Drive, Freeport, IL 61032

**Phone:** 815/233-2400

**Fax:**

**E-Mail:**

**Website:** www.libertyvillageoffreeport.com

**Contact Person:**

**Administrator:** Andres Bardelas

**Skilled Care:**  Yes  No

**Intermediate Care:**  Yes  No

**Medicare Certified:**  Yes  No

**Medicaid Certified:**  Yes  No

**Veterans Contract:**  Yes  No

**Ownership Status:**

**Available Medical Services:** Occupational, physical and speech therapy.

**OTHER LEVELS OF CARE**

**Respite Care:** Yes

**Sheltered Care:**  Yes  No

**Independent:**  Yes  No

**Entrance Fee:** Yes

**SERVICES OFFERED**

**Activities:** Yes, daily.

**Beauty Shop:** Yes, one day per week.

**Transportation:** No.

**Laundry:** Yes.

**Home-like Features:**

**Religious:** All faiths welcome.

**Telephone:** Jack available in room – resident pays.

**Cable TV/Satellite:** Yes

**Alz./Dementia:** Yes

**OTHER INFORMATION**

**Smoking:** No

**Resident Council:** Yes

**Visiting Hours:** Open

**Pets:** Allowed to visit.

**PARKVIEW HOME**  
**1234 South Park Boulevard, Freeport, IL 61032**

<b>Phone:</b>	815/232-8612	<b>Fax:</b>	815/232-8686
<b>E-Mail:</b>	dgitz@parkviewhome.org	<b>Website:</b>	www.parkviewhome.org
<b>Contact Person:</b>	Debra Gitz	<b>Administrator:</b>	Debra Gitz

<b>Skilled Care:</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
<b>Intermediate Care:</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
<b>Medicare Certified:</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>Medicaid Certified:</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>Veterans Contract:</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>Ownership Status:</b>	Not-for-profit.

**Available Medical Services:** Physical therapy.

**OTHER LEVELS OF CARE**

<b>Respite Care:</b>	Available as occupancy permits.
<b>Sheltered Care:</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>Independent:</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>Entrance Fee:</b>	Varies.

**SERVICES OFFERED**

<b>Activities:</b>	Many scheduled activities for all levels of care, including several outings into the community.
<b>Beauty Shop:</b>	Full service shop open to all residents.
<b>Transportation:</b>	Transportation to doctors appointments for sheltered care, intermediate care and skilled care residents. Transportation for scheduled activities and shopping trips for all residents.
<b>Laundry:</b>	Laundry provided free to all sheltered and ICF residents. Washing machines provided for all independent residents.
<b>Home-like Features:</b>	
<b>Religious:</b>	Church services by area pastors every Sunday.
<b>Telephone:</b>	Rooms equipped with hook-ups. Residents must arrange their own service.
<b>Cable TV/Satellite:</b>	Hook-ups available in each room for \$15 per month.
<b>Alz./Dementia:</b>	

**OTHER INFORMATION**

<b>Smoking:</b>	Smoke-free facility.
<b>Resident Council:</b>	Resident council meets monthly.
<b>Visiting Hours:</b>	9:00 a.m. to 8:00 p.m.
<b>Pets:</b>	Visiting pet program.

**PROVENA ST. JOSEPH CENTER**  
**659 East Jefferson Street, Freeport, IL 61032**

<b>Phone:</b>	815/232-6181	<b>Fax:</b>	815/232-6143
<b>E-Mail:</b>	Julie.glick@provena.org	<b>Website:</b>	www.provena.org\stjosephcenter
<b>Contact Person:</b>	Julie Glick or Lori Hopkins	<b>Administrator:</b>	Theresa Parsek

<b>Skilled Care:</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
<b>Intermediate Care:</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
<b>Medicare Certified:</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>Medicaid Certified:</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>Veterans Contract:</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>Ownership Status:</b>	Not-for-profit.

**Available Medical Services:** Physical, occupational and speech therapies; IV therapy, wound care, respiratory care.

#### OTHER LEVELS OF CARE

<b>Respite Care:</b>	Yes. Adult Day Center services Monday—Friday.
<b>Sheltered Care:</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>Independent:</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>Entrance Fee:</b>	No.

#### SERVICES OFFERED

<b>Activities:</b>	Scheduled activities for all levels of care, drumming circles and outings.
<b>Beauty Shop:</b>	Full service to all residents.
<b>Transportation:</b>	Transportation arranged for medical appointments.
<b>Laundry:</b>	Full laundry service provided free of charge.
<b>Home-like Features:</b>	Culture change—smaller group living/dining, natural wake-up.
<b>Religious:</b>	Daily rosary and communion, church on Sunday and Tuesday for Catholic residents. Protestant services on Sunday and Thursday. Full-time pastoral care director on site, spiritual groups available.
<b>Telephone:</b>	Rooms equipped with hook-ups.
<b>Cable TV/Satellite:</b>	Cable service provided (basic). Flat screen television provided for each resident in their room.
<b>Alz./Dementia:</b>	Wanderguard System. Activities/programming available.

#### OTHER INFORMATION

<b>Smoking:</b>	Smoke-free campus.
<b>Resident Council:</b>	Meets monthly to provide feedback to facility. Also a Resident Advisory Board with monthly meeting.
<b>Visiting Hours:</b>	Unlimited
<b>Pets:</b>	Visiting pet program.

**STEPHENSON NURSING CENTER**  
**2946 South Walnut Road, Freeport, IL 61032**

**Phone:** 815/235-6173      **Fax:** 815/232-4575  
**E-Mail:** D.fortney@co.stephenson.il.us      **Website:** www.stephenson.il.us  
**Contact Person:** Darnell Fortney      **Administrator:** Darnell Fortney

**Skilled Care:**       Yes     No  
**Intermediate Care:**       Yes     No  
**Medicare Certified:**       Yes     No      **Medicaid Certified:**     Yes     No  
**Veterans Contract:**       Yes     No      **Ownership Status:**    County not-for-profit

**Available Medical Services:** Physical, occupational, and speech therapy; wound care, ostomy care, IV therapy, tube feeding, special diets, assisted to complete nursing care.

**OTHER LEVELS OF CARE**

**Respite Care:** Available as occupancy permits.  
**Sheltered Care:**     Yes     No  
**Independent:**       Yes     No  
**Entrance Fee:**

**SERVICES OFFERED**

**Activities:** Scheduled activities for all levels of care and outings in the community. Activities include crafts, music, games, outings, parties, educational programs and one-on-one attention.  
**Beauty Shop:** Beautician 5 days per week, barber once a month.  
**Transportation:** SNC van is used for outings. Outside transportation is arranged for appointments.  
**Laundry:** Laundry is provided free to all residents. No charge for washing clothing, dentures, eye glasses.  
**Home-like Features:**  
**Religious:** Catholic and Protestant services on a regular basis.  
**Telephone:** Available; payment is responsibility of resident.  
**Cable TV/Satellite:** Available; payment is responsibility of resident.  
**Alz./Dementia:** Secured unit; specialized services. Family council meetings quarterly.

**OTHER INFORMATION**

**Smoking:** Non-smoking facility.  
**Resident Council:** Meets every month; also have a food committee.  
**Visiting Hours:** Open.  
**Pets:** Pets may visit.

**WHITESIDE  
COUNTY**

**COVENTRY LIVING CENTER**  
**612 West St. Mary's Street, Sterling, IL 61081**

**Phone:** 815/626-9020 **Fax:** 815/626-6434  
**E-Mail:** **Website:** In process  
**Contact Person:** **Administrator:** Bob Talbot

**Skilled Care:**  Yes  No \$124 for semi-private; \$140 private per day  
**Intermediate Care:**  Yes  No \$124 for semi-private; \$140 private per day.  
**Medicare Certified:**  Yes  No **Medicaid Certified:**  Yes  No  
**Veterans Contract:**  Yes  No **Ownership Status:** Limited partnership.

**Available Medical Services:** Physical, occupational, and speech therapies, wound care, infectious disease isolation, respiratory care, special diets and tracheotomy care.

**OTHER LEVELS OF CARE**

**Respite Care:** Yes  
**Sheltered Care:**  Yes  No  
**Independent:**  Yes  No  
**Entrance Fee:**

**SERVICES OFFERED**

**Activities:** Scheduled activities and outings for all levels of care.  
**Beauty Shop:** Full service shop open to all residents.  
**Transportation:** Bus is used for activities. Transportation will be arranged when needed.  
**Laundry:** Laundry provided free to all residents.  
**Home-like Features:** Lounge with TV and dining areas.  
**Religious:**  
**Telephone:** Rooms are equipped with hook-ups, but residents arrange their own service.  
**Cable TV/Satellite:** Rooms are equipped with hook-ups, but residents arrange their own service.  
**Alz./Dementia:** No, but have locked unit and will accept dementia residents.

**OTHER INFORMATION**

**Smoking:** Smoke-free facility with dedicated outside areas.  
**Resident Council:** Meets quarterly and provides feedback to facility.  
**Visiting Hours:** Unrestricted.  
**Pets:** Facility pet: Pete (bird). Visitors are allowed to bring pets to visit.



**FOUR SEASONS LIVING CENTER**  
**303 North Jackson Street, Morrison, IL 61270**

**Phone:** 815/772-4003 or 815/772-5525      **Fax:** 815/772-7391 or 815/772-5560  
**E-Mail:**      **Website:**  
**Contact Person:** Neil Cooperider (815) 772-5516 (c)      **Administrator:** John Perushek

**Skilled Care:**       Yes     No  
**Intermediate Care:**       Yes     No  
**Medicare Certified:**       Yes     No      **Medicaid Certified:**     Yes     No  
**Veterans Contract:**       Yes     No      **Ownership Status:**    Hospital district.

**Available Medical Services:** 24/7 M.D., lab, x-ray, ER, physical, occupational, and speech therapies, etc.

**OTHER LEVELS OF CARE**

**Respite Care:** Yes, as occupancy permits.  
**Sheltered Care:**       Yes     No  
**Independent:**       Yes     No  
**Entrance Fee:**      N/A

**SERVICES OFFERED**

**Activities:** Activities at all levels, as well as outings.  
**Beauty Shop:** Yes, by appointment or by patient/family personal hairdresser.  
**Transportation:** Lift van service by appointment.  
**Laundry:** Provided at no additional cost.  
**Home-like Features:** Enclosed all-season sun room.  
**Religious:** Weekly worship service.  
**Telephone:** Yes.  
**Cable TV/Satellite:** Yes  
**Alz./Dementia:** Equipped with alarm system.

**OTHER INFORMATION**

**Smoking:** No.  
**Resident Council:** Monthly Resident Council and quarterly Family Council.  
**Visiting Hours:** Visiting hours are open..  
**Pets:** No, but pets are welcome to visit.

**HARBOR CREST HOME**  
817 - 17th Street, Fulton, IL 61252

**Phone:** 815/589-3411 **Fax:** 815/589-4728  
**E-Mail:** **Website:**  
**Contact Person:** Suzie Gienapp, SSD, Admissions **Administrator:** Joe Coulter

**Skilled Care:**  Yes  No  
**Intermediate Care:**  Yes  No  
**Medicare Certified:**  Yes  No **Medicaid Certified:**  Yes  No  
**Veterans Contract:**  Yes  No **Ownership Status:** Not-for-profit.

**Available Medical Services:** PT, OT, PRN isolations, tracheotomy, feeding tubes.

**OTHER LEVELS OF CARE**

**Respite Care:** As occupancy permits.  
**Sheltered Care:**  Yes  No  
**Independent:**  Yes  No  
**Entrance Fee:** N/A

**SERVICES OFFERED**

**Activities:** Activities for all levels, community outings.  
**Beauty Shop:** Beautician and barber twice a week, shop open to all residents.  
**Transportation:** Senior citizen bus for facility use and community.  
**Laundry:** Provided for all residents at no extra cost.  
**Home-like Features:**  
**Religious:** Church and chapel offered twice a week.  
**Telephone:** All rooms have hook-ups, cordless at each station for resident use.  
**Cable TV/Satellite:** Provided at no extra cost.  
**Alz./Dementia:** ICF.

**OTHER INFORMATION**

**Smoking:** Outdoors only.  
**Resident Council:** Council meets monthly.  
**Visiting Hours:** Any time.  
**Pets:** Facility cat named Chachi. Pets are permitted to visit.

**PARKWAY CENTER**  
**1801 Avenue G, Sterling, IL 61081**

**Phone:** 815/626-1121 **Fax:** 815/626-6049  
**E-Mail:** parkway@cin.net **Website:** parkwaycenter.info  
**Contact Person:** Locally owned by Richard Prescott **Administrator:** Marla Drury

**Skilled Care:**  Yes  No  
**Intermediate Care:**  Yes  No  
**Medicare Certified:**  Yes  No **Medicaid Certified:**  Yes  No  
**Veterans Contract:**  Yes  No **Ownership Status:** For profit.

**Available Medical Services:**

**OTHER LEVELS OF CARE**

**Respite Care:** No  
**Sheltered Care:**  Yes  No  
**Independent:**  Yes  No  
**Entrance Fee:** Yes, varies with level of care.

**SERVICES OFFERED**

**Activities:** Monday through Friday, recreation/social area trips.  
**Beauty Shop:** Wednesday through Friday by appointment.  
**Transportation:** Van for weekly outings and Monday and Wednesday appointments..  
**Laundry:** Provided to all residents.  
**Home-like Features:** Library, buffet-style dining, Jacuzzi.  
**Religious:** Several services each week.  
**Telephone:** Hook-ups in rooms and apartments, residents arrange own service.  
**Cable TV/Satellite:** Hook-ups in rooms and apartments, service is free of charge.  
**Alz./Dementia:** No unit, early-stage residents accepted.

**OTHER INFORMATION**

**Smoking:** Smoke-free facility.  
**Resident Council:** Meets once a month.  
**Visiting Hours:** Unrestricted.  
**Pets:** Administrator approval visits.

**PLEASANT VIEW**  
**500 North Jackson Street, Morrison, IL 61270**

<b>Phone:</b>	815/772-7288	<b>Fax:</b>	815/772-2399
<b>E-Mail:</b>	ttegeler@aheinc.biz	<b>Website:</b>	www.aheinc.biz/pleasntview
<b>Contact Person:</b>	Rhonda Biller	<b>Administrator:</b>	Rhonda Biller

<b>Skilled Care:</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
<b>Intermediate Care:</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
<b>Medicare Certified:</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>Medicaid Certified:</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>Veterans Contract:</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>Ownership Status:</b>	For profit.

**Available Medical Services:** In-house physician/medical director; makes rounds and has office hours at least twice a week.

**OTHER LEVELS OF CARE**

<b>Respite Care:</b>	Available.
<b>Sheltered Care:</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>Independent:</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>Entrance Fee:</b>	None.

**SERVICES OFFERED**

<b>Activities:</b>	Therapeutic Recreation Department; programs daily including evening, weekends, and holidays.
<b>Beauty Shop:</b>	Full service shop open to all residents.
<b>Transportation:</b>	To/from medical appointments, community outings.
<b>Laundry:</b>	Laundry is provided free to all residents.
<b>Home-like Features:</b>	Buffet-style dining, general store, soda fountain, coffee shoppe, fresh-baked breads, home-made cookies and more.
<b>Religious:</b>	Variety of religious services offered on a weekly basis.
<b>Telephone:</b>	Available; rooms are equipped with hook-ups. Residents must arrange for their own service.
<b>Cable TV/Satellite:</b>	Cable TV is available.
<b>Alz./Dementia:</b>	No specialized unit, but Alzheimer's/dementia programming is available. Security system on all doors.

**OTHER INFORMATION**

<b>Smoking:</b>	Smoke-free facility.
<b>Resident Council:</b>	Resident Council meets monthly.
<b>Visiting Hours:</b>	No designated visiting hours.
<b>Pets:</b>	Facility pets—Chessy the cat, Sara the cat, birds and fish.

**PROPHETS RIVERVIEW**  
**310 Mosher Drive, Prophetstown, IL 61277**

**Phone:** 815/537-5175 **Fax:** 815/537-2628  
**E-Mail:** jdefrieze@good-sam.com **Website:** www.good-sam.com  
**Contact Person:** Jeanette Defrieze **Administrator:** Jeanette Defrieze

**Skilled Care:**  Yes  No  
**Intermediate Care:**  Yes  No  
**Medicare Certified:**  Yes  No **Medicaid Certified:**  Yes  No  
**Veterans Contract:**  Yes  No **Ownership Status:** Not-for-profit.

**Available Medical Services:** PT, OT, ST, special diets, wound care, IV therapy.

**OTHER LEVELS OF CARE**

**Respite Care:** Available as occupancy permits.  
**Sheltered Care:**  Yes  No  
**Independent:**  Yes  No  
**Entrance Fee:**

**SERVICES OFFERED**

**Activities:** Activities to suit individual needs plus many outings.  
**Beauty Shop:** Beautiful, full service shop.  
**Transportation:** Facility vehicles to meet all needs.  
**Laundry:** Free to residents.  
**Home-like Features:** Home-like atmosphere.  
**Religious:** Devotions daily. Sunday worship service, first Friday mass, bible studies.  
**Telephone:** Hook-ups in all rooms, plus cordless to use elsewhere.  
**Cable TV/Satellite:** Free cable TV in all rooms.  
**Alz./Dementia:** Yes, just not a separate unit.

**OTHER INFORMATION**

**Smoking:** Smoke-free facility.  
**Resident Council:** Council meets monthly.  
**Visiting Hours:** Unrestricted.  
**Pets:** Fish and birds plus family pets that come to visit.

**RESTHAVE HOME OF WHITESIDE COUNTY**  
408 Maple Avenue, Morrison, IL 61270

**Phone:** 815/772-4021      **Fax:** 815/772-4583  
**E-Mail:** Resthave@Resthavehome.com      **Website:** Resthavehome.com  
**Contact Person:** Jim Huber      **Administrator:** Jim Huber

**Skilled Care:**       Yes     No  
**Intermediate Care:**       Yes     No  
**Medicare Certified:**       Yes     No      **Medicaid Certified:**       Yes     No  
**Veterans Contract:**       Yes     No      **Ownership Status:**      Not-for-profit.

**Available Medical Services:**

**OTHER LEVELS OF CARE**

**Respite Care:** NO  
**Sheltered Care:**       Yes     No  
**Independent:**       Yes     No  
**Entrance Fee:** None.

**SERVICES OFFERED**

**Activities:** Scheduled activities throughout the day and evening, including outings.  
**Beauty Shop:** Yes, open Monday through Friday with two hairdressers to choose from.  
**Transportation:** Facility van with wheelchair lift for doctor appointments and outings.  
**Laundry:** Provided at no extra cost.  
**Home-like Features:** Home-like atmosphere.  
**Religious:** Christian-based home with a board of directors made up from area churches. Daily devotions, weekly Bible study and services provided.  
**Telephone:** Residents may have private lines at their expense. Sheltered care residents are required to have a personal phone.  
**Cable TV/Satellite:** Provided in all rooms.  
**Alz./Dementia:** No separate unit, however, facility does have Alzheimer's and dementia residents.

**OTHER INFORMATION**

**Smoking:** Smoke-free facility. Designated outdoor area.  
**Resident Council:** Yes, residents meet monthly.  
**Visiting Hours:** 5:30 am to 8:00 pm. Very liberal with hours.  
**Pets:** Pet visits are allowed. Aviary provided.

**ROCK FALLS REHABILITATION & HEALTH CARE CENTER**  
430 Martin Road, Rock Falls, IL 61071

**Phone:** 815/626-4575      **Fax:** 815/626-2381  
**E-Mail:**      **Website:** Petersenhealthcare.net  
**Contact Person:** Kim Strohman      **Administrator:** Carolyn McBride

**Skilled Care:**       Yes     No  
**Intermediate Care:**       Yes     No  
**Medicare Certified:**       Yes     No      **Medicaid Certified:**     Yes     No  
**Veterans Contract:**       Yes     No      **Ownership Status:**    Not-for-profit..

**Available Medical Services:** Occupational, physical and speech therapy.

**OTHER LEVELS OF CARE**

**Respite Care:** Yes.  
**Sheltered Care:**       Yes     No  
**Independent:**       Yes     No      Independent living for Arrow Wood for 55 and over (21 apartments).  
**Entrance Fee:** No

**SERVICES OFFERED**

**Activities:** Scheduled seven days a week and evenings.  
**Beauty Shop:** Yes.  
**Transportation:** Yes, facility van with lift for doctor appointments and outings.  
**Laundry:** Yes, laundry is provided.  
**Home-like Features:** May bring own dresser, chairs, bedding, pictures; home-like atmosphere.  
**Religious:** All faiths welcome.  
**Telephone:** Residents supply own phones; there is a facility phone.  
**Cable TV/Satellite:** Yes.  
**Alz./Dementia:** No unit, but residents are accepted.

**OTHER INFORMATION**

**Smoking:** Only in designated outside areas with staff member present to supervise.  
**Resident Council:** Yes, and family council.  
**Visiting Hours:** 8:00 am to 10:00 pm with accommodations for family.  
**Pets:** Pet therapy provided by activity department.

**STERLING PAVILION**  
**105 East 23rd Street, Sterling, IL 61081**

<b>Phone:</b>	815/626-4264	<b>Fax:</b>	815/632-0775
<b>E-Mail:</b>	rreed@sterlingrehab.com	<b>Website:</b>	Sterlingrehab.com
<b>Contact Person:</b>	Rhonda Reed	<b>Administrator:</b>	Rhonda Reed

<b>Skilled Care:</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
<b>Intermediate Care:</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
<b>Medicare Certified:</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>Medicaid Certified:</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>Veterans Contract:</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>Ownership Status:</b>	For profit.

**Available Medical Services:**

**OTHER LEVELS OF CARE**

<b>Respite Care:</b>	No
<b>Sheltered Care:</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>Independent:</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>Entrance Fee:</b>	No

**SERVICES OFFERED**

<b>Activities:</b>	Independent and facility based.
<b>Beauty Shop:</b>	Set hours for beautician. Family can use any other time.
<b>Transportation:</b>	Doctor appointments and facility activities.
<b>Laundry:</b>	No charge.
<b>Home-like Features:</b>	
<b>Religious:</b>	Independent and facility based.
<b>Telephone:</b>	Hook-up available, resident arranges service.
<b>Cable TV/Satellite:</b>	Hook-up available, resident is charged \$12 per month for service.
<b>Alz./Dementia:</b>	Specialized services—no locked unit.

**OTHER INFORMATION**

<b>Smoking:</b>	No smoking.
<b>Resident Council:</b>	Meets monthly.
<b>Visiting Hours:</b>	8:00 am to 8:00 pm. No restriction for families of ill residents.
<b>Pets:</b>	Pets may visit.





**TRANSITIONS NURSING & REHABILITATION CENTER**  
1000 Dixon Avenue, Rock Falls, IL 61071

**Phone:** 815/625-8510 **Fax:** 815/625-8443  
**E-Mail:** lsteale@transitionsnursingrehab.com **Website:** www.transitionsnursingrehab.com  
**Contact Person:** **Administrator:** Warren Dick

**Skilled Care:**  Yes  No  
**Intermediate Care:**  Yes  No  
**Medicare Certified:**  Yes  No **Medicaid Certified:**  Yes  No  
**Veterans Contract:**  Yes  No **Ownership Status:** For profit.

**Available Medical Services:** Occupational, physical and speech therapy, mist therapy wound care, IV therapy, wound vac, massage therapy.

**OTHER LEVELS OF CARE**

**Respite Care:** Yes.  
**Sheltered Care:**  Yes  No  
**Independent:**  Yes  No  
**Entrance Fee:** None.

**SERVICES OFFERED**

**Activities:** Scheduled activities throughout the day and evening, including weekly outings, cooking club, culture club, men's club, computer classes, daily exercise class.  
**Beauty Shop:** Yes.  
**Transportation:** Facility van with wheelchair lift.  
**Laundry:** Provided.  
**Home-like Features:** May bring dresser, night stand, pictures, etc., family-style dining.  
**Religious:** All faiths welcome—pastoral services.  
**Telephone:** Residents may have private phone line at their expense.  
**Cable TV/Satellite:** Provided in all rooms at no additional charge.  
**Alz./Dementia:** No separate unit, but facility does have Alzheimer's/dementia residents and is equipped with door alarms.

**OTHER INFORMATION**

**Smoking:** Only in designated areas and at designated times.  
**Resident Council:** Yes.  
**Visiting Hours:** 10:00 am to 8:00 pm — liberal with hours  
**Pets:** Pet visits are allowed.

**WINNING WHEELS**  
701 East Third Street, Prophetstown, IL 61277

**Phone:** 815/537-5168 **Fax:** 815/537-5268  
**E-Mail:** ddynes@ahinc.biz **Website:** www.winningwheels.com  
**Contact Person:** Diane Dynes **Administrator:**

**Skilled Care:**  Yes  No  
**Intermediate Care:**  Yes  No  
**Medicare Certified:**  Yes  No **Medicaid Certified:**  Yes  No  
**Veterans Contract:**  Yes  No **Ownership Status:** Not for profit.

**Available Medical Services:** Physical therapy, speech therapy, occupational therapy and recreational therapy.

**OTHER LEVELS OF CARE**

**Respite Care:** No.  
**Sheltered Care:**  Yes  No  
**Independent:**  Yes  No  
**Entrance Fee:**

**SERVICES OFFERED**

**Activities:** In-house daily and outings 3 or 4 days per week.  
**Beauty Shop:** Yes.  
**Transportation:** Yes.  
**Laundry:** Yes  
**Home-like Features:**  
**Religious:** Chapel in facility.; services held twice a week.  
**Telephone:** Residents must pay for private line; hall phone is available.  
**Cable TV/Satellite:** Cable TV.  
**Alz./Dementia:** No.

**OTHER INFORMATION**

**Smoking:** A smoke-free facility.  
**Resident Council:** Yes.  
**Visiting Hours:** 7:00 a.m. to 10:00 p.m.,  
**Pets:** Two cats, one dog and birds.

**WINNEBAGO  
COUNTY**

**ALDEN ALMA NELSON MANOR**  
550 South Mulford Road, Rockford, IL 61108

**Phone:** 815/484-1002      **Fax:** 815/484-1024  
**E-Mail:**      **Website:** www.aldenalmanelson.com  
**Contact Person:**      **Administrator:** Sherry Gillihan

**Skilled Care:**       Yes    No  
**Intermediate Care:**       Yes    No  
**Medicare Certified:**       Yes    No      **Medicaid Certified:**       Yes    No  
**Veterans Contract:**       Yes    No      **Ownership Status:** For profit.

**Available Medical Services:** Physical, occupational and speech therapy, wound care, tracheotomy care, IV therapy, special diets.

**OTHER LEVELS OF CARE**

**Respite Care:** Yes, as bed availability permits.  
**Sheltered Care:**       Yes       No  
**Independent:**       Yes       No  
**Entrance Fee:**

**SERVICES OFFERED**

**Activities:** Scheduled daily activities, including outings to the community.  
**Beauty Shop:** Yes, open to all residents.  
**Transportation:** Facility vehicle for activities, transportation arranged for medical appointments.  
**Laundry:** Provided for all residents.  
**Home-like Features:**  
**Religious:** Bi-weekly services.  
**Telephone:** Rooms have hook-ups, service must be arranged by resident.  
**Cable TV/Satellite:** TVs with cable provided free of charge. Free wireless Internet.  
**Alz./Dementia:**

**OTHER INFORMATION**

**Smoking:** Smoke-free facility with a dedicated area outside.  
**Resident Council:** Meets monthly.  
**Visiting Hours:** 10:00 am to 8:00 pm.  
**Pets:** Yes, visiting pets

**ALDEN PARK STRATHMOOR**  
**5668 Strathmoor Drive, Rockford, IL 61107**

**Phone:** 815/229-5200 **Fax:** 815/229-1411  
**E-Mail:** In progress **Website:** www.aldenparkstrathmoor.com  
**Contact Person:** **Administrator:** Georgette Parent

**Skilled Care:**  Yes  No  
**Intermediate Care:**  Yes  No  
**Medicare Certified:**  Yes  No **Medicaid Certified:**  Yes  No  
**Veterans Contract:**  Yes  No **Ownership Status:** For profit.

**Available Medical Services:** Occupational, physical, infusion and speech therapy. Respiratory rehabilitation, behavioral health unit.

**OTHER LEVELS OF CARE**

**Respite Care:** Yes  
**Sheltered Care:**  Yes  No  
**Independent:**  Yes  No  
**Entrance Fee:** Varies, depending on income and status when admitted; private pay residents.

**SERVICES OFFERED**

**Activities:** Weekly outings to mall, shopping, restaurants, singing groups visit facility, exercise groups, various religious groups visit.  
**Beauty Shop:** Yes.  
**Transportation:** None available at this time, but hoping to get a van.  
**Laundry:** Yes.  
**Home-like Features:** Family is welcome to bring items to personalize room.  
**Religious:** All faiths welcome.  
**Telephone:** Residents' choice to bring their own phone.  
**Cable TV/Satellite:** Yes.  
**Alz./Dementia:** Yes.

**OTHER INFORMATION**

**Smoking:** No.  
**Resident Council:** Meets once a month.  
**Visiting Hours:** 10:00 am to 8:00 pm, but will give family members consideration for earlier or later times.  
**Pets:** Allowed to visit.

**ALPINE FIRESIDE HEALTH CENTER**  
**3650 North Alpine Road, Rockford, IL 61114**

**Phone:** 815/877-7408      **Fax:** 815/877-9818  
**E-Mail:** admission@alpinefireside.com      **Website:** AlpineFireside.com  
**Contact Person:**      **Administrator:** Gordon Oksnevad

**Skilled Care:**       Yes     No  
**Intermediate Care:**       Yes     No  
**Medicare Certified:**       Yes     No      **Medicaid Certified:**       Yes     No  
**Veterans Contract:**       Yes     No      **Ownership Status:** For profit.

**Available Medical Services:** Occupational therapy, physical therapy, and speech therapy.

**OTHER LEVELS OF CARE**

**Respite Care:** Yes.  
**Sheltered Care:**       Yes     No  
**Independent:**       Yes     No  
**Entrance Fee:** None.

**SERVICES OFFERED**

**Activities:** Various clubs in which to participate, activity outings, bingo, crafts, river boat rides, shopping trips, etc. Activities to meet needs of each resident.  
**Beauty Shop:** Yes.  
**Transportation:** Have bus to accommodate clients with wheelchairs.  
**Laundry:** Yes, available for a monthly fee.  
**Home-like Features:** Can bring anything (favorite chair, etc.) from home.  
**Religious:** Welcome any and all religious beliefs. Services every Sunday daily devotions and weekly rosary.  
**Telephone:** Client s can establish their own party line and/or have own cell phone.  
**Cable TV/Satellite:** It is available at resident's expense.  
**Alz /Dementia:** These patients are accepted.

**OTHER INFORMATION**

**Smoking:** Non-smoking facility; designated area outside.  
**Resident Council:** Yes, monthly.  
**Visiting Hours:** Flexible, but usually 8:00 am to 10:00 pm.  
**Pets:** Yes, but family member has to help in care of small pet.

**AMBERWOOD CARE CENTRE**  
**2313 North Rockton Avenue, Rockford, IL 61103**

<b>Phone:</b>	815/964-2200	<b>Fax:</b>	815/965-7722
<b>E-Mail:</b>	jlogan@amberwoodcarecentre.com	<b>Website:</b>	amberwoodcare.com
<b>Contact Person:</b>	Julie Logan	<b>Administrator:</b>	Julie Logan

<b>Skilled Care:</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
<b>Intermediate Care:</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
<b>Medicare Certified:</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>Medicaid Certified:</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>Veterans Contract:</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>Ownership Status:</b>	Limited liability company.

**Available Medical Services:**

Hospice care, physical and occupational therapy, occupational and physical rehabilitation, speech therapy, specialized wound care and Alzheimer's treatment.

**OTHER LEVELS OF CARE**

<b>Respite Care:</b>	Yes.
<b>Sheltered Care:</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>Independent:</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>Entrance Fee:</b>	No.

**SERVICES OFFERED**

<b>Activities:</b>	Various activities, trips are offered periodically, podiatrist and optometrist are available.
<b>Beauty Shop:</b>	Yes.
<b>Transportation:</b>	Facility will assist resident in scheduling transportation.
<b>Laundry:</b>	Resident personal laundry done at no charge.
<b>Home-like Features:</b>	Allowed to bring items from home—pictures, own dresser, favorite chair, radio, TV.
<b>Religious:</b>	All religious beliefs are welcomed.
<b>Telephone:</b>	Available, but there is a charge, and cell phones are permitted.
<b>Cable TV/Satellite:</b>	Included in daily rate.
<b>Alz./Dementia:</b>	Secured dementia unit.

**OTHER INFORMATION**

<b>Smoking:</b>	Supervised smoking is allowed.
<b>Resident Council:</b>	Yes.
<b>Visiting Hours:</b>	Unlimited — front door open 8:00 am to 8:00 pm.
<b>Pets:</b>	Pets are allowed to visit.



**ASTA CARE CENTER OF ROCKFORD**  
**707 West Riverside Boulevard, Rockford, IL 61103**

<b>Phone:</b>	815/877-5752	<b>Fax:</b>	815/282-2203
<b>E-Mail:</b>	asta5@msn.com	<b>Website:</b>	www.astacare.com
<b>Contact Person:</b>	Sherry Williams	<b>Administrator:</b>	Pat Bloomgarden

<b>Skilled Care:</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	\$165 per day semi-private.
<b>Intermediate Care:</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Medicare Certified:</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>Medicaid Certified:</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>Veterans Contract:</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>Ownership Status:</b> Limited liability company.

**Available Medical Services:** OT, PT, ST, IV therapy, dialysis, wound care, and rehabilitation services.

**OTHER LEVELS OF CARE**

<b>Respite Care:</b>	Yes.
<b>Sheltered Care:</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>Independent:</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>Entrance Fee:</b>	

**SERVICES OFFERED**

<b>Activities:</b>	Outings including entertainment and working with crafts.
<b>Beauty Shop:</b>	Shampoos, cuts, color, and perms.
<b>Transportation:</b>	Yes, for outings and appointments.
<b>Laundry:</b>	Included.
<b>Home-like Features:</b>	
<b>Religious:</b>	Daily devotional, Sunday service, and also non-denominational
<b>Telephone:</b>	Residents must arrange service.
<b>Cable TV/Satellite:</b>	Free.
<b>Alz./Dementia:</b>	Accepts patients, no secure unit.

**OTHER INFORMATION**

<b>Smoking:</b>	Outside. Smoking program for those needing help.
<b>Resident Council:</b>	Meets monthly.
<b>Visiting Hours:</b>	9:00 am to 9:00 pm.
<b>Pets:</b>	May visit.

**EAST BANK CENTER**  
**6131 Park Ridge Road, Loves Park, IL 61111**

**Phone:** 815/633-6810 **Fax:** 815/633-5095  
**E-Mail:** rvm6131@inwave1.com **Website:**  
**Contact Person:** Edna Atanacio **Administrator:** Jim Palazzo

**Skilled Care:**  Yes  No \$300 per day semi-private, \$350 per day private.  
**Intermediate Care:**  Yes  No  
**Medicare Certified:**  Yes  No **Medicaid Certified:**  Yes  No  
**Veterans Contract:**  Yes  No **Ownership Status:** For profit.

**Available Medical Services:** Physical therapy, occupational therapy, speech therapy, tube feeding, wound care, special diets, IV therapy, telemetry.

**OTHER LEVELS OF CARE**

**Respite Care:** Yes, as occupancy permits.  
**Sheltered Care:**  Yes  No  
**Independent:**  Yes  No  
**Entrance Fee:** None.

**SERVICES OFFERED**

**Activities:** Daily for all levels of care.  
**Beauty Shop:** Beautician comes twice a week.  
**Transportation:** Yes, for outings and appointments.  
**Laundry:** In-house at no charge.  
**Home-like Features:**  
**Religious:** Daily communion, various other groups.  
**Telephone:** Yes.  
**Cable TV/Satellite:** Yes.  
**Alz./Dementia:** No unit, acceptance of dementia patients depends on their behavior.

**OTHER INFORMATION**

**Smoking:** No smoking policy.  
**Resident Council:** Monthly.  
**Visiting Hours:** 10:00 am to 8:00 pm, or as needed.  
**Pets:** Pets can visit.

**FAIR OAKS REHAB AND HEALTHCARE CENTER**  
**1515 Blackhawk Boulevard, South Beloit, IL 61080**

<b>Phone:</b>	815/389-3911	<b>Fax:</b>	815/389-0565
<b>E-Mail:</b>	Fairoaks@tutera.com	<b>Website:</b>	www.fairoaksrehabandhealth.com
<b>Contact Person:</b>		<b>Administrator:</b>	Sheila Storey

<b>Skilled Care:</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
<b>Intermediate Care:</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
<b>Medicare Certified:</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>Medicaid Certified:</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>Veterans Contract:</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>Ownership Status:</b>	Not-for-profit.

**Available Medical Services:** Occupational therapy, physical therapy and speech therapy. Outpatient therapy has been added.

**OTHER LEVELS OF CARE**

<b>Respite Care:</b>	Yes
<b>Sheltered Care:</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>Independent:</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>Entrance Fee:</b>	No.

**SERVICES OFFERED**

<b>Activities:</b>	Various activity programs daily.
<b>Beauty Shop:</b>	Yes.
<b>Transportation:</b>	Facility van for social outings and appointments.
<b>Laundry:</b>	Yes.
<b>Home-like Features:</b>	May have whatever items client prefers for their room.
<b>Religious:</b>	Not affiliated with any church. Bible study on Wednesdays. Residents may have own leader visit for his/her own needs.
<b>Telephone:</b>	Resident's responsibility.
<b>Cable TV/Satellite:</b>	Resident's responsibility.
<b>Alz./Dementia:</b>	No unit.. Acceptance of dementia patients by assessment.

**OTHER INFORMATION**

<b>Smoking:</b>	Non-smoking facility.
<b>Resident Council:</b>	Yes, resident and food council monthly.
<b>Visiting Hours:</b>	Open visiting hours.
<b>Pets:</b>	Visiting Pets

**FAIRHAVEN CHRISTIAN RETIREMENT CENTER**  
**3470 North Alpine Road, Rockford, IL 61114**

**Phone:** 815/877-1441      **Fax:** 815/877-2040  
**E-Mail:** Tom@Fairhaven.cc      **Website:** Fairhaven.cc  
**Contact Person:** Thomas Bleed      **Administrator:** Thomas Bleed

**Skilled Care:**       Yes     No  
**Intermediate Care:**       Yes     No  
**Medicare Certified:**       Yes     No      **Medicaid Certified:**     Yes     No  
**Veterans Contract:**       Yes     No      **Ownership Status:**    Not-for-profit.

**Available Medical Services:** Intermediate and sheltered licensed nursing care. Restorative rehab.

**OTHER LEVELS OF CARE**

**Respite Care:** Available to current residents only.  
**Sheltered Care:**       Yes     No  
**Independent:**       Yes     No      **Studios, apartments, and duplex living.**  
**Entrance Fee:** Range \$15,000 and up. For independent living, resident agreement price relative to living space.

**SERVICES OFFERED**

**Activities:** Scheduled for all levels of care.  
**Beauty Shop:** Full service shop open to all residents.  
**Transportation:** Facility vehicle is used for scheduled trips. Facility vehicle and CNA certified driver available for arranged trips and appointments.  
**Laundry:** Personal laundry facilities free to residents. Personal laundry service available for a fee.  
**Home-like Features:**  
**Religious:** Chapel services, bible studies, community church programs.  
**Telephone:** Resident responsibility.  
**Cable TV/Satellite:** Cable TV service available.  
**Alz./Dementia:** No specialized care.

**OTHER INFORMATION**

**Smoking:** Smoke-free facility.  
**Resident Council:** Meets regularly for all levels of care.  
**Visiting Hours:** Unrestricted.  
**Pets:** Supervised pet visits welcome.

**FAIRVIEW NURSING PLAZA**  
321 Arnold Avenue, Rockford, IL 61108

**Phone:** 815/397-5531

**Fax:**

**E-Mail:**

**Website:** Fairviewnursingplaza.com

**Contact Person:**

**Administrator:** Mike Toral

**Skilled Care:**  Yes  No

**Intermediate Care:**  Yes  No

**Medicare Certified:**  Yes  No **Medicaid Certified:**  Yes  No

**Veterans Contract:**  Yes  No **Ownership Status:** For profit.

**Available Medical Services:** Physical, occupational, IV and speech therapies, tube feeding, wound care, respiratory, trach and oxygen care.

**OTHER LEVELS OF CARE**

**Respite Care:** Yes.

**Sheltered Care:**  Yes  No

**Independent:**  Yes  No

**Entrance Fee:**

**SERVICES OFFERED**

**Activities:** Recreational and therapeutic activities.

**Beauty Shop:** Yes.

**Transportation:** Yes.

**Laundry:** Yes, free.

**Home-like Features:**

**Religious:** Weekly.

**Telephone:** Phone in room is resident's responsibility.

**Cable TV/Satellite:**

**Alz./Dementia:** No unit, but dementia patients are accepted.

**OTHER INFORMATION**

**Smoking:** Yes.

**Resident Council:** As needed.

**Visiting Hours:** 9:00 am to 9:00 pm

**Pets:** Allowed to visit.

**MEDINA MANOR NURSING CENTER**  
402 South Center, Durand, IL 61024

**Phone:** 815/248-2151 **Fax:** 815/248-2771  
**E-Mail:** Karen@medinamanor.com **Website:** www.medinamanor.com  
**Contact Person:** Karen Bliven **Administrator:** Holgeir Oksnevad

**Skilled Care:**  Yes  No  
**Intermediate Care:**  Yes  No  
**Medicare Certified:**  Yes  No **Medicaid Certified:**  Yes  No  
**Veterans Contract:**  Yes  No **Ownership Status:** For profit.

**Available Medical Services:** Wound care, isolation, special diets, tracheotomy care, OT, PT, ST therapies, IV therapy.

**OTHER LEVELS OF CARE**

**Respite Care:** On an as-needed basis.  
**Sheltered Care:**  Yes  No  
**Independent:**  Yes  No  
**Entrance Fee:** None.

**SERVICES OFFERED**

**Activities:** Seven days per week, including community involvement and summer cookouts.  
**Beauty Shop:** Monday, Wednesday and Friday, 8:00 am to 2:00 pm.  
**Transportation:** Van and facility bus for outings, medical appointments per fee schedule.  
**Laundry:** Included in room rate, laundry room on each floor for independent apartments.  
**Home-like Features:** Room personalization encouraged.  
**Religious:** Church service two times a week, Catholic mass once a month, communion weekly.  
**Telephone:** Cordless phone available for use, private hook-up extra. Cell phones allowed.  
**Cable TV/Satellite:** Cable in lounge, satellite system in rooms. Can bring TV from home.  
**Alz./Dementia:** Mainstreamed, no locked unit.

**OTHER INFORMATION**

**Smoking:** Smoke-free facility, but smoking allowed outside.  
**Resident Council:** Monthly meetings.  
**Visiting Hours:** Unrestricted.  
**Pets:** Three house dogs—Molly, Pepper and Benji—and birds.

**P. A. PETERSON CENTER FOR HEALTH**  
1311 Parkview Avenue, Rockford, IL 61107

**Phone:** 815/399-8832      **Fax:** 815/399-8342  
**E-Mail:** Christine.Hintzsche@lssi.org      **Website:** www.lssi.org  
**Contact Person:** Christine Hintzsche      **Administrator:** Peggy Holt

**Skilled Care:**       Yes     No  
**Intermediate Care:**       Yes     No  
**Medicare Certified:**       Yes     No      **Medicaid Certified:**       Yes     No  
**Veterans Contract:**       Yes     No      **Ownership Status:** Not-for-profit, faith-based.

**Available Medical Services:** Physical, occupational and speech therapies, limited IV therapy, wound care, special diets, infections, and disease isolation.

**OTHER LEVELS OF CARE**

**Respite Care:** Available as occupancy permits.  
**Sheltered Care:**       Yes     No  
**Independent:**       Yes     No  
**Entrance Fee:** N/A

**SERVICES OFFERED**

**Activities:** Scheduled recreational opportunities for all levels of care. Van/bus available for community outings.  
**Beauty Shop:** Beauty shops available to all residents.  
**Transportation:** Facility vehicle is used for scheduled activities and shopping trips. Transportation will be arranged for medical appointments when needed.  
**Laundry:** Facility does bedding and linen laundry; there is a charge for personal laundry. Washers and dryers are available for independent and sheltered care residents.  
**Home-like Features:** Buffet dining for all levels of care; happy hour once a week.  
**Religious:** Chapel, various church services, monthly mass, weekly communion.  
**Telephone:** Facility takes care of hook-up.  
**Cable TV/Satellite:** Facility takes care of hook-up.  
**Alz./Dementia:** Specialized programming, secured, alarmed unit.

**OTHER INFORMATION**

**Smoking:** Smoke-free facility.  
**Resident Council:** Council meets monthly.  
**Visiting Hours:** Unrestricted.  
**Pets:** Visiting pet programs allowed for all levels of care. Small pets allowed for independent residents in accordance with the pet policy.

**PROVENA COR MARIAE CENTER**  
3330 Maria Linden Drive, Rockford, IL 61114

**Phone:** 815/877-7416      **Fax:** 815/877-4299  
**E-Mail:**      **Website:** www.provena.org  
**Contact Person:** Teresa Wester-Peters      **Administrator:** Teresa Wester-Peters

**Skilled Care:**       Yes    No      Rates vary according to room accommodations and level of care.  
**Intermediate Care:**       Yes    No      Rates vary according to room accommodations and level of care.  
**Medicare Certified:**       Yes    No      **Medicaid Certified:**       Yes    No  
**Veterans Contract:**       Yes    No      **Ownership Status:**      Not-for-profit.

**Available Medical Services:** Medical director, pharmacy service, dietitian, 24-hour skilled nursing. OT, PT, ST, hospice, nurses are certified with wound vacs.

**OTHER LEVELS OF CARE**

**Respite Care:** Yes, as occupancy permits.  
**Sheltered Care:**       Yes    No      Rates vary according to room accommodations and level of care.  
**Independent:**       Yes    No      Rates vary according to room accommodations and level of care.  
**Entrance Fee:** No.

**SERVICES OFFERED**

**Activities:** Red Hat Club, resident choir, comedy hour, exercise classes, arts and crafts, art appreciation course, garden club, cooking club and computer access.  
**Beauty Shop:** Two beauty/barber shops.  
**Transportation:** For resident outings to community. Transportation to doctor appointments for independent living.  
**Laundry:** For all residents at no charge.  
**Home-like Features:** Own furniture, pictures, anything from the home. There are 26 acres around the facility with gardens, etc.  
**Religious:** Daily mass, weekly ecumenical service.  
**Telephone:** Available in all rooms.  
**Cable TV/Satellite:** Available in all rooms.  
**Alz./Dementia:** Individually assessed for admission.

**OTHER INFORMATION**

**Smoking:** Smoke-free facility; outside smoking allowed.  
**Resident Council:** Yes, at all levels.  
**Visiting Hours:** Open visiting hours.  
**Pets:** Pets may visit.



**PROVENA ST. ANNE CENTER**  
**4405 Highcrest Road, Rockford, IL 61107**

**Phone:** 815/229-1999      **Fax:** 815/229-1560  
**E-Mail:**      **Website:** Www.provena.org  
**Contact Person:**      **Administrator:** Janelle Chadwick

**Skilled Care:**       Yes     No  
**Intermediate Care:**       Yes     No  
**Medicare Certified:**       Yes     No      **Medicaid Certified:**       Yes     No  
**Veterans Contract:**       Yes     No      **Ownership Status:** Not-for-profit.

**Available Medical Services:** Physical, occupational and speech therapies, wound care, special diets.

**OTHER LEVELS OF CARE**

**Respite Care:** Based on availability.  
**Sheltered Care:**       Yes     No  
**Independent:**       Yes     No  
**Entrance Fee:** No.

**SERVICES OFFERED**

**Activities:** Scheduled activities for all levels of care, including outings to the community.  
**Beauty Shop:** Full service shop open to all residents.  
**Transportation:**  
**Laundry:** Laundry is provided for all residents.  
**Home-like Features:**  
**Religious:** Catholic not-for-profit, but all faiths are served.  
**Telephone:** Rooms are equipped with hook-ups—phones provided in Medicare rooms.  
**Cable TV/Satellite:** Cable is provided throughout the facility.  
**Alz./Dementia:** No unit, but do accept dementia residents.

**OTHER INFORMATION**

**Smoking:** Smoke-free facility.  
**Resident Council:** Yes.  
**Visiting Hours:** 8:00 am to 8:00 pm.  
**Pets:** Pets can visit residents.

**RIVER BLUFF NURSING HOME**  
**4401 North Main Street, Rockford, IL 61103**

**Phone:** 815/877-8061      **Fax:** 815/877-1069  
**E-Mail:**      **Website:**  
**Contact Person:** Becky Peterson, Admissions      **Administrator:** Phyllis Schwebke

**Skilled Care:**       Yes    No  
**Intermediate Care:**       Yes    No  
**Medicare Certified:**       Yes    No      **Medicaid Certified:**       Yes    No  
**Veterans Contract:**       Yes    No      **Ownership Status:** County.

**Available Medical Services:** PT, OT, ST, respiratory services.

**OTHER LEVELS OF CARE**

**Respite Care:** No  
**Sheltered Care:**       Yes       No  
**Independent:**       Yes       No  
**Entrance Fee:** None.

**SERVICES OFFERED**

**Activities:** Wide variety, high functioning/sensory, clothing store on-site, and four courtyards  
**Beauty Shop:** Beauty shop and gift shop on-site.  
**Transportation:** For activities in community.  
**Laundry:** Available free to any resident. Washer/dryer on-site, if desired.  
**Home-like Features:** Buffet/restaurant dining. Neighborhoods and resident choices.  
**Religious:** Variety of religious services available. Chaplain on-site and a chapel.  
**Telephone:** Available, private hook-up.  
**Cable TV/Satellite:** Cable TV on all units in living room area.  
**Alz./Dementia:** Yes, but no secure unit available.

**OTHER INFORMATION**

**Smoking:** Non-smoking facility.  
**Resident Council:** Meets once a month.  
**Visiting Hours:** 8:00 am to 8:30 pm suggested, but open 24 hours.  
**Pets:** Aviary, fish and pet visits anytime, and staff brings in their pets to visit for the day.

**ROSEWOOD CARE CENTER**  
1660 South Mulford Road, Rockford, IL 61108

**Phone:** 815/397-8700      **Fax:** 815/397-4880  
**E-Mail:**      **Website:** www.rosewoodnursing.com  
**Contact Person:**      **Administrator:** Bart Becker

**Skilled Care:**       Yes    No      Daily room rates available upon request.  
**Intermediate Care:**       Yes    No  
**Medicare Certified:**       Yes    No      **Medicaid Certified:**       Yes    No  
**Veterans Contract:**       Yes    No      **Ownership Status:** For profit.

**Available Medical Services:** Physical, occupational and speech therapies, wound care, nutritional management, IV therapy, dialysis treatments, RN case management.

**OTHER LEVELS OF CARE**

**Respite Care:** Available as occupancy permits.  
**Sheltered Care:**       Yes       No  
**Independent:**       Yes       No  
**Entrance Fee:**

**SERVICES OFFERED**

**Activities:** Activities offered daily, for all levels of care. Evenings and weekends included.  
**Beauty Shop:** Full service shop available to all guests.  
**Transportation:** Transportation will be arranged as needed for medical appointments.  
**Laundry:** Yes, no additional charge.  
**Home-like Features:**  
**Religious:** Protestant services held twice a week. Communion on Sunday.  
**Telephone:** Long-term rooms are equipped with hook-ups. Guests must arrange their own service/activation.  
**Cable TV/Satellite:** Yes.  
**Alz./Dementia:** No locked unit, but dementia residents are accepted.

**OTHER INFORMATION**

**Smoking:** Supervised, designated smoking area.  
**Resident Council:** Resident Council meets once a month in addition to monthly guest meetings with the administrator.  
**Visiting Hours:** Daily from 8:00 am to 8:00 pm, alternative arrangements can be made when necessary.  
**Pets:** Pet therapy program.

**WILLOWS HEALTH & REHAB CENTER**  
4054 Albright Lane, Rockford, IL 61103

**Phone:** 815/316-1500 **Fax:** 815/654-8160  
**E-Mail:** **Website:** www.wesleywillows.org  
**Contact Person:** Lu-Anne Brannum, RN, Dir. of Health Services **Administrator:** Debra Adkins

**Skilled Care:**  Yes  No  
**Intermediate Care:**  Yes  No  
**Medicare Certified:**  Yes  No **Medicaid Certified:**  Yes  No  
**Veterans Contract:**  Yes  No **Ownership Status:** Not-for-profit.

**Available Medical Services:** Occupational, physical therapy and speech therapy (inpatient and outpatient).

**OTHER LEVELS OF CARE**

**Respite Care:** Yes.  
**Sheltered Care:**  Yes  No  
**Independent:**  Yes  No  
**Entrance Fee:** Entrance fees starting at \$15,000.

**SERVICES OFFERED**

**Activities:** Various clubs in which to participate and occasional trips are offered. Also have a library.  
**Beauty Shop:** Yes.  
**Transportation:** Provided to drug stores, grocery stores and doctor appointments.  
**Laundry:** They have facilities for clients to do their own laundry. Laundry service is also provided.  
**Home-like Features:** Postal and package service. Private dining room for special events. Three gourmet meals per day.  
**Religious:** All faiths.  
**Telephone:** Included in monthly fee.  
**Cable TV/Satellite:** Included in monthly fee.  
**Alz./Dementia:** Yes. Alzheimer's program available featuring art, music and exercise sessions.

**OTHER INFORMATION**

**Smoking:** Non-smoking facility; smoking permitted in designated areas.  
**Resident Council:** Meets on a monthly basis.  
**Visiting Hours:** 7:00 am—9:00 pm; hours are flexible for family members.  
**Pets:** Not in apartments, but a small pet is permitted in .

**APPENDIX 3**  
**COMMUNITY AGENCIES**

## LONG-TERM CARE OMBUDSMAN PROGRAM

The Long Term Care Ombudsman program protects and improves the quality of care and quality of life for residents of long term care facilities (including licensed assisted living facilities and supportive living facilities). Ombudsmen investigate concerns, mediate disputes, advocate for the rights of residents of long-term care facilities, and provide information on how to choose a nursing home. Ombudsmen provide a voice to vulnerable residents who otherwise may have no one to speak for them.

Concerns and problems are not limited to care at long term facilities, but also include Medicaid, Medicare, family problems, guardianship issues and many other issues that confront long term care facility residents. The ombudsman visits long term care facility residents on a regular basis so residents and families can get to know the ombudsman.

The ombudsman is always an advocate for the resident. Types of problems that can be referred to the Ombudsman Program include problems with food, personal care, privacy, medication, use of restraints, accidents such as falls and other issues. Ombudsmen seek to resolve any problems or concerns in a confidential manner.

Anyone can use the ombudsman service, including long term care facility residents, their friends, relatives, administrators, employees or other concerned citizens.

### WINNEBAGO COUNTY:

Catholic Charities  
102 S. Madison St., Rockford, IL 61104  
Phone: (815) 966-5300  
1-800-369-0895  
E-mail: [ccombudsman@ccrfd.org](mailto:ccombudsman@ccrfd.org)  
Website: [www.ccrfd.org](http://www.ccrfd.org)

### JO DAVIESS AND STEPHENSON COUNTIES:

Catholic Charities  
1231 South Walnut Avenue, Freeport, IL 61032  
Phone: (815) 235-9563  
1-800-369-0895

### BOONE AND DEKALB COUNTIES:

Catholic Charities  
1315 Pleasant, DeKalb, IL 60115  
Phone: (815) 756-8632  
1-800-369-0895

### CARROLL, LEE, OGLE AND WHITESIDE COUNTIES:

Catholic Charities  
801 West 11th Street, Sterling, IL 61081  
Phone: (815) 625-6945  
1-800-369-0895

## **CASE MANAGEMENT/CASE COORDINATION UNIT**

Case management service assists older adults with multiple health problems. Case managers assess need, develop care plans and monitor care on an ongoing basis. Case managers visit seniors in their home, the hospital or nursing home to evaluate an older person's ability to function independently. Case managers provide information about housing, assisted living and nursing home options and determine eligibility for the State of Illinois Community Care Program and the Supportive Living Program.

### **BOONE & WINNEBAGO COUNTIES**

Visiting Nurses Association (VNA)  
4223 East State Street  
Rockford, IL 61108  
Phone: (815) 971-3502  
E-mail: [vnaweb@rhsnet.org](mailto:vnaweb@rhsnet.org)  
Website: [www.rhsnet.org/about/vna.aspx](http://www.rhsnet.org/about/vna.aspx)

### **CARROLL, LEE, OGLE, & WHITESIDE COUNTIES**

Lutheran Social Services of Illinois  
Intouch Services  
1901 First Avenue  
Sterling, IL 61081  
Phone: (815) 626-7333  
E-mail: [sarah.karras@lssi.org](mailto:sarah.karras@lssi.org)  
Website: [www.lssi.org](http://www.lssi.org)

### **DEKALB COUNTY**

Elder Care Services of DeKalb County  
330 Grove Street  
DeKalb, IL 60115  
Phone: (815) 758-6550  
E-mail: [zsabin@ecsdekalb.org](mailto:zsabin@ecsdekalb.org)

### **JO DAVIESS & STEPHENSON COUNTIES**

Stephenson County Senior Center  
1237 West Galena Avenue  
Freeport, IL 61032  
Phone: (815) 235-9777 or (800) 424-6696  
E-mail: [mrichter@stephensonseniorcenter.org](mailto:mrichter@stephensonseniorcenter.org)  
Website: [www.encompasscentral.com/nwil](http://www.encompasscentral.com/nwil)



## INFORMATION & ASSISTANCE AGENCIES

Information and Assistance (I&A) services older adults and their caregivers with current information on all programs and services available within the community including assisted living, nursing home, and independent senior housing options.

### OLDER AMERICANS ACT FUNDED INFORMATION & ASSISTANCE SERVICE SITES

- BOONE COUNTY:** Boone County Council on Aging  
2141 Henry Luckow Lane, Belvidere, IL 61008  
Phone: (815) 544-9893 or 1-800-961-5336  
Fax: (815) 547-7373  
E-mail: [keenage@mwci.net](mailto:keenage@mwci.net)  
Website: [www.keenage.org](http://www.keenage.org)
- CARROLL COUNTY:** Carroll County Senior Services Organization, Inc.  
306 N. Main Street, Box 45, Mt. Carroll, IL 61053  
Phone: (815) 244-1800 or 1-866-214-1959  
Fax: (815) 244-5334  
E-Mail: [ccsso@internetni.com](mailto:ccsso@internetni.com)
- DEKALB COUNTY:** Elder Care Services of DeKalb County  
330 Grove Street, DeKalb, IL 60115  
Phone: (815) 758-6550  
Fax: (815) 758-4239  
E-mail: [zsabin@ecsdekalb.org](mailto:zsabin@ecsdekalb.org)
- LEE COUNTY:** Lee County Senior Center  
100 West 2nd Street, Dixon, IL 61021  
Phone: (815) 288-6563 or 1-888-239-9228  
Fax: (815) 288-6563  
E-mail: [lccoa@insightbb.com](mailto:lccoa@insightbb.com)
- OGLE COUNTY:** Rock River Center  
215 Washington Street, Oregon, IL 61061  
Phone: (815) 732-3252 or 1-800-541-5479  
Fax: (815) 732-4318  
E-mail: [rockrivercenter@verizon.net](mailto:rockrivercenter@verizon.net)  
Website: [www.rockrivercenter.org](http://www.rockrivercenter.org)
- JO DAVIESS AND  
STEPHENSON  
COUNTIES:** Stephenson County Senior Center  
1237 West Galena Avenue, Freeport, IL 61032  
Phone: (815) 235-9777 or 1-800-424-6696  
Fax: (815) 235-9571  
E-mail: [mrichter@stephensonseniorcenter.org](mailto:mrichter@stephensonseniorcenter.org)  
Website: [www.stephensonseniorcenter.org](http://www.stephensonseniorcenter.org)



**WHITESIDE COUNTY:** Whiteside County Senior Center  
1207 West 9<sup>th</sup> Street, Sterling, IL 61081  
Phone: (815) 626-7707 or 1-800-645-2859  
Fax: (815) 625-0155  
Website: [www.whitesideseniorcenter.com](http://www.whitesideseniorcenter.com)

**WINNEBAGO COUNTY:** Lifescape Community Services, Inc.  
705 Kilburn Avenue, Rockford, IL 61101  
Phone: (815) 963-1609 or 1-800-779-1189  
Fax: (815) 963-1627  
E-mail: [lifescape@lifescapeservices.org](mailto:lifescape@lifescapeservices.org)  
Website: [www.lifescapeservices.org](http://www.lifescapeservices.org)

**NINE COUNTIES:** Northwestern Illinois Area Agency on Aging  
Rockford Plaza  
2576 Charles Street, Rockford, IL 61108-1652  
Phone: (815) 226-4901 or 1-800-542-8402  
Fax: (815) 226-8984  
E-mail: [niaaa@nwilaaa.org](mailto:niaaa@nwilaaa.org)  
Website: [www.nwilaaa.org](http://www.nwilaaa.org)

## DEPARTMENT OF HUMAN SERVICES

Apply for Medicaid at the local DHS office listed below or call the office to receive an application in the mail. An application may also be filed on-line at [www.idhslink.com](http://www.idhslink.com). DHS must determine eligibility within 45 days. Persons may appeal denial, termination or reduction of benefits within 60 days from the date of notice. The appeal may be by phone or in writing.

### **BOONE COUNTY**

2090 Pearl Street, Belvidere, IL 61008  
Phone: (815) 544-3484  
Fax: (815) 547-6735

### **CARROLL COUNTY:**

820 South Mill St., PO Box 153, Mt. Carroll, IL 61053  
Phone: (815) 244-3301  
Fax: (815) 244-1227

### **DEKALB COUNTY:**

1629 Afton Road, Sycamore, IL 60178  
Phone: (815) 895-8667  
Fax: (815) 895-8679

### **JO DAVIESS COUNTY:**

708 S. West St., PO Box 237, Galena, IL 61036  
Phone: (815) 777-0718  
Fax: (815) 777-8230

### **LEE AND OGLE COUNTY:**

106 North 2<sup>nd</sup> Street, Oregon, IL 61061  
Phone: (815) 732-2166  
Fax: (815) 732-4223

### **STEPHENSON COUNTY:**

1631 S. Galena Avenue, Freeport, IL 61032  
Phone: (815) 232-6121  
Fax: (815) 233-5541 or 232-7625

### **WHITESIDE COUNTY:**

2605 Woodlawn Road, Sterling, IL 61081  
Phone: (815) 632-4045  
Fax: (815) 632-4057

### **WINNEBAGO COUNTY:**

1111 North Avon Street, Rockford, IL 61101  
Phone: (815) 987-7620  
Fax: (815) 987-2380

## **Prairie State Legal Services' Telephone Counseling Service**

BOONE, CARROLL,  
JO DAVIESS, OGLE,  
STEPHENSON and  
WINNEBAGO COUNTIES

303 North Main Street, Suite 600  
Rockford, IL 61103  
Phone: (815) 965-2134  
Toll Free: (800) 892-2985  
TTY: (815) 965-5114  
FAX: (815) 965-1081

Call from 9:00 am to 11:45 am and 1:00 pm to 4:00 pm  
Monday through Friday.

DEKALB COUNTY

1024 West Main Street  
St. Charles, IL 60174  
Phone: (630) 232-9415  
Toll Free: (800) 942-4612  
TTY: (630) 232-9412  
FAX: (630) 232-9402

Call from 9:00 am to 11:45 am Monday through Friday.

LEE COUNTY

1021 Clinton Street  
Ottawa, IL 61350  
Phone: (815) 434-5903  
Toll Free: (800) 892-7888  
TTY: (815) 434-6011  
FAX: (815) 434-2642

Call from 9:00 am to 11:45 am Monday through Friday.

WHITESIDE COUNTY

1705 Second Avenue, #314  
Rock Island, IL 61201  
Phone: (309) 794-1328  
Toll Free: (800) 322-9804  
TTY: (309) 794-1302  
FAX: (309) 794-0265

Call from 9:00 am to 11:45 am Monday through Friday.