



Long-Term Care Facility - Approved Licensure Actions

RECEIVED

Current Licensure Information:

Facility ID # 6007884

MAR 9 2015

Licensee ID# 0005785

Facility Name: Resthove Home-Whiteside Co

HEALTH FACILITIES &
 SERVICES REVIEW BOARD

Address: 408 Maple Avenue

City: Morrison

County: Whiteside

ZIP Code: 61270

The Division of Long-Term Care Quality Assurance has approved the facility listed above for the following licensure actions(s):

- New Facility
 CHOW
 Name Change
 Licensee Change
 Address Change
 Bed Change
 Closure

1. New Facility - Effective Date of Initial Licensure: _____ - _____ - _____

Bed Capacity:

Skilled	_____
Under Age 22	_____
Intermediate	_____
ICF/DD	_____
ICF/DD > 16 Beds	_____
Sheltered Care	_____
Community Living	_____
TOTAL	_____

Facility will operate an ASCU: Yes No

2. Change of Ownership - Effective Date of Ownership: _____ - _____ - _____

Effective Date of Licensure: _____ - _____ - _____

New Facility Name: _____

New Licensee ID#: _____

Bed Capacity:

Skilled	_____
Under Age 22	_____
Intermediate	_____
ICF/DD	_____
ICF/DD > 16 Beds	_____
Sheltered Care	_____
Community Living	_____
TOTAL	_____

Facility will operate an ASCU: Yes No



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3. Change of Facility Name - Effective Date of Change: _____ - _____ - _____

New Facility Name: _____

4. Change of Licensee Name - Effective Date of Change: _____ - _____ - _____

New Licensee Name: _____

5. Change of Address - Effective Date of Change: _____ - _____ - _____

New Address: _____

6. Capacity and/or Level of Care - Effective Date: 03 - 04 - 15

From:	Skilled	_____	To:	Skilled	<u>70</u>
	Under Age 22	_____		Under Age 22	_____
	Intermediate	<u>49</u>		Intermediate	_____
	ICF/DD	_____		ICF/DD	_____
	ICF/DD > 16 Beds	_____		ICF/DD > 16 Beds	_____
	Sheltered Care	_____		Sheltered Care	_____
	Community Living	_____		Community Living	_____
	TOTAL	<u>49</u>		TOTAL	<u>70</u>

7. Closure of Facility - Effective Date of Closure: _____ - _____ - _____

Reason for Closure: _____

Additional Notes: Upgrade/Addition to Skilled.

*Selma D. Bryars*₁₆

Licensure Program Administrator

03/04/15

Date