

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>IL6004303</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>10/03/2023</b>
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NAME OF PROVIDER OR SUPPLIER  <b>ALLURE OF PERU</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>1301 21ST STREET PERU, IL 61354</b>
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(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
S 000	<p><b>Initial Comments</b></p> <p>First Probationary Licensure Survey</p>	S 000		
S9999	<p><b>Final Observations</b></p> <p>Statement of Licensure Violations:</p> <p>1 of 2</p> <p>300.625 j) 300.625 k)</p> <p><b>Section 300.625 Identified Offenders</b></p> <p>j) Upon admission of an identified offender to a facility or a decision to retain an identified offender in a facility, the facility, in consultation with the medical director and law enforcement, shall specifically address the resident's needs in an individualized plan of care.</p> <p>k) The facility shall incorporate the Identified Offender Report and Recommendation into the identified offender's care plan. (Section 2-201.6(f) of the Act)</p> <p>This requirement is not met as evidenced by:</p> <p>Based on interview and record review, the facility failed to implement care plan interventions for an identified offender for one of five residents reviewed for identified offenders in a sample of 11.</p> <p>Findings include:</p> <p>The facility's Comprehensive Care Plan policy, revised 7/1/23, documents to develop and implement a comprehensive person-centered care plan for each resident, consistent with resident rights, that includes measurable</p>	S9999	<p><b>Attachment A</b> <b>Statement of Licensure Violations</b></p>	

Illinois Department of Public Health

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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S9999	<p>Continued From page 1</p> <p>objectives and timeframe's to meet a resident's medical, nursing, and mental and psychosocial needs that are identified in the resident's comprehensive assessment.</p> <p>R5's Criminal History Record Information Process, dated 8/21/23, documents a "Hit". R5 had an arrest for deceptive practice and two arrests for manufacturing and/or delivery of cannabis/30-500 grams.</p> <p>R5's current care plan does not address R5 as being an identified offender. R5's medical record does not contain a consultation with local law enforcement to address the residents needs, for an individualized care plan.</p> <p>On 10/3/23 at 1:00pm, V1, Administrator, verified R5's Identified Offender status concerns are not addressed on her current care, but should be. V1 also stated R5 has not been assessed by law enforcement.</p> <p>(C)</p> <p>2 of 2</p> <p>300.660 a)</p> <p>Section 300.660 Nursing Assistants a) A facility shall not employ an individual as a nursing assistant, home health aide, psychiatric services rehabilitation aide, or newly hired as an individual who may have access to a resident, a resident's living quarters, or a resident's personal, financial, or medical records, nurse aide unless the facility has inquired of the Department's Health Care Worker Registry and the individual is listed on the Health Care Worker Registry as eligible to work for a health care employer.</p>	S9999		

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S9999	<p>Continued From page 2</p> <p>This requirement is not met as evidenced by:</p> <p>Based on record review and interviews, the facility failed to perform the required Health Care Worker Background checks including the Finger Print checks on 5 staff members (V5,V6,V7,V8 and V9.)</p> <p>Findings Include:</p> <p>The facility's New Hire List, with no date, documents the following tasks to be completed for a new hire:"Back ground checks completed , Finger Prints,New hire is added to Worker registry."</p> <p>After a review of V5/CNA(Certified Nursing Assistant) employment file, it was found V5 Finger Prints were not found in the file.</p> <p>After review of V6/CNA employment file, it was found V6's Finger Prints were not found in the file.</p> <p>After a review of V7/(Business Office Manger) employment file, it was found V7 did not have the Identified or the Sex Offender checks done.</p> <p>After a review of V8/(Activity) employment file, it was found V8 did not have a Sex Offender or Identified Offender checks done.</p> <p>After a review of V9/(Housekeeper) employment file, it was found V9 did not have a Sex Offender or Identified Offender checks done.</p> <p>On 10/3/2023 at 11:35AM, V1/Administrator</p>	S9999		

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S9999	Continued From page 3  stated, "We are in transition with a new Human Resource person. We are trying to train her, and I guess these checks were missed."  (C)	S9999		