STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	ASL510105	A. BUILDING: _____ B. WING _____	10/10/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
CENTENNIAL POINTE ASSISTED LIVING	3440 HEDLEY ROAD SPRINGFIELD, IL 62712

(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
A 000	Initial Comment Annual Licensure Survey	A 000		
A5000	Section 295.5000 Medication Reminders, Supervision of Self Med This Regulation is not met as evidenced by: Type 3 Violation Section 295.5000 Medication Reminders, Supervision of Self-Medication, Medication Administration and Storage e) Medication stored by a resident in the resident's unit shall be stored and controlled as stated in the resident's service plan and shall be inaccessible to other residents. f) If an establishment provides medication administration or supervision of self-administered medication, the establishment's medication policies and procedures shall be approved by a physician, pharmacist, or registered nurse and shall address: 2) Storing and controlling medication; h) Any medication stored by the establishment shall meet the following requirements: 1) Medication shall be stored in a locked container, cabinet, or area that is inaccessible to residents; 2) Medication shall not be left unattended by an employee; Based on observation, record review, and interview the establishment failed to ensure resident medications are inaccesible to other residents and failed to ensure resident medications are not left unattended by an employee.	A5000		

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A5000	Continued From page 1 Findings include: The establishment's "Medication Administration and Storage" policy and procedure includes documentation that all medications, including over the counter medications, should be kept in a secured area. On 10-09-2024, at approximately 10:00am, R7 was observed in her room sitting in a recliner with the door to R7's room open. Medications in pill form were noted in a cup sitting on R7's counter near a sink; two inhalers were also observed to be sitting near the cup of medication. R7 states that R7 was putting clothes away and got tired and is trying to sleep. On 10-09-2024, medications observed in a cup and inhalers sitting near the cup, were observed sitting out on a counter near a sink in R7's room again at 10:56am, 12:20pm, and 1:50pm. Photographs of the medications were taken with the 10:00am and 1:50pm observations. On 10-09-2024, at approximately 2:40pm, E1, Administrator, and E3, Director of Nursing, were both showed the medications sitting on R7's counter. E1 and E3 were also told by this Surveyor that the medications had been observed sitting in the same spot since about 10:00am on this day. E1 and E3 did not say anything regarding this observation and left the room, leaving the medications on the counter. On 10-09-2024, at approximately 2:50pm, E1 states that they spoke with the staff person, E6 (Personal Care Attendant,) responsible for the medications in R7's room and that the medications were taken care of.	A5000		

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A5000	Continued From page 2 E6's 11-21-2023, "Med Pass Observation" includes documentation that E6 received oversight and training with providing medication supervision. R7's October 2024 Medication Administration Record, contains documentation that R7 refused morning medications on 10-09-2024. The medications including documentation of refusal are as follows: Furosemide 20mg, Pantoprazole 40mg, Topamax 50mg, vitamin B12, vitamin D3, Eliquis 5mg, Vitron-C, and Symbicort inhalation aerosol.	A5000		