STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	ASL510062	A. BUILDING: _____ B. WING _____	C 03/16/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
PEORIA BICKFORD COTTAGE	2000 W WILLOW KNOLLS DR PEORIA, IL 61614

(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 Original investigation of Complaint 2521757 / IL 187389. 295.4010 b) 1) and 295.8000 a) 1) cited.	A 000		
A4010	Section 295.4010 Service Plan This Regulation is not met as evidenced by: Section 295.4010 Service Plan b) The service plan shall be developed by: 1) The resident, resident's representative or any individual requested by the resident; VIOLATION Based on record review and interviews, the establishment failed to involve a resident's representative in changes made to the service plan for one of three sampled residents. (R1) Findings include: R1's service plan and physician's order notes that R1 has a Diagnosis of Major Neurocongnitive Disorder. On 3/18/25 at 2:40 P.M., Z1 (R1's POA of Financial and Son-in-law) stated that E4 (Divisional Director of Clinical Services) mailed them a new service plan at the end of February 2025 that had changes on it that Z1 and Z2 (R1's Daughter and POA of Health Care) had not agreed on. Z1 stated that the changes actually	A4010		

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A4010	Continued From page 1	A4010		

took a couple services away from R1 that they had agreed upon with the last service plan. Z1 stated that it was not even time for an annual service plan to be done, so Z1 is unsure why E4 would have made these changes to the service plan. Z1 stated that the first change was decreasing R1's safety checks from four times a shift down to two times a shift. The second change to the service plan was to start leaving R1's dentures in his room instead of locking them in the medication room for safe keeping, like they had agreed upon for the last service plan. Z1 stated that neither of these changes were ever discussed with Z1 or Z2.

R1's service plan dated 8/8/24 reads, "Dental : Nurse to brush his top plate and put in a soaking cup and lock up in medication room. Family reports (R1) will take them out and throw them away or loose them." R1's new service plan dated 2/17/25 signed only by E4, reads, "Dental : BFM to brush (R1's top plate and put in a soaking cup in (R1's) apartment. The family reports (R1) will take them out and throw them away or lose them."

R1's service plan dated 8/8/24 reads, "Special Care Needs : Safety Checks - 4 times per shift." R1's new service plan dated 2/17/25 now reads, "Special Care Needs : Safety Checks - 2 times per shift."

On 3/16/25 at 11:05 A.M., E2 (Memory Care Director) stated that E4 had made these changes to R1's service plan and she has no idea why these changes were made.

On 3/18/25 at 10:25 A.M., E1 (Administrator) stated that she does not know why E4 made the changes to R1's service plan but they changed

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A4010	Continued From page 2 the service plan back to the original services on the service plan dated 8/8/24. E1 stated that they informed Z1 that the changes were corrected now.	A4010		
A8000	Section 295.8000 Food Service This Regulation is not met as evidenced by: Section 295.8000 Food Service a) If food service is provided by the establishment or by contract with a food service provider, the following requirements shall be met: 1) Food services shall meet the Food Service Sanitation Code (77 Ill. Adm. Code 750) and any applicable local requirements. VIOLATION Based on record review and interviews, the establishment allowed a non-employee to assist with cooking and serving meals to the residents without the required training and certifications. This had the probability to affect all 19 residents. (R1 through R19) Findings include: On 3/16/25 at 9:36 A.M., Z1 (R1's Son-in-law and POA of Financial) stated that on 2/23/25 he witnessed E5 (Happiness Coordinator) cooking the meals for the residents. Z1 stated that Z3 (E5's Son and not an employee) was assisting E5 cooking and serving meals to the residents. Z1 questioned if either E5 or Z3 had the proper	A8000		

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A8000	Continued From page 3 training to be cooking and serving the resident meals. On 3/16/25 at 11:05 A.M., E2 (Memory Care Director) stated that on the weekend of 2/22/25 and 2/23/25, the cook called off work so E5 agreed to cook for the residents. E2 stated that E5 does have the proper training and the Food Handler Training Certificate in order to cook and serve meals. E2 stated that she was unaware that Z3 had also assisted with cooking and serving that weekend until after it was done. E2 confirmed that Z3 is not an employee of the establishment and does not have the proper training to be cooking and or serving meals. On 3/18/25 at 11:27 A.M., E5 stated that her son (Z3) did assist her with cooking and serving meals the weekend in question and that she was unaware that was against state regulations. E5's records confirms E5's has the appropriate training and current Food Handler Training Certificate in order to cook and serve meals. Establishment employee list confirms that Z3 is not employed at the establishment.	A8000		