

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>IL6003339</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>11/14/2024</b>
NAME OF PROVIDER OR SUPPLIER  <b>PEARL PAVILION</b>		STREET ADDRESS, CITY, STATE, ZIP CODE <b>900 SOUTH KIWANIS DRIVE FREEPORT, IL 61032</b>		
(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	Initial Comments  Annual Licensure Survey	S 000		
S9999	Final Observations  Statement of Licensure Violations (1 of 3)  300.650c)  Section 300.650 Personnel Policies  c) Prior to employing any individual in a position that requires a State license, the facility shall contact the Illinois Department of Financial and Professional Regulation to verify that the individual's license is active. A copy of the license shall be placed in the individual's personnel file.  This REQUIREMENT was not met as evidenced by:  Based on interview and record review, the facility failed to contact the Illinois Department of Financial and Professional Regulation (IDFPR) prior to V2 (Director of Nursing) working in the facility. This applies to 1 of 3 nurse employee files reviewed for IDFPR verification.  The findings include:  On 11/13/24 at 3:02PM, V2 stated, "I started here in July 2024 as the full-time director of nursing."  V2's IDFPR registry check performed by the facility was dated 11/12/24.  On 11/13/24 at 3:43PM, V1 (Interim Administrator) stated, "I'm sure we checked the registry for (V2's) license. There's no way we	S9999		

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

TITLE

(X6) DATE

Electronically Signed

11/23/24

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S9999	<p>Continued From page 1</p> <p>didn't check it, but I can't find anything that was dated prior to 11/12/24 for her. She has been here for almost 5 months working as the full-time director of nursing."</p> <p>As of 11/14/24, the facility was unable to provide a policy regarding employee background checks. (C) Statement of Licensure Violations (2 of 3)</p> <p>300.615e) 300.615f)</p> <p>Section 300.615 Determination of Need Screening and Request for Resident Criminal History Record Information</p> <p>e) In addition to the screening required by Section 2-201.5(a) of the Act and this Section, a facility shall, within 24 hours after admission of a resident, request a criminal history background check pursuant to the Uniform Conviction Information Act for all persons 18 or older seeking admission to the facility, unless a background check was initiated by a hospital pursuant to the Hospital Licensing Act. Background checks shall be based on the resident's name, date of birth, and other identifiers as required by the Department of State Police. (Section 2-201.5(b) of the Act)</p> <p>f) The facility shall check for the individual's name on the Illinois Sex Offender Registration website at <a href="http://www.isp.state.il.us">www.isp.state.il.us</a> and the Illinois Department of Corrections sex registrant search page at <a href="http://www.idoc.state.il.us">www.idoc.state.il.us</a> to determine if the individual is listed as a registered sex offender.</p> <p>This REQUIREMENT was not met as evidenced by:</p>	S9999		

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S9999	<p>Continued From page 2</p> <p>Based on record review and interview, the facility failed to submit background checks, check the Illinois Department of Corrections (IDOC) website, and check the Illinois State Police (ISP) website within 24 hours of admission. This applies to 3 of 10 residents (R9, R13, R165) reviewed for criminal backgrounds in the sample of 10.</p> <p>The findings include:</p> <p>R9's electronic face sheet printed on 11/13/24 showed R9 was admitted to the facility on 10/2/24. The background check form was submitted on 11/4/24, 33 days after admission to the facility.</p> <p>R13's electronic face sheet printed on 11/13/24 showed R13 was admitted to the facility on 10/5/24. The background check form was submitted on 10/8/24, 3 days after admission to the facility.</p> <p>R165's electronic face sheet printed on 11/13/24 showed R165 was admitted from home to the facility on 10/24/24. The IDOC and ISP websites were checked on 10/18/24, 6 days prior to admission to the facility.</p> <p>On 11/12/24 at 10:32AM, V19 (admissions liaison/marketer) stated, "I did the check early on (R165) because he was supposed to come in a taxi and the taxi never showed up so he didn't admit the day we thought he would. I thought only the CHIRP had to be done within 24 hours, not the rest of the checks. I'm not sure why (R9) and (R13's) were completed late. I honestly don't recall any special circumstances."</p>	S9999		

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S9999	<p>Continued From page 3</p> <p>As of 11/14/24 the facility was unable to provide a policy regarding resident background checks. (C) Statement of Licensure Violations (3 of 3)</p> <p>300.625c)1)</p> <p>Section 300.625 Identified Offenders</p> <p>c) If the results of a resident's criminal history background check reveal that the resident is an identified offender as defined in Section 1-114.01 of the Act, the facility shall do the following:</p> <p>1) Immediately notify the Department of State Police, in the form and manner required by the Department of State Police, that the resident is an identified offender.</p> <p>This REQUIREMENT was not met as evidenced by:</p> <p>Based on interview and record review, the facility failed to notify IDPH Identified Offender Program Office via Identified Offender Program Management Information System (IOPMIS) Web Portal. This applies to 3 of 10 residents (R13, R60, R165) reviewed for criminal backgrounds in the sample of 10.</p> <p>The findings include:</p> <p>R13's electronic face sheet printed on 11/13/24 showed R13 was admitted to the facility on 10/5/24. R13's background check revealed R13 is an identified offender. As of 11/14/24, the facility had not notified IDPH (Illinois Department of Public Health) Identified Offender Program office that R13 is an identified offender residing in their building.</p>	S9999		

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S9999	<p>Continued From page 4</p> <p>R60's electronic face sheet printed on 11/13/24 showed R60 was admitted to the facility on 10/20/24. R60's background check revealed R60 is an identified offender. On 11/13/24, the facility notified the IDPH Identified Offender Program office that R60 is an identified offender residing in their facility, 24 days after admission.</p> <p>R165's electronic face sheet printed on 11/13/24 showed R165 was admitted to the facility on 10/24/24. R165's background check revealed R165 is an identified offender. On 11/13/24, the facility notified the IDPH Identified Offender Program office that R165 is an identified offender residing in their facility, 20 days after admission.</p> <p>On 11/13/24 at 3:47PM, V1 (Interim Administrator) stated, "I had no idea that there was a timeframe of when we had to report the identified offenders or who we event report to. We are taking care of it now so that we can get the recommendations from the state police."</p> <p>As of 11/14/24 the facility was unable to provide a policy regarding resident background checks. (C)</p>	S9999		