

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 145484	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 09/17/2025
NAME OF PROVIDER OR SUPPLIER Elevate Care Chicago North		STREET ADDRESS, CITY, STATE, ZIP CODE 2451 West Touhy Avenue Chicago, IL 60645	

For information on the nursing home's plan to correct this deficiency, please contact the nursing home or the state survey agency.

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information)
F 0755 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Provide pharmaceutical services to meet the needs of each resident and employ or obtain the services of a licensed pharmacist. (continued on next page)

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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<p>F 0755</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Based on interview and record review, the facility failed to ensure staff documented administration of medications after the medications were administered. This failure affected 1 (R1) resident reviewed for pharmaceutical services in the total sample of 8 residents. Findings include: On 09/15/2025 at 11:49am, R1 stated V3-Licensed Practice Nurse would give his medications late. Occasionally, V3 works the evening shift. R1's admission Record documented R1's diagnoses include but not limited to dementia with mood disturbance, hypertensive heart disease, and adjustment disorder with depressed mood. R1's (06/19/2025) Minimum Data Set documented, Section C. Cognitive Patterns. C0500. BIMS (Brief Interview for Mental Status) Summary Score: 15., indicating R1's mental status as cognitively intact. R1's 07/2025, 08/2025, and 09/2025 Medication Administration Record indicated V3 worked the evening shift on days 7/10, 7/14, 7/20, 7/21, 7/24, 7/31, 8/5, 8/11, 8/17, 9/14. R1's 07/24/2025 Medication Administration Audit Report Day Shift documented R1's Chlorhexidine Gluconate Solution 0.12 % 2x day, Metoprolol Tartrate Tablet 25 MG 2x a day, Gabapentin Capsule 300 MG 2x a day, Senna S Tablet 8.6-50 MG 2x a day were scheduled at 9am, the administration time was at 11:22am, documented time was at 11:22am and documented by V3 (Licensed Practice Nurse). R1's 08/05/2025 Medication Administration Audit Report Day Shift documented R1's Chlorhexidine Gluconate Solution 0.12 % 2x day, Metoprolol Tartrate Tablet 25 MG 2x a day, Gabapentin Capsule 300 MG 2x a day, Senna S Tablet 8.6-50 MG 2x a day were scheduled at 9am, the administration time was at 12:11pm, documented time was at 12:12pm and documented by V3 (Licensed Practice Nurse). R1's 08/11/2025 Medication Administration Audit Report Day Shift documented R1's Chlorhexidine Gluconate Solution 0.12 % 2x day, Metoprolol Tartrate Tablet 25 MG 2x a day, Gabapentin Capsule 300 MG 2x a day, Senna S Tablet 8.6-50 MG 2x a day were scheduled at 9am, the administration time was at 10:35am, documented time was at 10:36am and documented by V3 (Licensed Practice Nurse). R1's 7/10/2025 Medication Administration Audit report Evening shift documented R1's Chlorhexidine Gluconate 2x daily, Gabapentin 300mg 2x daily, Metoprolol Tartrate Tablet 25 MG 2x daily, Senna S Tablet 8.6-50 MG 2x daily, Protonix Tablet Delayed Release 40 MG every 12 hours, Anucort-HC Rectal Suppository 25 MG every 12 hours were scheduled at 6pm; and the administration time and documented time were at 9:51pm and documented by V3 (Licensed Practice Nurse). R1's 07/14/2025 Medication Administration Audit Evening shift documented R1's Chlorhexidine Gluconate 2x daily, Gabapentin 300mg 2x daily, Metoprolol Tartrate Tablet 25 MG 2x daily, Senna S Tablet 8.6-50 MG 2x daily, Protonix Tablet Delayed Release 40 MG every 12 hours were scheduled at 6pm; and the administration time was at 10:04pm, documented time was at 10:06pm and documented by V3 (Licensed Practice Nurse). R1's 07/20/2025 Medication Administration Audit report Evening shift documented R1's Chlorhexidine Gluconate 2x daily, Gabapentin 300mg 2x daily, Metoprolol Tartrate Tablet 25 MG 2x daily, Senna S Tablet 8.6-50 MG 2x daily, Protonix Tablet Delayed Release 40 MG every 12 hours were scheduled at 6pm; and the administration time was at 9:01pm, documented time was at 21:03pm and documented by V3 (Licensed Practice Nurse). R1's 08/11/2025 Medication Administration Audit report Evening shift documented that R1's Chlorhexidine Gluconate 2x daily, Gabapentin 300mg 2x daily, Metoprolol Tartrate Tablet 25 MG 2x daily, Senna S Tablet 8.6-50 MG 2x daily, Protonix Tablet Delayed Release 40 MG every 12 hours, Anucort-HC Rectal Suppository 25 MG every 12 hours were scheduled at 6pm; and the administration time was at 9:57pm, documented time was at 9:57pm and documented by V3 (Licensed Practice Nurse). On 09/17/2025 at 12:09pm, V3 (Licensed Practice Nurse) stated some residents have scheduled 6pm medications and 9pm medications during the evening shift. If the schedule is at 6pm, she administers the medication between 5pm and 7pm; and if the schedule is at 9pm, she administers the medication between 8pm and 10pm. V3 stated she is supposed to sign the eMAR (electronic Medication Administration Record) right after she gave the medications to acknowledge or document she gave the medications; she is not supposed to wait in documenting medication administration. V3 stated it is possible she opened the eMAR at 6pm, gave the medications to him (R1), and signed or acknowledged she gave the medications later during the 9pm medication pass. V3 stated she is expected to sign the eMAR right after the medications were administered. On 09/17/2025 at 12:21pm, V2 stated nurses are expected to sign or acknowledge the medications are administered right after the nurse gave the medications. Nurses are not expected to wait 3 hours or so to document they administered the medications. The purpose is to make sure the medications are administered timely. The 10/25/2024 Administration Procedures for All Medications documented Policy To administer</p>		