STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	145626	A. Building B. Wing	03/25/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Generations Oakton Pavillion	1660 Oakton Place Des Plaines, IL 60018

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 0695 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Provide safe and appropriate respiratory care for a resident when needed. **NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on observation, interview, and record review, the facility failed to follow its Respiratory Care Equipment and Supplies policy by failing to change ventilator circuits and filters. This applies to 1 of 3 residents (R1) reviewed for ventilator (Vent)/Tracheostomy (trach) care in a sample of 3.The findings include:R1 is a [AGE] year-old male admitted on [DATE] with cognition intact as per the Minimum Data Set (MDS) dated [DATE].A review of the face sheet documented that R1 was admitted with an admitting diagnosis, including tracheostomy, ventilator dependence, and neuromuscular dysfunction of the bladder.On 3/24/26 at 10:50 AM, R1 was observed in his bed with his spouse, with a Vent/Trach setup and cough assistance. R1 was observed with a dirty-looking ventilator circuit (blue tube from ventilator to tracheostomy) and a filter dated 2/20.On 3/24/26 at 10:50 AM, R1 and his spouse (V4) stated, The facility is not changing the vent circuit every month, which can cause infection. I have a different type of ventilator with cough assistance. Last time my vent circuit was changed on February 20th, as the label indicates, and it has been over a month.On 3/24/26 at 11:35, V5 (Respiratory Therapist) stated, We have his vent circuit and filters to change. I agree that those vent circuits and filters should be changed every 30 days. I was waiting for the first of next month.On 3/24/26 at 1:10 PM, V2 (Director of Nursing/DON) stated that the vent circuit and filter should be changed as per our policy to avoid respiratory infections.A review of the disposable supply change schedule on the facility's Respiratory Care Equipment and Supplies policy document: ventilator circuit and air intake filters need to be cleaned and replaced every 30 days.

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