

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  145670	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  04/17/2026
NAME OF PROVIDER OR SUPPLIER  Chalet Living & Rehab		STREET ADDRESS, CITY, STATE, ZIP CODE  7350 North Sheridan Road Chicago, IL 60626	
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)		
<p>F 0690</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Provide appropriate care for residents who are continent or incontinent of bowel/bladder, appropriate catheter care, and appropriate care to prevent urinary tract infections.</p> <p>Based on interview and record review, the facility failed to follow residents' physician order to ensure foley catheters are cleaned every shift in order to prevent infection for 2 (R13, R14) out of 3 residents reviewed for urinary catheter care in a sample of 15. Findings include: On 04/14/2026 at 1:05 PM, R13 was observed in his room. R13 stated he doesn't think any foley catheter care was done for him today. On 04/14/2026 at 1:07 PM, R14 was observed in his room. R14 stated that the staff did not do any foley catheter care on him today. On 04/14/2026 at 1:30 PM, V7 (Registered Nurse/RN) stated that nurses are the ones who do catheter care for urostomies and indwelling foley catheters. V7 stated that the urostomy care is done once a day and done by the night shift nurse. V7 stated that she is the nurse for R14. V7 stated that she didn't do R14's catheter care because night shift is the one who takes care of it. V7 stated that wound care nurses also take care of R14's foley catheter care. On 04/14/2026 at 1:45 PM, V14 (2nd floor RN supervisor) stated that he is R13's nurse for today. V14 stated that he doesn't do R13's catheter care because the night shift nurse does foley care. V14 stated that he didn't do R13's foley catheter care. V14 stated that all he is expected to do is record the output. On 04/14/2026 at 1:50 PM, V6 (Wound Nurse) stated that R14 does have a foley. V6 stated that she doesn't do the foley catheter care for residents during wound care. V6 stated that foley catheter care is to be completed by the nurse in charge of that resident. V6 stated that she didn't do R14's foley catheter care today. On 04/15/2026 at 11:20 AM, V6 (Wound Nurse) stated that foley catheter care is defined by cleaning around the insertion site, making sure the foley bag is clean, not on the floor and making sure there is no obstruction. V6 stated that Certified Nursing Assistants (CNA) only does measurement and output. Nurses in charge of the resident, do the cleaning and checks for irrigation. V6 stated that she did not clean R13 and R14's foley catheter care yesterday or today. On 04/15/2026 at 12:31 PM, V18 (Director of Nursing/DON) stated that foley catheter care consists of making sure the area of insertion of the indwelling catheter is clean with no discharge. That is why it is important to clean it regularly. If it is not cleaned regularly, the resident is prone to infection. V18 stated that R13 has an indwelling catheter. V18 stated that R13 is on antibiotics because he had an infection resulting in abscess on his penis near the insertion site. V18 stated that he is not sure how R13 had an infection on his penis. V18 stated that not performing foley catheter care can have the potential to increase the risk of infection. V18 stated that he is not sure if R14 and R13 had their foley catheter care done. Surveyor showed V6 (Wound Nurse) R13 and R14's treatment administration record. V6 stated that it is her initials documented for foley catheter care for 04/14/2026 and 04/16/2026. Surveyor then asked her, why she charted R13 and R14's treatment administration record under foley catheter care when she said she didn't perform foley catheter care. V6 responded, Oh I'm sorry, I was mistaken. I thought you meant changing the catheter. R13's physician order sheet documents in part: Catheter care every shift. R14's physician order sheet documents in part: Catheter care every shift. R13's treatment administration record for 04/2026 documents in part: On 04/14/2026 and 04/15/2026, it shows V6's initials as completed order. R14's treatment administration record for 04/2026 documents in part: On 04/14/2026 and 04/15/2026, it shows V6's initials as completed order. R13's progress note by nurse on duty on 3/23/2026 (continued on next page)</p>		

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
---	-------	-----------

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  145670	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  04/17/2026
NAME OF PROVIDER OR SUPPLIER  Chalet Living & Rehab		STREET ADDRESS, CITY, STATE, ZIP CODE  7350 North Sheridan Road Chicago, IL 60626	
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)		
<p>F 0690</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>documents in part: R13 observed with purulent discharge from penis. Doctor assessed the patient at the bedside. New orders received for CBC, BMP, Urology consult, and initiation of antibiotics for 14 days. Writer carried out the order and notified R13's power of attorney.R13's progress note by V6 on 3/25/2026 documents in part: R13 was seen by wound nurse practitioner for wound assessment and evaluation. R13 has an ongoing surgical wound to left groin area, site is stable. R13 was also seen for an Abscess to penis area. Site has moderate purulent exudate, full thickness, A reopened stage 3 pressure injury to coccyx. Order given to apply Mupirocin ointment to penis abscess daily and Hydrocolloid to area 3 times a week. R13 on Doxycycline Hyclate tablet 100mg, twice a day for 14 days for abscess infection. All orders verified and carried out as ordered. Will continue to treat his wounds as needed.R13's progress note by nurse practitioner on 3/25/2026 documents in part: Location: PenisPrimary Etiology: Abscess. Stage/Severity: Partial Thickness. Wound Status: New. Odor Post Cleansing: Malodorous. Size: 1.7 cm x 0.4 cm x 0.1 cm. Calculated area is 0.68 sq cm. Wound Base: 100% epithelial , 0% slough. Exposed Tissues: Epithelium. Wound Edges: Attached. Peri-wound: Intact, Fragile. Exudate: Moderate amount of SeropurulentRequested foley catheter care procedure/policy. V18 (DON) stated that they do not have a policy regarding specifically catheter care.</p>		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  145670	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  04/17/2026
NAME OF PROVIDER OR SUPPLIER  Chalet Living & Rehab		STREET ADDRESS, CITY, STATE, ZIP CODE  7350 North Sheridan Road Chicago, IL 60626	
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)		
<p>F 0842</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Safeguard resident-identifiable information and/or maintain medical records on each resident that are in accordance with accepted professional standards.</p> <p>Based on review of record and interview, the facility failed to accurately document on residents' treatment administration record tasks that were not done for 2 (R13, R14) out of 14 residents reviewed for resident records. Findings include: On 04/14/2026 at 1:05 PM, R13 was observed in his room. R13 stated he doesn't think any foley catheter care was done for him today. On 04/14/2026 at 1:07 PM, R14 was observed in his room. R14 stated that the staff did not do any foley catheter care on him today. On 04/14/2026 at 1:30 PM, V7 (Registered Nurse/RN) stated that nurses are the ones who do catheter care for urostomies and indwelling foley catheters. V7 stated that the urostomy care is one once a day and done by the night shift nurse. V7 stated that she is the nurse for R14. V7 stated that she didn't do R14's catheter care because night shift is the one who takes care of it. V7 stated that wound care nurses also take care of R14's foley catheter care. On 04/14/2026 at 1:45 PM, V14 (2nd floor RN supervisor) stated that he is R13's nurse for today. V14 stated that he doesn't do R13's catheter care because the night shift nurse does foley care. V14 stated that he didn't do R13's foley catheter care. V14 stated that all he is expected to do is record the output. On 04/14/2026 at 1:50 PM, V6 (Wound Nurse) stated that R14 does have a foley. V6 stated that she doesn't do the foley catheter care for residents during wound care. V6 stated that foley catheter care is to be completed by the nurse in charge of that resident. V6 stated that she didn't do R14's foley catheter care today. On 04/14/2026 at 2:17 PM, V18 (Director of Nursing/DON) stated his expectations of his nurses is to follow through on the doctors' orders for any medication and treatment orders and documented accordingly. On 04/15/2026 at 11:20 AM, V6 (Wound Nurse) stated that foley catheter care is defined by cleaning around the insertion site, making sure the Foley bag is clean, not on the floor and making sure there is no obstruction. V6 stated that Certified Nursing Assistants (CNA) only does measurement and output. Nurses in charge of the resident, do the cleaning and checks for irrigation. V6 stated that she did not do foley catheter care for R13 and R14 yesterday or today. Surveyor showed V6 (Wound Nurse) R13 and R14's treatment administration record for the month of April 2026. V6 stated that it is her initials documented for foley catheter care for 04/14/2026 and 04/16/2026. Surveyor then asked her, why she charted R13 and R14's treatment administration record under foley catheter care when she said she didn't perform foley catheter care. V6 responded, Oh I'm sorry, I was mistaken. I thought you meant changing the catheter. Reviewed R13 Minimum Data Sheet Section C. R13 has a Brief Interview of Mental Status (BIMS) of 11. R13 is moderately cognitively intact. Reviewed R14 Minimum Data Sheet Section C. R14 has a Brief Interview of Mental Status (BIMS) of 15. R14 is cognitively intact. R13's physician order sheet documents in part: Catheter care every shift. R14's physician order sheet documents in part: Catheter care every shift. R13's treatment administration record for 04/2026 documents in part: On 04/14/2026 and 04/15/2026, it shows V6's initials as completed order. R14's treatment administration record for 04/2026 documents in part: On 04/14/2026 and 04/15/2026, it shows V6's initials as completed order. CMS Medicaid Documentation for Medical Professionals policy (12/2015) documents in part: Medical professionals are in the business of helping their patients. Patients are their priority, whether the professional is a physician, pharmacist, nurse, therapist, or any of the many other types of medical professionals. Meeting ongoing patient needs such as furnishing and coordinating necessary medical services is impossible without documenting each patient encounter completely, accurately, and in a timely manner. Documentation is often the communication tool used by and between medical professionals. Records not properly documented with all relevant and important facts can prevent the next provider from furnishing sufficient services. The outcome can result in erratic or even dangerous treatment and cause unintended complications. While meeting patient needs is the most important reason for documenting services, it is not the only one. Another reason for documenting medical services includes complying with Federal and State laws.</p>		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  145670	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  04/17/2026
NAME OF PROVIDER OR SUPPLIER  Chalet Living & Rehab		STREET ADDRESS, CITY, STATE, ZIP CODE  7350 North Sheridan Road Chicago, IL 60626	

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)
<p>F 0880</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Provide and implement an infection prevention and control program.</p> <p>Based on observation and interview, the facility failed to ensure resident's urostomy bag was off the floor for 1 (R7) out of 3 residents reviewed for infection control in a sample of 15. Findings include: On 04/14/2026 at 11:30 AM, surveyor observed R7 in R7's room. R7 was awake and alert. R7 stated that she thinks her bag is on the floor. R7 stated that she doesn't know how it got there. R7's bag was observed on the floor. Surveyor asked V7 (Registered Nurse) to come into R7's room. V7 observed R7's bag on the floor. V7 stated that R7's bag should not be on the floor because it can cause infections. On 04/14/2026 at 2:17 PM, V18 (Director of Nursing) stated that he is the infection preventionist as well. V18 stated that the foley bag should not be on the ground but instead hanging on the bed. V18 stated that the bag should be hanging to prevent infection. V18 stated that the bag on the ground can lead to infection. Reviewed R7 Minimum Data Sheet Section C. R7 has a Brief Interview of Mental Status (BIMS) of 12. R7 is cognitively intact. Center for Disease Control catheter policy documents in part: Keep the urine bag off the floor. Requested foley catheter care procedure/policy. V18 stated that they do not have a policy regarding specifically catheter care.</p>