

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 145679	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 11/07/2024
NAME OF PROVIDER OR SUPPLIER Carlton at the Lake, The		STREET ADDRESS, CITY, STATE, ZIP CODE 725 West Montrose Avenue Chicago, IL 60613	
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 0684</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Provide appropriate treatment and care according to orders, resident's preferences and goals.</p> <p>45346</p> <p>Based on interview and record review the facility failed to follow a physician's order for a resident (R1) in a timely manner. This failure affected one resident (R1) out of three residents reviewed for improper nursing care and resulted in R1 not receiving the medication from 10/22/24 to 10/31/24.</p> <p>Findings include:</p> <p>R1's Admission Record documents diagnoses including but not limited to Vitamin D deficiency, unspecified, unsteadiness on feet, unspecified protein-calorie malnutrition, slowness and poor responsiveness, rhabdomyolysis, other specified metabolic disorders, other lack of coordination, other abnormalities of gait and mobility, metabolic encephalopathy, iron deficiency anemia, unspecified, hyperosmolality and hypernatremia, hyperkalemia, homelessness unspecified, fatty (change of) liver, not elsewhere classified, delusional disorders, constipation, unspecified, cognitive communication deficit, altered mental status, unspecified, alcohol induced acute pancreatitis without necrosis or infection, and alcohol use, unspecified with other alcohol-induced disorder.</p> <p>R1's Brief Interview for Mental Status (BIMS) dated 10/14/2024 documents R1 has a BIMS score of 03, which indicates R1's cognition is severely impaired.</p> <p>On 11/06/2024, V1(Administrator) presented R1's Clinic Record dated 10/22/2024, which was reviewed. The clinic record documents in part, please re-start Lantus 12 units every 24 hours. R1's fasting sugars are still high so he will need insulin.</p> <p>On 11/06/2024, V1(Administrator) presented R1's order entry, with an order date of 11/1/2024 by V9 (Nurse Practitioner) which documents in part, Lantus Subcutaneous Solution 100 unit/ml-Inject 12 unit subcutaneously at bedtime.</p> <p>On 11/06/2024 reviewed R1's POS (Physician Order Statement) dated 11/06/2024, which documents in part, Lantus Subcutaneous Solution 100 unit/ml-Inject 12 unit subcutaneously at bedtime for dm (diabetes mellitus). Start Date: 11/1/2024 21:00.</p> <p>(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
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<p>F 0684</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>On 11/06/2024 at 3:06pm, V3 (ADON/Assistant Director of Nursing) stated the nurse who receives the resident from the hospital, or a clinic appointment is responsible for reviewing the paperwork for any new medication orders the resident may have gotten from the hospital or clinic appointment. V3 stated the nurse who receives the resident from the hospital, or a clinic visit should check for any new medication orders before the nurse's shift ends; the nurse should contact the resident's physician or NP (Nurse Practitioner) to verify if the Physician or NP wants to continue or discontinue the resident's medication order received from the hospital or clinic visit. V3 stated eight to nine days after a resident receives an order from the hospital or clinic visit is not an acceptable time frame for a nurse to contact the resident's physician to verify medication orders received from the resident's hospital or clinic visit. V3 stated the nurse practitioner reviewed R1's 10/22/2024 clinic records on 11/01/2024 and entered the order for R1's insulin.</p> <p>Reviewed the facility's policy titled Physician Orders with a revised date of 8/16/24, which documents in part, 6. Physician orders will be carried out at a reasonable time.</p>		

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<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>45346</p> <p>Based on observation, interview, and record review the facility failed to appropriately document in the eMAR (Electronic Medication Record). This failure affected one resident (R3) of three residents reviewed for improper nursing care.</p> <p>Findings include:</p> <p>R3's Admission Record documents diagnoses including but not limited to heart failure, unspecified, type 2 diabetes mellitus with hyperglycemia, gastro-esophageal reflux disease without esophagitis, psychotic disorder with delusions due to known physiological condition, essential (primary) hypertension, anemia, unspecified, schizoaffective disorder, bipolar type, chronic obstructive pulmonary disease, unspecified, and pure hyperglyceridemia.</p> <p>R3's Brief Interview for Mental Status (BIMS) dated 9/27/2024 documents R3 has a BIMS score of 06, which indicates R3's cognition is severely impaired.</p> <p>On 11/06/2024, V1 (Administrator) presented R3's MAR (Medication Administration Record) and POS (Physician Order Statement) which were reviewed. There was a missing entry for Nurses' signature on the MAR for October 2024 as follows:</p> <p>October 7th at 0900-Trulicity Subcutaneous Solution Pen-injector 0.75 mg(milligrams)/0.5ml(milliliters)-Inject 0.75 mg subcutaneously one time a day every Monday.</p> <p>R3's POS (Physician Order Summary) dated 11/06/2024 documents in part, Trulicity Subcutaneous Solution Pen-Injector 0.75mg/0.5ml-Inject 0.75 mg subcutaneously one time a day every Monday for DM2 (Diabetes Mellitus 2).</p> <p>On 11/06/2024 at 12:33pm, V3 (ADON/Assistant Director of Nursing) was interviewed and stated the assigned nurse on the unit is responsible for administering the medications to the residents on that unit. V3 stated in my professional opinion, when there are missing nurse's initials on a resident's medication administration record for a scheduled medication that is to be administered to the resident on a specific date and time this would indicate the resident did not receive the medication. V3 stated there are codes the nurse can use on the medication administration record indicating why a scheduled medication was not administered to the resident. V3 stated it is my expectation that the nurses would use the codes and not leave the medication administration record blank for a resident's scheduled medication that is to be administered to the resident on a specific date and time.</p> <p>On 11/06/2024 reviewed the facility's policy titled Medication Pass with a revised date of 8/16/24, which documents in part, 7e. After medication is administered to each resident, sign MAR (medication administration record) that it was given.</p> <p>(continued on next page)</p>		

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<p>F 0842</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>On 11/06/2024 reviewed the facility's RN (Registered Nurse) Floor Nurse and LPN (Licensed Practical Nurse) Floor Nurse job descriptions which documents in part, 16. Completes medical records documenting care provided and other information in accordance with nursing policies while maintaining strict confidentiality.</p>		