

Department of Health & Human Services
Centers for Medicare & Medicaid Services

Printed: 06/25/2026
Form Approved OMB
No. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 145714	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 04/18/2026
NAME OF PROVIDER OR SUPPLIER Oak Park Oasis		STREET ADDRESS, CITY, STATE, ZIP CODE 625 North Harlem Oak Park, IL 60302	
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 - Some	Provide pharmaceutical services to meet the needs of each resident and employ or obtain the services of a licensed pharmacist. Based on observation, interview, and record review, the facility failed to administer medications within the expected timeframe. This failure affected five (R3, R5, R6, R8 and R9) residents reviewed for medication administration in the total sample of 9 residents. Findings include: On 04/17/2026 at 11:30am, V5 (Registered Nurse) stated she was getting ready to pass (R3) 9:00am medications. Informed V5 this surveyor was going to observe V5 with medication administration. On 04/17/2026 at 11:40am after passing R3's medications, V5 checked cloud-based electronic health record platform per this surveyor's request and stated she still had to pass medications to four (R5, R6, R8, and R9) residents scheduled at 9:00am. V5 stated the expectation is to pass medications one hour before and one hour after the scheduled time. On 04/17/2026 at 4:11pm, V2 (Director of Nursing) stated staff are expected to follow the rights of medication administration which include right dose, medication, person, time, and route. V2 stated the right time is one hour before and one hour after the scheduled time. V2 stated if medication is scheduled to be given two, three, or four times daily, and there is a schedule to give at 9am, then the medication should be given between 8a and 10am, so the next dose is not too close from the 9am dose. V2 stated the medication is ordered to be given on scheduled time for it to work properly so the resident will benefit from the therapeutic effect of the medication. R3'S (Active Order as Of: 04/17/2026) Order Summary Report documented, in part Diagnoses: (include but not limited to) Type 2 Diabetes Mellitus with diabetic neuropathy, chronic idiopathic constipation, and embolism and thrombosis of deep veins. buPROPION HCl ER (SR) Oral Tablet Extended Release 12 Hour 150 MG (Bupropion HCl) Give 1 tablet by mouth two times a day, Coreg Oral Tablet 12.5 MG (Carvedilol) Give 1 tablet by mouth two times a day, Gabapentin Capsule 100 MG Give 2 capsule by mouth two times a day, Polyethylene Glycol Powder (Polyethylene Glycol 1450) Give 17 gram by mouth two times a day, prednisolONE Acetate Ophthalmic Suspension 1 % (Prednisolone Acetate (Ophth)) Instill 1 drop in left eye two times a day. R3'S (04/17/2026) Medication Administration Audit Report documented, in part Polyethylene glycol powder 17gram by mouth two time a day for constipation dissolve in 8oz water, gabapentin 100mg 2 capsule by mouth two times a day, prednisolone ophthalmic suspension 1 drop to left eye two times a day, lactulose 15ml by mouth two times a day, bupropion 150mg by mouth two times a day, Coreg 12.5mg by mouth two times a day. Schedule Date: 04/17/2026 9:00am. Administration Time: 04/17/2026 at 11:30am - 11:43am. Documented by: V5. R3's (03/03/2026) Minimum Data Set documented, in part Section C. Cognitive Patterns. C0500. BIMS (Brief Interview for Mental Status) Summary Score: 12. Indicating R3's mental status as moderately impaired. R3's (Effective Time Range: 04/16/2026 - 04/18/2026) Progress notes was reviewed with no notes to may give medications late. R5's (Active Order as Of: 04/17/2026) Order Summary Report documented, in part Diagnoses: (include but not limited to) hypertension, disorder of skin and subcutaneous tissue, pruritus, and Type 2 Diabetes Mellitus with polyneuropathy. metFORMIN HCl Oral Tablet 500 MG (Metformin HCl) Give 500 mg by mouth two times a day for Diabetes, Triamcinolone Acetonide External Cream 0.1 % (Triamcinolone Acetonide (Topical)) Apply to Itchy skin areas topically two times a day for skin inflammation, Gabapentin Oral Capsule (Gabapentin) Give 100 mg by mouth two times a day for Pain. R5's (04/17/2026) Medication (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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F 0755 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Some	Administration Audit Report documented, in part metformin 500mg two times a day, triamcinolone cream apply topically two times a day, Gabapentin 100mg two times a day. Scheduled time: 04/17/2026 9:00am. Administration time: 11:55am - 11:56am. Documented by: V5. R5's (02/02/2026) Minimum Data Set documented, in part Section C. Cognitive Patterns. C0500. BIMS (Brief Interview for Mental Status) Summary Score: 15. Indicating R5's mental status as cognitively intact.R5's (Effective Time Range: 04/16/2026 - 04/18/2026) Progress notes was reviewed with no notes to may give medications late.R6's (Active Order as Of: 04/17/2026) Order Summary Report documented, in part Diagnoses: (include but not limited to) hypertension, COPD (Chronic Obstructive Pulmonary Disease), and Type 2 Diabetes Mellitus. Fluticasone Propionate Nasal Suspension 50 MCG/ACT (Fluticasone Propionate (Nasal)) 1 spray in both nostrils two times a day for nasal allergies. Carvedilol Oral Tablet 12.5 MG (Carvedilol) Give 1tablet by mouth two times a day for Heart Failure. R6's (04/17/2026) Medication Administration Audit Report documented, in part carvedilol 12.5mg give one tablet by mouth two times a day, fluticasone nasal spray 1 spray in both nostrils two times a day. Schedule date: 04/17/2026 9:00am. Administration Time: 12:03pm - 12: 05pm. Documented by: V5. R6's (03/02/2026) Minimum Data Set documented, in part Section C. Cognitive Patterns. C0500. BIMS (Brief Interview for Mental Status) Summary Score: 15. Indicating R6's mental status as cognitively intact.R6's (Effective Time Range: 04/16/2026 - 04/18/2026) Progress notes was reviewed with no notes to may give medications late.R8's (Active Order as Of: 04/17/2026) Order Summary Report documented, in part Diagnoses: (include but not limited to): constipation, epistaxis, and hypertension. Artificial Tears Ophthalmic Solution 1 % (Carboxymethylcellulose Sodium (Ophth) instill 1 drop in both eyes three times a day, Ocean Nasal Spray Nasal Solution 0.65 % (Saline) 1 spray in both nostrils three times a day, Senna S Tablet 8.6-50 MG (Sennosides-Docusate Sodium) Give 1 tablet by mouth two times a day. R8's (04/17/2026) Medication Administration Audit Report documented, in part Artificial Tears Instill 1 drop in both eyes three times a day for Dry Eyes, Ocean Nasal Spray three times a day, Senna S Tablet 8.6/50mg 1 tablet two times a day. Schedule Date: 04/17/2026. Administration Time: 04/17/2026 12:19(pm) -12:23(pm). Documented by: V5 (Registered Nurse)R8's (01/19/2026) Minimum Data Set documented, in part Section C. Cognitive Patterns. C0500. BIMS (Brief Interview for Mental Status) Summary Score: 15. Indicating R8's mental status as cognitively intact. R8's (Effective Time Range: 04/16/2026 - 04/18/2026) Progress notes was reviewed with no notes to may give medications late.R9's (Active Order as Of: 04/17/2026) Order Summary Report documented, in part Diagnoses: (include but not limited to) shortness of breath, COPD (Chronic Obstructive Pulmonary Disease), and heart failure. Budesonide Inhalation Suspension 0.5 MG/2ML (Budesonide (Inhalation)) 2 milliliter inhale orally two times a day related to CHRONIC OBSTRUCTIVE PULMONARY DISEASE. Active 12/05/2025. Furosemide Oral Tablet 20 MG (Furosemide) Give 20 mg by mouth two times a day related to ACUTE RESPIRATORY DISTRESS SYNDROME. Active: 12/04/2025. R9's (04/17/2026) Medication Administration Audit Report documented, in part Budesonide Inhalation suspension 2ml inhale orally two times a day, furosemide 20mg two times a day: Schedule date: 04/17/2026 9:00am. Administration time: 04/17/2026 12:09pm - 12:13pm. Documented by: V5. R9's (01/07/2026) Minimum Data Set documented, in part Section C. Cognitive Patterns. C0500. BIMS (Brief Interview for Mental Status) Summary Score: 03. Indicating R9's mental status as severely impaired.R9's (Effective Time Range: 04/16/2026 - 04/18/2026) Progress notes were reviewed with no notes to may give medications late.The (04/18/2026) email correspondence with V1 (Administrator) documented, in part The expectations of administration of medication in accordance with frequency prescribed by physician, ie., within 60 minutes before or after prescribed dose time. The (undated) RN/LPN Job Description documented, in part Job Summary: The primary purpose of your job position is to provide direct nursing care to the residents and to supervise the day to day nursing activities performed by the nursing assistants. Essential Duties and Responsibilities: Prepare and administer medications and treatments as ordered by Physician.The (undated) Medication Administration Policy documented, in part II. ADMINISTRATION OF MEDICATIONS. (continued on next page)		

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F 0755 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Some	Medications must be administered in accordance with a physician's order at his/her discretion, e.g., the right resident, right medication, right dosage, right route, and right time. The (undated) Physician Orders documented, in part These guidelines are to ensure that: Any orders given by Physician are carried out. NURSE RESPONSIBILITIES. Orders are to be transcribed into the electronic charting system. Medication and/or treatment orders are to be scheduled to MAR/TAR as appropriate. NURSING DOCUMENTATION. Any calls to or from physician will be documented in the nurse's notes indicating information conveyed and received.		