STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	145796	A. Building B. Wing	06/28/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Balmoral Home	2055 West Balmoral Avenue Chicago, IL 60625

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 0684 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Provide appropriate treatment and care according to orders, resident?s preferences and goals. Based on observation, interview and record review, the facility failed to ensure physician's orders were followed for one resident (R1). This failures affected one of three residents reviewed for medication administration. Findings include: R1's Brief Interview for Mental Status (BIMS) dated 6/12/26 does not show a score of however during this interview R1 was able to answer surveyor's questions. R1 has a diagnosis which includes but not limited to chronic obstructive pulmonary disease, low back pain, essential hypertension, anxiety disorder, bipolar, primary insomnia, epilepsy, and hypoparathyroidism. R1's Physician Order Sheet (POS) dated 6/19/26 documents, in part: Nicotine Polacrilex Mouth/Throat gum 4 mg (Nicotine Polacrilex) give 1 gum by mouth every 2 hours as needed for smoking cessation. On 6/26/26 at 11:48 am, V7 (Licensed Practical Nurse, LPN) stated that R1 has orders to receive nicotine gum 1 piece of gum every 2 hours. V7 then explained that when she is assigned as R1's nurse, she will give 4 pieces of nicotine gum at time because R1 will constantly come to V7 every hour asking for nicotine gum. V7 then explained that on 6/26/26 at 8:00 am she gave R1 four pieces of nicotine gum so that R1 would not return to V7 for the rest of V7's shift requesting the nicotine gum. V7 further explained that she instructed R1 to take one piece of gum at 8:00 am, 10:00am and 12:00pm and 2:00pm. V7 explained that nurses should follow physician's orders so that the residents will not get harmed. V7 also explained that if R1 had four pieces of gum at one time R1 has the potential to take all four pieces and harm herself. On 6/26/26 at 11:57 am, R1 stated that V7 gave her four pieces of gum in the morning around 8:00 am. Surveyor observed R1 at 11:57 am with two pieces of Nicotine gum in R1's possession. R1 stated, I chew gum all day. R1 stated that she is supposed to get one piece of gum every 2 hours and that the nurses give R1 multiple pieces of gum at times. On 6/26/26 at 2:55 pm, V2 (Director of Nursing, DON) stated that V7 reported to V2 that she gave R1 four pieces of nicotine gum at once so that R1 already has her nicotine gum when she needs another one. V7 stated that R1 has orders for 1 one piece of gum ever two hours and that V7 should not have administered 4 pieces of nicotine gum to R1. V7 explained that the resident may not be aware of when the next piece of nicotine gum is due. V7 stated that nurses should be following physician's orders to prevent any adverse reactions to the resident. V7 stated that if a nurse does not follow a physician order the resident can have side effects from the medications. V2 also denied R1 ever reporting concerns that she had a cold, and the nurse did not believe R1. The facility undated document titled Charge Nurse documents, in part: Primary purpose of your job position is to provide direct nursing care to the residents, and to supervise the day-to-day nursing activities. Alarmed by nursing assistants. Such supervision must be in accordance with current federal, state, and local standards, guidelines, and regulations that govern our facility, and as may be required by the director of nursing services or nurse supervisor to ensure the highest degree of quality is maintained at all times . Drug Administration functions: prepare and administer medications as ordered by the physician.The facility's policy dated 9/2/25 and titled Administering Medications documents, in part: Policy Heading: Medications are administered in a safe and timely manner, and as prescribed. Policy Interpretation and Implementations: 2. Medications are administered in accordance with prescriber orders, including any required time frame . 21. Residents may self-administer their own medications only if the attending physician, in conjunction with the interdisciplinary care planning team, has (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

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
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F 0684 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	determined that they have the decision-making capacity to do so safely. 22. If a resident uses PRN (as needed) medications frequently, the attending physician and interdisciplinary care team, with support from the consultant pharmacist as needed, shall reevaluate the situation, examine the individual as needed, determine if there is a clinical reason for the frequent PRN use, and consider whether a standing dose of medication is clinically indicated.