

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  145844	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  05/29/2025
NAME OF PROVIDER OR SUPPLIER  Pearl of Montclare, The		STREET ADDRESS, CITY, STATE, ZIP CODE 2833 North Nordica Avenue Chicago, IL 60634	

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 0759</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Ensure medication error rates are not 5 percent or greater.</p> <p>43351</p> <p>Based on observations, interviews, and record reviews, the facility failed to ensure a medication administration error rate of &lt;5% for 2 (R2 and R5) residents of 4 (R2, R4, R5, and R6) residents reviewed for medication administration. There were 33 opportunities with 3 errors resulting in 9.09% medication administration error rate.</p> <p>Findings include:</p> <p>On 05/27/2025 at 11:15am, V5 (Licensed Practice Nurse) dispensed R2's medications including:</p> <p>Senna 8.6 mg/tab x 2 tablets - this is an error. R2's (Active Order as Of: 05/27/2025) Order Summary Report documented, in part Senna S Oral tablet 8.6-50mg (Sennosides-Docusate sodium) give 2 tablets by mouth two times a day.</p> <p>Folic Acid 800mcg x 1 tab - this is an error. R2's (Active Order as Of: 05/27/2025) Order Summary Report documented, in part Folic Acid Oral tablet 1 MG (1000mcg) 1 tablet by mouth one time a day.</p> <p>On 05/27/2025 at 2:52pm with V2 (Director Of Nursing), this surveyor requested V5 to show V2 the Over the Counter containers of Senna and Folic Acid that were administered to R2. V5 showed the containers to the surveyor and to V2. Inquiring if the orders and what were administered to R2 were the same, V2 stated these are not the same medications. V5 stated I have been giving him these medications.</p> <p>R2's (Active Order as Of: 05/27/2025) Order Summary Report documented, in part Diagnoses: (include but not limited to) swelling, mass and lump lower limb bilateral, non-pressure chronic ulcer of part of left and right lower leg.</p> <p>R2's (05/07/2025) Minimum Data Set documented, in part Section C. Cognitive Patterns. C0500. BIMS (Brief Interview for Mental Status) Summary Score: 09. Indicating R2's mental status as moderately impaired.</p> <p>On 05/28/2025 at 9:25am, V11 (Registered Nurse) dispensed R5 medications including:</p> <p>Calcium Carbonate 500mg x 1 tab (brand name: Alkums) - this is an error. R5's (Active Order as Of: 05/28/2025) Order Summary Report documented, in part Calcium Carbonate-Vitamin D tablet 500-200Mg, give 1 tablet by mouth in the morning.</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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NAME OF PROVIDER OR SUPPLIER  Pearl of Montclare, The		STREET ADDRESS, CITY, STATE, ZIP CODE 2833 North Nordica Avenue Chicago, IL 60634	
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<p>F 0759</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>R5's (Active Order as Of: 05/28/2025) Order Summary Report documented, in part Diagnoses: (include but not limited to) hypokalemia, hyponatremia, and hypertension.</p> <p>R5's (04/29/2025) Minimum Data Set documented, in part Section C. Cognitive Patterns. C0500. BIMS (Brief Interview for Mental Status) Summary Score: 13. Indicating R5's mental status as cognitively intact.</p> <p>The (undated) Facility provided 'Alkums Antacid' documented, in part Active ingredient (in each tablet) Calcium Carbonate 500mg. Of note, vitamin D is not listed as an active ingredient.</p> <p>The (undated) Nurse supervisor RN/LPN Job description documented, in part JOB summary: Within scope of practice, coordinates care delivery, which will ensure that patient's needs are met in accordance with professional standards of practice through physician orders, center policies and procedures, and federal, state, and local guidelines. General Nursing Care Responsibilities. Demonstrates the ability to administer medications according to facility policy. Demonstrate ability to carry out physician orders.</p> <p>The (05/02/2025) Administering Medications documented, in part Policy Statement: The Facility will ensure that medications are administered in a safe and timely manner, and as prescribed. Procedure: 3. Medications are administered in accordance with prescriber orders. 8. The individual administering the medication checks the label THREE (3) times to verify the right medication and right dosage.</p>		