

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 145935	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 03/12/2026
NAME OF PROVIDER OR SUPPLIER The Citadel at Saint Joseph Village		STREET ADDRESS, CITY, STATE, ZIP CODE 659 East Jefferson Street Freeport, IL 61032	

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 0755</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Provide pharmaceutical services to meet the needs of each resident and employ or obtain the services of a licensed pharmacist.</p> <p>Based on observation, interview, and record review, the facility failed to maintain accurate records of controlled medications for seven (R6, R7, R8, R9, R10, R11, R12) of ten residents reviewed for medication management in the sample of 12. The findings include: 1. R9's Order Summary Report dated March 12, 2026, shows an order for hydrocodone-acetaminophen (Norco) 5-325 mg give one tablet by mouth every four hours as needed for pain started January 8, 2026. A narcotic count was performed with V4 Licensed Practical Nurse on March 12, 2026, at 11:08 AM. R9's Norco punch card had 14 pills left in it. R9's Controlled Drug Receipt/Record/Disposition Form shows the last dose was administered on March 7, 2026, and there were 15 pills left. (Meaning one pill was missing and not signed out). V4 said she performed a narcotic count with the previous nurse. V4 said one nurse has the sheet and the other nurse has the drawer with the narcotics. V4 said she doesn't know why there is a discrepancy. V4 said she does not remember giving R9 a Norco. On March 12, 2026, at 2:53 PM, V1 Administrator said the facility is still investigating the missing Norco tablet. 2. R10's Medication Administration Record (MAR) dated March 1, 2026-March 31, 2026, shows an order for alprazolam 0.25 mg one tablet by mouth twice daily; give one tablet by mouth every 12 hours as needed. R10's Control Drug Receipt/Record/Disposition Form shows R10 received an alprazolam on March 5, 2026. March 7, 2026, shows a tablet was removed. The nurse documented, For (another resident's initials). Assistant Director of Nursing (ADON) aware. R10's MAR shows that R10 did not receive an alprazolam on March 7, 2026. 3. R11's Controlled Drug Receipt/Record/Disposition Form shows a Norco was signed out on March 9, 2026, two times, but no staff member name is signed. R11's MAR shows that R11 did not receive Norco on March 9, 2026. R6, R7, R8, and R12's Controlled Substances sheets were signed off by V4 LPN during this narcotic count performed on March 12, 2026, at 11:08 AM. V4 said she administered the controlled substances to the listed residents but did not sign them off on the control substances sheets. R6, R7, R8, and R12's MARs show the controlled substances were scheduled to be given at 8:00 AM. On March 12, 2026, at 11:55 AM, V5 Registered Nurse (RN) said narcotics are counted at shift change. V5 said if there are discrepancies, then they have to notify the assistant director of nursing or the director of nursing. V5 said one residents' medication should not be used for another resident. On March 12, 2026, at 1:51 PM, V3 ADON said narcotic counts are performing during the oncoming shift change. Two nurses perform the counts. One nurse looks at the book and the other looks in the cart. Medications should be documented as it is given. V3 said the purpose of performing a narcotic count is to prevent drug diversion. The facility's Administering Medications Policy dated December 2017 shows, The individual administering the medication must initial the resident's MAR on the appropriate line after giving each medication and before administering the next ones. The facility's Controlled Substances policy dated December 2017 shows, The facility shall comply with all laws, regulation, and other requirements related to handling, storage, disposal, and documentation of schedule II and other controlled substances. Nursing staff must count controlled medication at the end of each shift. The nurse coming on duty and the nurse going off duty must make the count together. They must document and report any discrepancies to the Director of Nursing Services.</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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