STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	146008	A. Building B. Wing	01/12/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Alden of Waterford	2021 Randi Drive Aurora, IL 60505

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 0761 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Ensure drugs and biologicals used in the facility are labeled in accordance with currently accepted professional principles; and all drugs and biologicals must be stored in locked compartments, separately locked, compartments for controlled drugs. Based on interview and record review the facility failed to ensure expired medications were not stored in their medication dispensing machine for 1 of 3 residents (R1) reviewed for medications in the sample of seven.The findings include:The Lab Progress Note for R1 dated 12/4/25 at 7:03 PM showed, V4 (R1's daughter) stated she spoke with V3 Nurse Practitioner NP regarding increased temperature 100.2 degrees Fahrenheit at this time. Per V4, V3 will order intravenous IV antibiotic Imipenem. Will endorse to night shift to carry out order and administer.The Physician's Orders for R1 showed Imipenem-Cilastatin Intravenous Solution 500 MG, use 1 dose IV one time daily for febrile illness was ordered on 12/5/25 to start on 12/5/25.R1's Medication Administration Record dated December 2025 showed he had Imipenem-Cilastatin Intravenous Solution 500 MG ordered to be given on 12/5/25 at 6:00 AM and showed a 9 documented at that time which meant to see progress notes.The Progress Notes for R1 showed, 12/5/25 at 7:14 AM - Imipenem-Cilastatin Intravenous IV solution 500 MG, use 1 dose IV one time a day for febrile illness until 12/13/25 - not available.The electronic Medication Administration (eMAR) Order Note dated 12/5/25 at 7:15 AM showed the order for Imipenem-Cilastatin Intravenous IV solution 500 MG, use 1 dose IV one time a day for febrile illness until 12/13/25 - not available.The Progress Note dated 12/5/25 at 8:04 AM showed R1 was sent to the emergency room per V4's request.On 1/11/25 at 1:35 PM, V2 Director of Nursing - DON stated, V2 stated the day that R1 had a temperature of 100.4 degrees V4 (R1's daughter and Nurse Practitioner) wanted him started on antibiotics immediately. V2 stated they usually would assess and monitor a resident, give medication for a fever, and obtain orders for in house treatment. V2 stated an antibiotic is not usually ordered as an initial treatment. V2 stated V4 wanted an antibiotic ordered and spoke to V3. The antibiotic was to be given on 12/5/25 in the morning. V2 stated the dose that they had in the medication dispensing machine was expired so it could not be given right away. The antibiotic would have been given in the afternoon after it was delivered by pharmacy. V2 stated because the facility couldn't give R1 the antibiotic that morning; V4 wanted him sent to the hospital. V2 stated the medication dispensing machine is maintained by pharmacy and pharmacy is supposed to keep track of the expiration of the medications. V2 stated they don't have the ability to check the dates of the medication until the nurse pulls the medication. The medication sent for restock is done automatically by the pharmacy. V2 stated she did not talk to pharmacy as to why the antibiotic in the machine was expired. V2 stated if a medication is ordered and not in stock, the nurse will check the medication dispensing machine. If it is one of the medications in the machine, then it is taken from there and given. If the medication is not in the machine, then it is given after the medication is received from the pharmacies next delivery.The facility's Automated Medication Storage System policy (7/2015) showed, Medication Outdating: 1. The pharmacy will perform an inventory and/or outdating of the medications residing in the automated medication storage system on a monthly basis. 2. (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 0761 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	The pharmacy will send replacement storage units filled with those medications due to expire at the facility. 3. Soon to be outdated medications will be returned to the pharmacy in a return tote.