STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	ASL510508	A. BUILDING: _____ B. WING _____	04/18/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
SAN GABRIEL MEMORY CARE	813 LARS HOFFMAN CROSSING GODFREY, IL 62035

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
A 000	Initial Comment Annual Licensure Survey Violation cited: 295.5000 Medication Errors Complaint # 2543294/ IL190212 No violation cited.	A 000		
A5000	Section 295.5000 Medication Reminders, Supervision of Self Med This Regulation is not met as evidenced by: TYPE 2 VIOLATION Section 295.5000 Medication Reminders, Supervision of Self-Medication, Medication Administration and Storage a) An establishment may provide medication reminders, supervision of self-administered medication, and medication administration as an optional service. d) Medication administration refers to a licensed health care professional employed by an establishment engaging in administering routine insulin and vitamin B-12 injections, oral medications, topical treatments, eye and ear drops, or nitroglycerin patches. Non-licensed staff may not administer any medication. (Section 70 of the Act) e) Medication stored by a resident in the resident's unit shall be stored and controlled as stated in the resident's service plan and shall be inaccessible to other residents.	A5000		

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A5000	Continued From page 1 f) If an establishment provides medication administration or supervision of self-administered medication, the establishment's medication policies and procedures shall be approved by a physician, pharmacist, or registered nurse and shall address: 1) Obtaining and refilling medication; 2) Storing and controlling medication; 3) Disposing of medication; 4) Assisting in the self-administration of medication and medication administration, as applicable; and 5) Recording of medication assistance provided to residents and maintenance of medication records. Based on interview and record review the facility failed to ensure residents are free of medication errors. This failure creates a substantial probability of harm to the residents' health. Findings include: R5's Reportable Incident Report dated 1/20/25 documents, "Resident returned from a rehab center on 1/16/25. The nurse on duty didn't send orders to pharmacy resulting in no medicine delivered. She did not receive her medications from 1/16 - 19/25. Power of Attorney was made aware on 1/19/25, orders were faxed to the pharmacy and PCP was notified. Investigation is ongoing. No ill effects note." R5's Medication Administration Record (MAR) for	A5000		

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A5000	Continued From page 2 the month of January 2025 documents R1 did not receive her ordered oral medications from 1/16-1/20/25 as follows: atorvastatin 40 milligrams (mg) at bedtime for high cholesterol, amlodipine 5 mg in morning for hypertension, quetiapine 25 mg at bedtime for unspecified psychosis, Vit B12 tablet in morning for Vit B12 deficiency, synthroid 50 mcg in morning for hypothyroidism, and miralax powder in morning for bowel regulation. On 4/16/25 at 12:05 PM, E1 (Regional Director) stated E7 (Licensed Practical Nurse), who was on duty on 1/19/25 noted that R1 did not have any medication, was marked as out of the facility in the E-MAR and so she faxed the medication list to pharmacy, Z5 (R5's MD), and notified Z6 (R5's Power of Attorney). E1 stated R5 was monitored closely for side effects and none were reported. The Facility Policy on Medication Policy and Procedures, undated, documents,"Medication Administration. 1. A licensed nurse will oversee medications and conduct follow-up care. 4. (Facility name) medication policies and procedures shall be approved by a registered nurse and shall address: i.Obtaining and refilling medications."	A5000		