STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTIONS	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 0058560	(X2) MULTIPLE CONSTRUCTION A. BUILDING B. WING	(X3) DATE SURVEY COMPLETED 08/06/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
ALTA REHAB AT OAK BROOK	**2013 MIDWEST ROAD , OAK BROOK, Illinois, 60521**

(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) COMPLETION DATE
S0000	Initial Comments Annual Licensure Certification Survey	S0000		
S9999	Final Observations Statement of Licensure Violations 300.610a) 300.1210b) 300.1210d)2) Section 300.610 Resident Care Policies a) The facility shall have written policies and procedures governing all services provided by the facility. The written policies and procedures shall be formulated by a Resident Care Policy Committee consisting of at least the administrator, the advisory physician or the medical advisory committee, and representatives of nursing and other services in the facility. The policies shall comply with the Act and this Part. The written policies shall be followed in operating the facility and shall be reviewed at least annually by this committee, documented by written, signed and dated minutes of the meeting. Section 300.1210 General Requirements for Nursing and Personal Care b) The facility shall provide the necessary care and services to attain or maintain the highest practicable physical, mental, and psychological well-being of the resident, in accordance with each resident's comprehensive resident care plan. Adequate and properly supervised nursing care and personal care shall be provided to each resident to meet the total nursing and personal care needs of the resident. d) Pursuant to subsection (a), general nursing care shall include, at a minimum, the following and shall be practiced on a 24-hour, seven-day-a-week basis: 2) All treatments and procedures shall be administered as ordered by the physician.	S9999		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE

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S9999	Continued from page 1 These Requirements were NOT MET as evidenced by: Based on observation, interview and record review the facility failed to ensure supplements were given to residents with a history of significant weight loss as ordered by their physician. This failure resulted in R63 not receiving her nutritional supplements as ordered for her severe weight loss. This applies to 3 of 3 residents (R63, R12 & R73) reviewed for weight loss in the sample of 62. The findings include: 1.R63's face sheet shows, she was admitted on 7/3/25 with diagnoses to include: muscle wasting and atrophy, protein-calorie malnutrition, dementia, anoxic brain damage, liver disease, underweight and altered mental status. R63's weights and vitals summary printed on 8/5/25 shows, her weight on admission was 100.2 pounds (lbs). The same summary shows, her weight on 8/1/25 (approximately 1 month later) was 93 lbs. A 7% weight loss in one month (severe). R63's progress notes dated 8/2/25 shows, "Spoke with daughter, she said patient is a very picky eater even from before. She is "fat adversed." Will refuse fried foods and if its dairy will need to say that its nonfat or else she wont eat it. She prefers eating cheese pizza, cottage cheese, chocolate milk, cheerios and bacon. Per daughter, she will have snacks delivered here for her that she prefers and family friend can bring some too. NP (nurse practitioner) with order to give Ensure (nutrition supplement) BID (twice daily)." R63's nutrition progress note dated 8/1/25 shows, "1. Nutrition Progress note: Sig (significant) wt (weight) loss of 7.2% x 1 mo (month). BMI (body mass index) 15.5 underweight. On general diet, IDT (interdisciplinary team) reports intake varies greatly. IDT spoke with family and obtained food preference, res (resident) noted to be very selective eater. NP added order for Ensure BID...." R63's order summary report printed on 8/5/25 shows, "Ensure two times a day, give 1 can twice a day." Start date: 8/1/25.	S9999		

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S9999	Continued from page 2 On 8/3/25 from 9:35 AM to 12:04 PM, R63 was up in the dining room in her wheelchair. She could self propel around the room by herself. She was also observed at the noon meal. She was never provided with an Ensure (nutrition supplement). On 8/4/25 during observations in the AM and at the noon meal, R63 was never provided an Ensure. On 8/4/25 at 1:11 PM, V17 Registered Nurse stated, she has 3 residents she gives Ensures too. She stated the 3 residents. R63 was not one of the 3 residents she named. When asked if R63 received one, she went to the computer and looked at R63's MAR (medication administration record). It showed she was scheduled to receive an Ensure at 1400 (2:00 PM). She stated, the order was new and she hadn't "gotten used to it yet." R63's August MAR shows, an order for Ensure scheduled at 10:00 AM and 2:00 PM. V17 RN had already signed out the 10:00 AM order but never actually gave it to her. 2. R12's face sheet shows list her diagnoses to include: Alzheimer's disease and dementia. R12's weights and vitals summary printed 8/5/25 shows, her current weight is 98.3 lbs. R12's order summary report printed 8/5/25 shows, "House nutrition supplement, two times a day with lunch and dinner." Order start date: 1/26/24. On 8/4/25 and 8/5/25 at the noon meal, R12 was eating lunch. She did not have a "house supplement." R12's meal ticket dated 8/5/25 shows, "Notes: PCC (point click care): finger foods, cueing with meals." The ticket does not show, she is supposed to have a house supplement. 3. R73's face sheet lists her diagnoses to include: Alzheimer's disease, dementia, bipolar disorder, paranoid schizophrenia, and major depressive disorder. R73's weights and vitals summary printed 8/5/25 shows, her current weight is 163.4 lbs. R73's order summary report printed 8/5/25 shows, "general diet, regular texture, thin consistency, double entrée of egg and toast for breakfast juice all meals, ice cream or pudding for lunch/dinner, cueing with meals. Order start date: 1/27/24. House nutrition supplement, three times a day one serving." Order start date: 3/7/24.	S9999		

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S9999	Continued from page 3 On 8/4/25 and 8/5/25 at noon meal, R73 was not served ice cream/pudding or a house nutrition supplement. On 8/5/25 at 1:11 PM, V16 Certified Nursing Assistant (CNA) stated, the nurses give out the nutrition supplements. On 8/5/25 at 1:11 PM, V17 RN stated, she only gave ensures to 3 residents and R63, R12 & R73 were not one of the residents she gives nutrition supplements too. She also stated, she only gives out Ensures. If it is ordered as something other than an Ensure she does not give it to the residents. On 8/5/25 at 1:23 PM, V27 dietary manager stated, the nurses give out the nutrition supplements. On 8/4/25 at 1:11 PM, V4 Dietitian stated, Ensure and nutrition supplements are the same thing. Nutrition supplement is just a generic way of saying Ensure. The facility should be giving any supplements that are recommended/ordered by the physician. They are on them because they had some kind of weight loss and its to supplement the loss. The facility's fortified foods, supplements, and snacks policy (no date) shows, "Guideline: Residents who cannot consume adequate amounts of regular foods at meals to meet their nutritional needs may be considered for fortified foods, snacks, or supplements in order to increase nutritional intake. Commercially prepared supplements and nutritional interventions may be ordered by the food service manager, dietitian, or nursing staff. Fortified foods, house supplements, or snacks will be provided within the specifications of the diet order and may be substituted with nutritionally equivalent interventions if a specific brand or type of supplement is unavailable. Example of house nutrition supplement: pudding, ice cream, health shakes, chocolate milk, med pass, super donut, cookies-including fortified cookies, magic cup/nutrition treat.... 6. All house supplements and snacks that are given between meals will be prepared by the dining services department and delivered to nursing for distribution. 7. Commercially prepared supplements are discouraged at mealtime. It is preferred to use items from the menu that may be fortified to allow maximum mealtime intake of foods. These are generally called fortified or enhanced foods. There may be indications to serve these items at mealtime, however, and the rationale may be included in nutritional documentation...."	S9999		

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S9999	Continued from page 4 "B"	S9999		