

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  045466	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  05/08/2025
NAME OF PROVIDER OR SUPPLIER  The Green House Cottages of Poplar Grove		STREET ADDRESS, CITY, STATE, ZIP CODE  7801 Kanis Rd Little Rock, AR 72204	

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 0684</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Provide appropriate treatment and care according to orders, resident's preferences and goals.</p> <p>Based on observations, interviews, record review, facility policy review, it was determined that the facility failed to ensure care planned fall interventions were implemented for one (Resident #1) of three residents reviewed for quality of care. It was also determined that the facility failed to notify Resident #1's guardian that the resident refused to take ordered medication more than two times in a row.</p> <p>The findings include:</p> <p>A review of a facility policy titled, Fall Guidelines, Section General Resident Care Plan Documentation Guidelines, List new intervention developed for each fall with date of implementation. The policy indicated the charge nurse duties included update the care plan with new interventions and the Director of Nurses (DON) or designee duties included In-service staff of interventions in place to prevent injury.</p> <p>A review of the Minimum Data Set (MDS) with an Assessment Reference Date (ARD) of 04/24/2025, indicated Resident #1 had diagnoses which included: unspecified dementia, depression, type 2 diabetes mellitus with hyperglycemia and diabetic neuropathy, hyperlipidemia and hypertension. A Brief Interview of Mental Status (BIMS) score of 13 was coded, indicating the resident was cognitively intact. Section GG [Functional Abilities], within the MDS, indicated, the resident was independent in eating, oral hygiene, upper and lower dressing, putting on/taking off footwear and personal hygiene. It was also revealed within Section GG, that the resident required supervision assistance with toileting hygiene and shower/bathe self. The MDS indicated the resident was independent to roll left and right, sit to lying, lying to sitting on side of bed, sit to stand, chair/bed to chair transfer, toilet transfer, tub/shower transfer, walk ten (10) feet, and walk 50 feet with two (2) turns. The resident required, supervision assistance to walk 150 feet. The number of falls since the prior assessment revealed two (2) falls with no injury.</p> <p>A review of Resident #1's Care Plan Report, indicated the resident was at risk for falls, related to other abnormalities of gait and mobility. The report revealed the resident had an actual fall with no injury on 01/29/2024, an intervention initiated on 01/29/2024 included fall mat to side of bed. The report indicated the resident had an actual fall on 02/04/2025, an intervention initiated on 02/04/2025 included Call Don't Fall signage placed in room for visual que.</p> <p>A review of Progress Note, dated 03/10/2025, indicated Resident #1 had suffered an unwitnessed fall. No interventions were initiated with this fall.</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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<p>F 0684</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>During an observation on 05/07/2025 at 10:49 AM, this surveyor observed Resident #1 room. This surveyor did not note any fall mats on the floor, and there was not a Call Don't Fall sign posted in the resident ' s room.</p> <p>During an observation on 05/08/2025 at 07:40 AM, this surveyor observed Resident #1 room. This surveyor did not note any fall mats on the floor, and there was not a Call Don't Fall sign posted in the resident ' s room.</p> <p>During an interview on 05/08/2025 at 08:29 AM, LPN #1 verified there was not a fall mat in Resident #1's room and there was not a Call Don't Fall sign posted in Resident #1's room.</p> <p>During an interview, on 05/08/2025 at 08:34 AM, the Director Of Nursing (DON) indicated there was not a fall mat in Resident #1's room and there was not a Call Don't Fall sign posted in Resident #1's room.</p> <p>A review of a facility policy titled Resident Rights and Responsibilities indicated, If a Resident/Elder is adjudged incapacitated under the laws of the State, the right of the Resident/Elder will be exercised by the individual appointed under State law to act on the Resident/Elder's behalf. The policy stated, Appropriate nursing facility staff will provide the Resident/Elder or the Resident'/Elder's Health Insurance Portability and Accountability Act (HIPPA) authorized representative with information about his or her health status. The policy further stated, The reasons the Resident/Elder refuses treatment will be assessed, and alternate treatment will be offered. The nursing facility will attempt to clarify and educate the Resident/Elder as to the consequences of refusal.</p> <p>A review of In the Matter of [Resident #1], an Incapacitated Person; Order for the appointment of guardian of the person and estate dated 10/09/2023, granted (Resident #1's Guardian) as Appointment of Guardianship of Resident #1.</p> <p>A review of Progress Note dated 03/27/2025 at 6:23 AM, indicated that Resident #1's Guardian was notified that the resident had been refusing insulin for the past two (2) weeks. The note indicated the APRN was notified and spoke with the Guardian. The note indicated the Guardian requested to be notified when the resident refused two (2) times in a row.</p> <p>During an interview on 05/07/2025 at 5:10 PM, with Resident #1's Guardian, via telephone call, it was revealed the guardian was called earlier this date [05/07/2025] by a nurse from the facility and reported that Resident #1 had refused medication for nerve pain, and a multivitamin. The Guardian reported being called one (1) time before today, and stated the facility reported the resident's sugar was high. The Guardian reported during the call a request was made for the facility to place notice in the resident's file to contact the guardian if the resident refused to take [pronoun] ordered medication.</p> <p>A review of a facility policy titled, Specific Medication Administration Procedures indicated if a resident refuses medication, research refusals for possibility of dry mouth, resident reluctance, development of swallowing difficulty. No research implementation as to possibility of dry mouth, resident reluctance, development of swallowing difficulty found in Resident #1 ' s review of records.</p> <p>A review of Medication Administration Record (MAR) March 2025, for Resident #1, revealed the following:</p> <p>(continued on next page)</p>		

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<p>F 0684</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>a.</p> <p>Order dated 04/25/2023 [Name Brand Non-Steroidal Anti-Inflammatory Medication] oral tablet delayed release 81 mg one (1) tablet by mouth one (1) time a day, for heart health.</p> <p>The resident refused 21 out of 31 doses.</p> <p>b.</p> <p>Order dated 04/24/2023 [Generic HMG-CoA Reductase Inhibitor] (a medication used to treat high cholesterol levels) 40 mg give one (1) tablet by mouth at bedtime for hyperlipidemia (high levels of fat in the blood).</p> <p>The resident refused 15 out of 31 doses.</p> <p>c.</p> <p>Order dated 04/25/2023 [Generic Anti-depressant] (medication to treat depression) oral tablet 10 mg give one (1) tablet by mouth one (1) time a day for depression.</p> <p>The resident refused 21 out of 31 doses.</p> <p>d.</p> <p>Order dated 12/11/2023 [Generic Diuretic] (a medication used to help reduce the amount of water buildup in the body) oral tablet 25 mg give one (1) tablet by mouth one (1) time a day for hypertension (high blood pressure).</p> <p>The resident refused 21 out of 31 doses.</p> <p>e.</p> <p>Order dated 10/25/2024 [Generic Vasodilator] (a medication used to relax blood vessels) oral tablet 100 mg give one (1) tablet by mouth every twelve (12) hours for hypertension (high blood pressure).</p> <p>The resident refused 21 out of 31 morning doses.</p> <p>The resident refused 16 out of 31 evening doses.</p> <p>f.</p> <p>Order dated 02/09/2024 [Generic Combination Hormone] subcutaneous suspension (70-30) (a medication used to help control blood sugar levels) 100 unit/ml Inject 35 unit subcutaneously one (1) time a day for diabetes mellitus (a disease that results in too much sugar in the blood).</p> <p>The resident refused 15 out of 31 doses.</p> <p>g.</p> <p>(continued on next page)</p>

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<p>F 0684</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Order dated 04/24/2023 [Generic Fast-acting Hormone] injection solution (a medication used to lower blood sugar levels) 100 unit/ml inject as per sliding scale.</p> <p>NOTIFY MD IF BLOOD SUGAR IS BELOW 60 OR GREATER THAN 400, subcutaneously before meals for diabetes mellitus (a disease that results in too much sugar in the blood).</p> <p>6:30 AM: The resident refused 13 out of 27 doses.</p> <p>11:30 AM: The resident refused 19 out of 29 doses.</p> <p>4:30 PM: The resident refused 20 out of 28 doses.</p> <p>Fingerstick Blood Sugar on 03/10/2025 at 11:30 AM, 506 mg dl.</p> <p>h.</p> <p>Order dated 02/07/2024 [Generic Anti-ulcer Medication] (a medication used to treat and prevent stomach ulcers) oral tablet one (1) gram give one (1) tablet by mouth four (4) times a day for Gastroesophageal Reflux Disease [GERD] (a disease that allows stomach acid to irritate and damage the food pipe lining).</p> <p>8:00 AM: The resident refused 21 out of 31 doses.</p> <p>12:00 PM: The resident refused 23 out of 31 doses.</p> <p>4:00 PM: The resident refused 10 out of 31 doses.</p> <p>8:00 PM: The resident refused 16 out of 31 doses</p> <p>i.</p> <p>Order dated 02/08/2024 [Generic Combination Hormone] subcutaneous suspension (70-30) (a medication used to lower blood sugar levels) 100 unit/ml Inject 20 unit subcutaneously in the evening for diabetes mellitus (a disease that results in too much sugar in the blood).</p> <p>The resident refused 23 out of 31 doses.</p> <p>j.</p> <p>Order dated 04/24/2023 [Generic Fast-acting Hormone] injection solution (a medication used to lower blood sugar levels) 100 unit/ml Inject as per sliding scale subcutaneously at bedtime for diabetes mellitus (a disease that results in too much sugar in the blood).</p> <p>The resident refused 13 out of 28 doses.</p> <p>k.</p> <p>(continued on next page)</p>		

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<p>F 0684</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Order dated 12/11/2023 [Name Brand Anticonvulsant] (a medication that blocks pain from nerve damage in the body) oral capsule 300 mg give one (1) capsule by mouth every twelve (12) hours for nerve pain.</p> <p>The resident refused 20 out of 31 morning doses.</p> <p>The resident refused 13 out of 31 evening doses.</p> <p>A review of the Medication Administration Record (MAR) April 2025, for Resident #1, revealed the following:</p> <p>a.</p> <p>Order dated 04/25/2023 [Name Brand Non-Steroidal Anti-inflammatory Drug] oral tablet delayed release 81 mg give one (1) tablet by mouth one (1) time a day for heart health.</p> <p>The resident refused 12 out of 30 doses.</p> <p>b.</p> <p>Order dated 04/24/2023 [Generic HMG-CoA Reductase Inhibitor] (a medication used to treat high cholesterol levels) tablet 40 mg give one (1) tablet by mouth at bedtime for hyperlipidemia (high levels of fat in the blood).</p> <p>The resident refused 18 out of 30 doses.</p> <p>c.</p> <p>Order dated 04/25/2023 [Generic Antidepressant] (medication to treat depression) oral tablet 10 mg give one (1) tablet by mouth one (1) time a day for depression.</p> <p>The resident refused 19 out of 30 doses.</p> <p>d.</p> <p>Order dated 12/11/2023 [Generic Diuretic] (a medication used to help reduce the amount of water buildup in the body) oral tablet 25 mg give one (1) tablet by mouth one (1) time a day for hypertension (high blood pressure).</p> <p>The resident refused 16 out of 30 doses.</p> <p>e.</p> <p>Order dated 10/25/2024 [Generic Vasodilator] (a medication used to relax blood vessels) oral tablet 100 mg by mouth every 12 hours for hypertension (high blood pressure).</p> <p>The resident refused 14 out of 30 morning doses.</p> <p>(continued on next page)</p>		

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<p>F 0684</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>8:00 AM: The resident refused 13 out of 30 doses.</p> <p>12:00 PM: The resident refused 22 out of 30 doses.</p> <p>4:00 PM: The resident refused 10 out of 29 doses.</p> <p>8:00 PM; The resident refused 17 out of 30 doses.</p> <p>k.</p> <p>Order dated 12/11/2023 [Generic Anticonvulsant] (a medication that blocks pain from nerve damage in the body) oral capsule 300 mg give one (1) capsule by mouth every 12 hours for nerve pain.</p> <p>The resident refused 12 out of 30 morning doses.</p> <p>The resident refused 18 out of 30 evening doses.</p> <p>A review of the Medication Administration Record (MAR) May 2025, for Resident #1, revealed the following:</p> <p>a.</p> <p>Order dated 04/25/2023 [Name Brand Non-Steroidal Anti-inflammatory Drug] oral tablet delayed release 81 mg give one (1) tablet by mouth one (1) time a day for heart health.</p> <p>The resident refused 4 out of 7 doses.</p> <p>b.</p> <p>Order dated 04/24/2023 [Generic HMG-CoA Reductase Inhibitor] (a medication used to treat high cholesterol levels) tablet 40 mg give one (1) tablet by mouth at bedtime for hyperlipidemia (high levels of fat in the blood).</p> <p>The resident refused 4 out of 7 doses.</p> <p>c.</p> <p>Order dated 04/25/2023 [Generic Antidepressant] (medication to treat depression) oral tablet 10 mg give one (1) tablet by mouth one (1) time a day for depression.</p> <p>The resident refused 5 out of 7 doses.</p> <p>d.</p> <p>Order dated 12/11/2023 [Generic Diuretic] (a medication used to help reduce the amount of water in the body) oral tablet 25 mg give one (1) tablet by mouth one (1) time a day for hypertension (high blood pressure).</p> <p>(continued on next page)</p>		

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