

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 155203	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 05/02/2025
NAME OF PROVIDER OR SUPPLIER Hillcrest Village		STREET ADDRESS, CITY, STATE, ZIP CODE 203 Sparks Ave Jeffersonville, IN 47130	

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 interview and record review, the facility failed to ensure blood pressure medications were held for out-of-parameter readings for 2 of 3 residents reviewed for medication administration. (Resident B and Resident D)</p> <p>Findings include:</p> <p>1. The clinical record for Resident B was reviewed on 5/1/25 at 12:40 p.m. The resident's diagnosis included, but was not limited to, hypotension (low blood pressure).</p> <p>The admission order, dated 3/19/25, indicated the resident was to receive midodrine (medication for low blood pressure) 5 mg (milligrams) three times a day at 8:00 a.m., 2:00 p.m. and 8:00 p.m. The medication was to be held if the SBP (systolic blood pressure) was greater than 135 and/or DBP (diastolic blood pressure) was greater than 85.</p> <p>Review of the March 2025 medication administration record indicated, on 4/22/25 at 8:00 p.m., the resident's midodrine was administered when the resident's SBP was 142.</p> <p>During an interview, on 5/2/25 at 12:55 p.m., Licensed Practical Nurse (LPN) 6 indicated blood pressure medications should not be administered with out-of-range parameters.</p> <p>2. The clinical record for Resident D was reviewed on 5/1/25 at 3:05 p.m. The resident's diagnosis included, but was not limited to, hypotension.</p> <p>The physician's order, dated 4/7/25, indicated the resident was to receive midodrine 2.5 mg three times a day at 5:00 a.m., 11:00 a.m. and 4:00 p.m. The medication was to be held if the resident's SBP was greater than 140.</p> <p>Review of the April 2025 medication administration record indicated the medication was administered on the following dates and times:</p> <ul style="list-style-type: none"> - On 4/17/25 at 5:00 a.m., the resident's midodrine was administered when the resident's SBP was 145. - On 4/18/25 at 5:00 a.m., the resident's midodrine was administered when the resident's SBP was 150 <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>- On 4/18/25 at 11:00 a.m., the resident's midodrine was administered when the resident's SBP was 145</p> <p>- On 4/24/25 at 5:00 a.m., the resident's midodrine was administered when the resident's SBP was 149</p> <p>- On 4/24/25 at 4:00 p.m., the resident's midodrine was administered when the resident's SBP was 146</p> <p>- On 4/25/25 at 5:00 a.m., the resident's midodrine was administered when the resident's SBP was 151</p> <p>- On 4/25/25 at 4:00 p.m., the resident's midodrine was administered when the resident's SBP was 144</p> <p>- On 4/29/25 at 5:00 a.m., the resident's midodrine was administered when the resident's SBP was 149</p> <p>This Citation relates to Complaint IN00456231</p> <p>3.1-37</p>		

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<p>F 0842</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Safeguard resident-identifiable information and/or maintain medical records on each resident that are in accordance with accepted professional standards.</p> <p>Based on interview and record review, the facility failed to ensure residents' (Resident C, Resident D and Resident E) medication administration records accurately reflected the administration of narcotic medications for 3 of 4 residents reviewed for documentation.</p> <p>Findings include:</p> <p>1. The clinical record for Resident C was reviewed on 5/1/25 at 2:52 p.m. The resident's diagnoses included, but were not limited to, anxiety, diabetes and chronic pancreatitis.</p> <p>The April 2025 medication administration record (MAR) indicated the resident was to receive Xanax (narcotic anti-anxiety medication) 0.25 mg (milligrams) twice daily at 8:00 a.m. and 8:00 p.m. and oxycodone 10 mg every 4 hours as needed for severe pain.</p> <p>The April 2025 controlled substance record indicated the resident received the Xanax on the following dates and times:</p> <ul style="list-style-type: none"> - 4/14/25 at 8:00 a.m. - 4/16/25 at 8:00 a.m. - 4/18/25 at 8:00 a.m. - 4/23/25 at 8:00 a.m. <p>The April 2025 controlled substance record indicated the resident received the oxycodone on the following dates and times:</p> <ul style="list-style-type: none"> - 4/05/25 at 4:40 p.m. - 4/07/25 at 11:20 a.m. and 3:20 p.m. - 4/10/25 at 3:00 p.m. - 4/12/25 at 4:12 p.m. - 4/13/25 at 1:00 a.m., 6:00 a.m. and 8:18 p.m. - 4/15/25 at 4:00 p.m. - 4/16/25 at 4:00 p.m. - 4/19/25 at 8:00 a.m. and 7:33 p.m. - 4/23/25 at 8:00 a.m. and 6:00 p.m. <p>(continued on next page)</p>		

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<p>F 0842</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>- 4/25/25 at 9:00 a.m. and 2:00 p.m.</p> <p>The April 2025 MAR lacked documentation of the administration of the medications.</p> <p>During an interview on 5/2/25 at 12:55 p.m., Licensed Practical Nurse (LPN) 6 indicated the medication administration record should be signed out when a narcotic medication was administered.</p> <p>2. The clinical record for Resident D was reviewed on 5/1/25 at 3:05 a.m. The resident's diagnoses included, but were not limited to, depression and rheumatoid arthritis.</p> <p>The March 2025 and April 2025 medication administration record indicated the resident was to receive Tramadol (narcotic pain medication) 50 mg ever 8 hours as needed for pain.</p> <p>Review of the March 2025 and April 2025 controlled substance record indicated the resident received Tramadol (narcotic pain medication) on the following dates and times.</p> <p>- 3/12/25 at 6:00 p.m.</p> <p>- 3/24/25 at 5:00 a.m.</p> <p>- 4/24/25 at 8:00 a.m.</p> <p>- 4/30/25 at 4:40 p.m.</p> <p>The March 2025 and April 2025 medication administration record lacked documentation of the administration of the medication.</p> <p>3. The clinical record for Resident E was reviewed on 5/2/25 at 9:35 a.m. The resident's diagnoses included, but were not limited to, left femur fracture and osteoarthritis.</p> <p>The April 2025 medication administration record indicated the resident was to receive hydrocodone-acetaminiphen (narcotic pain medication) 5-325 mg every 6 hours as needed for pain.</p> <p>The April 2025 controlled substance record indicated the resident received the medication on the following dates and times:</p> <p>- 4/15/25 at 4:52 p.m.</p> <p>- 4/16/25 at 7:00 p.m.</p> <p>- 4/17/25 at 3:30 a.m.</p> <p>- 4/20/25 at 12:00 p.m.</p> <p>The April 2025 medication administration record lacked documentation of the administration of the medication.</p> <p>(continued on next page)</p>		

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<p>F 0842</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>On 5/2/25 at 2:16 p.m., the Director of Nursing provided a current copy of the document titled Controlled Substances: Storage, Documentation, Inventory and Destruction (Includes Fentanyl Patch Removal and Destruction) dated 11/2024. It included, but was not limited to, Procedure .Documentation .When a controlled substance is administered to a resident, it must be recorded in the resident's Medication Administration Record .as well as in the resident's Controlled Substances Inventory Record at the time of administration</p> <p>3.1-50(a)(2)</p>		