

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 366312	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 03/07/2024
NAME OF PROVIDER OR SUPPLIER The Gardens of St. Francis		STREET ADDRESS, CITY, STATE, ZIP CODE 930 South Wynn Road Oregon, OH 43616	

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 0755</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Provide pharmaceutical services to meet the needs of each resident and employ or obtain the services of a licensed pharmacist.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on observation, review of late medication reports, staff interview, and policy review, the facility failed to ensure medications administered in a timely manner as ordered. This affected three (Residents #1, #4, and #43) of four residents reviewed for late medications. The facility census was 49.</p> <p>Findings include:</p> <p>1. Review of the medical record for Resident #1 revealed an admission date of 02/21/21 with diagnoses including but not limited to frontal lobe and executive function deficit following nontraumatic intracerebral hemorrhage, normal pressure hydrocephalus, cognitive communication deficit, cardiac arrhythmia, epilepsy, heart failure, anxiety, and major depressive disorder.</p> <p>Review of The Minimum Data Set (MDS) assessment dated [DATE] revealed Resident #1 was rarely understood. Resident #1 required maximum assistance to total dependence on staff for activities of daily living.</p> <p>Review of the late medication report for 03/05/24 revealed the following medications were due between 7:00 A.M. and 10:00 A.M. losartan potassium (heart) 50 milligrams (mg), multiple vitamin, lactulose 10 grams (gm)/15 milliliter (ml) 10 ml for constipation, escitalopram 10 mg (depression), ferrous sulfate 325 mg, aspirin 81 mg, depakote delayed release (behaviors) 250 mg, vitamin D3 50 micrograms (mcg), and house supplement were administered at 12:58 P.M.</p> <p>Review of the late medication report for 03/06/24 revealed following medications were due between 7:00 A.M. and 10:00 A.M. losartan potassium (heart) 50 milligrams (mg), multiple vitamin, lactulose 10 grams (gm)/15 milliliter (ml) 10 ml for constipation, escitalopram 10 mg (depression), ferrous sulfate 325 mg, aspirin 81 mg, depakote delayed release (behaviors) 250 mg, vitamin D3 50 micrograms (mcg), and house supplement were administered at 12:25 P.M.</p> <p>2. Review of the medical record for Resident #4 revealed an admission date of 01/06/21 with diagnoses including but not limited to unspecified foreign body in the bronchus causing other injury, dysphagia, depression, personal history of malignant neoplasm of bladder, umbilical hernia, diverticulitis, and hypertension.</p> <p>Review of the MDS assessment dated [DATE] revealed Resident #4 was moderately cognitively impaired. Resident #4 required substantial/maximal assistance for activities of daily living.</p> <p>Review of the late medication report for 03/05/24 revealed the following medications were due</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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(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information)		
<p>F 0755</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>between 7:00 A.M. and 10:00 A.M. potassium chloride extended release 20 milliequivalent (MEQ), senna 8.6 mg (constipation), lasix 40 mg (water pill), ocuvite-lutein capsule, oyster-cal 500 mg, aspirin 325 mg, amlodipine besey-benazeprile capsule 10/20 mg (blood pressure), and celexa 20 mg (depression) were given at 11:13 A.M.</p> <p>3. Review of the medical record for Resident #43 revealed an admission date of 02/02/21 with diagnoses including but not limited to heart failure, unspecified convulsions, type two diabetes, coronary artery disease, dementia, anxiety, and hypertension.</p> <p>Review of the MDS assessment dated [DATE] revealed Resident #13 was cognitively intact. Resident #43 required supervision/touching assistance for activities of daily living.</p> <p>Review of physician orders for Resident #43 revealed an order for Carvedilol 6.25 mg twice daily at 8:00 A.M. and 5:00 P.M.</p> <p>Review of the late medication report for Resident #43 revealed on 03/04/24 carvedilol 6.25 mg was administered at 10:30 A.M.</p> <p>Review of the late medication report for Resident #43 revealed on 03/05/24 the following medications scheduled between 7:00 A.M. and 10:00 A.M. ferrous sulfate 325 mg, multivitamin with minerals, claritin 10 mg (allergies), plavix 75 mg (blood thinner), omeprazole 20 mg (stomach), gabapentin 100 mg (neuropathy), rexulti 0.5 mg (mood), klonopin 0.5 mg (anxiety), kepra 500 mg (seizures), sertraline 100 mg (depression) were administered at 1:02 P.M.</p> <p>Review of the late medication report for Resident #43 revealed on 03/06/24 carvedilol 6.25 mg was administered at 9:13 A.M. and the 5:00 P.M. dose was administered at 6:12 P.M.</p> <p>Observation on 03/07/24 at 9:21 A.M. revealed Licensed Practical Nurse (LPN) #647 administering carvedilol 6.25 mg (heart) to Resident #43 at 9:21 A.M. and the medication was ordered for 8:00 A.M.</p> <p>Interview on 03/07/24 at 9:24 A.M. LPN #647 verified Resident #43's carvedilol 6.25 mg was to be administered at 8:00 A.M. and was administered late.</p> <p>Interview on 03/07/24 at 2:55 P.M. with the Director of Nursing (DON) verified there were late medication reports showing late medication administration for Residents #1, #4, and #43. The DON stated she believed the medications were given on time but the nurses were not signing them out as they were administered, however the DON verified there was no evidence to support medications were administered on time.</p> <p>Review of policy titled, Medication Administration, revised 05/03/22 revealed medications would be administered within 60 minutes prior to or after scheduled time unless otherwise ordered by physician.</p> <p>This deficiency represents non-compliance investigated under Complaint Number OH00150807 and is an example of continued noncompliance from the survey dated 02/01/24.</p>		