

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>IL6001986</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>C</b> <b>06/17/2021</b>
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NAME OF PROVIDER OR SUPPLIER  <b>GRANITE NURSING &amp; REHABILITATION</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>3500 CENTURY DRIVE GRANITE CITY, IL 62040</b>
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S 000	Initial Comments	S 000		
	Complaint Investigation: 2144110/IL134893			
S9999	<p>Final Observations</p> <p>Statement of Licensure Violations: 300.610a) 300.1210b) 300.1210d)1) 300.1630e) 300.3220f)</p> <p>300.610 Resident Care Policies</p> <p>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.</p> <p>300.1210 General Requirements for Nursing and Personal Care</p> <p>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</p>	S9999	<p style="text-align: center;"><b>Attachment A</b> <b>Statement of Licensure Violations</b></p>	

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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S9999	<p>Continued From page 1</p> <p>care needs of the resident. Restorative measures shall include, at a minimum, the following procedures:</p> <p>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:</p> <p>1) Medications, including oral, rectal, hypodermic, intravenous and intramuscular, shall be properly administered.</p> <p>300.1630 Administration of Medication</p> <p>e) Medication errors and drug reactions shall be immediately reported to the resident's physician, licensed prescriber if other than a physician, the consulting pharmacist and the dispensing pharmacist (if the consulting pharmacist and dispensing pharmacist are not associated with the same pharmacy). An entry shall be made in the resident's clinical record, and the error or reaction shall also be described in an incident report.</p> <p>300.3220 Medical Care</p> <p>f) All medical treatment and procedures shall be administered as ordered by a physician. All new physician orders shall be reviewed by the facility's director of nursing or charge nurse designee within 24 hours after such orders have been issued to assure facility compliance with such orders. (Section 2-104(b) of the Act)</p> <p>These Regulations were not met as evidenced by:</p> <p>Based on interview and record review the facility failed to administer medication as ordered to 1 of</p>	S9999		

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S9999	<p>Continued From page 2</p> <p>3 residents (R2) reviewed for medications in the sample of 3. This failure resulted in R2 becoming unresponsive requiring ambulance transfer to the Emergency room and a 4-day hospitalization.</p> <p>Findings include:</p> <p>R2's Minimum Data Set, (MDS), dated 4/16/2021 documents R2 is cognitively intact. It also documents that R2 is a 64-year-old male with diagnoses of Coronary Artery Disease (CAD), Hypertension, Other Neurological Condition, Diabetic Mellitus (DM), and Depression.</p> <p>On 6/16/2021 at 9:19 AM, V1, Administrator, stated, "I know why you are here. It is because the doctor wrote an order for Benadryl 50 milligram (mg) as needed (PRN), and the nurse transcribed it to be given every four hours, but it was not a medication error."</p> <p>On 6/16/2021 at 9:30 AM, when 3 months of medication error reports were requested, V1 stated, "There have been no medication errors over the last 3 months."</p> <p>On 6/16/2021 at 10:20 AM, R2 stated that he had his tooth pulled by the dentist. R2 stated he was put on medication, but he didn't have any problems when the tooth was pulled. R2 stated when he asked the nurse why he was taking the medication, the nurse didn't give him an explanation and said he had to take it because the doctor ordered it.</p> <p>R2's Physician Order Sheet (POS) dated 6/5/2021 documents "Amoxicillin 500 mg 1 po (by mouth), TID (Three times a day) x 7 days. Ibuprofen 800 mg 1 po q (every) 8 hours PRN (as needed).</p>	S9999		

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S9999	<p>Continued From page 3</p> <p>R2's Physician's Telephone Order, dated 6/7/2021 at 4:22 PM, documents the order, "Benadryl 50 mg q 4 hours x5 days PRN."</p> <p>R2's POS, dated 6/7/2021, which was transcribed from the Telephone order, documents D/C (discontinue) PCN as allergy. Benadryl 50 mg po q 4 hours x5 days.</p> <p>R2's Departmental Notes, dated 6/5/2021 at 11:11 AM by V11, LPN, documents, "Resident received orders per familia dentist (dentist name) for this resident on 6/4/2021. No. (new order) Amoxicillin 500 mg 1 po TID x7 days, Ibuprofen 800 mg 1 tab po q8h prn. Resident is responsible for self and this nurse faxed over script to (name) pharmacy."</p> <p>R2's Departmental Notes, dated 6/5/2021 at 6:04 PM by V11, LPN, documents, "Resident continues location monitoring and is compliant with signing in and out and where about verified by per this nurse. Resident has started on ABTX (antibiotic treatment) r/t (related to) tooth extraction and not ASE (adverse side effects) noted to ABTX this shift. resident remains afebrile and no c/o (complaint of) pain or discomfort voiced at this time."</p> <p>R2's Departmental Notes, dated 6/6/2021 at 11:46 AM by V11, LPN, documents, "Resident continues ABTX r/t multiple tooth extractions and no ASE noted to ABTx and no swelling noted to face at this time. Resident has good appetite noted. afebrile. No c/o pain or discomfort currently. Resident also continues on location monitoring and is compliant and where about verified per this nurse throughout this shift."</p>	S9999		
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S9999	<p>Continued From page 4</p> <p>R2's Departmental Notes, dated 6/7/2021 at 2:58 PM by V9, LPN, documents, "Resident currently on Amoxicillin related to teeth, resident has allergy to PCN (Penicillin), no adverse side effects noted at this time. MD (medical doctor) and resident made aware of current status."</p> <p>R2's Departmental Notes, dated 6/7/2021 at 4:25 PM by V9, LPN, documents, "Received orders to D/C (discontinue) PCN allergy, and Benadryl 50 mg 1 po q 4 hours x 5 days PRN as needed for itching, MD and RR (resident representative) aware of current status."</p> <p>R2's Departmental Notes, dated on 6/8/2021 at 10:37 PM by V13, Registered Nurse (RN), documents, "Remains on ABT (antibiotic) following tooth extraction. Benadryl given as ordered with no adverse reaction noted. denies c/o pain. denies c/o discomfort with chewing. up and about independently. sitting in activity room at this time watching TV."</p> <p>R2's Departmental Notes, dated on 6/9/2021 at 12:11 PM by V2, LPN, documents "Remains on abt related to tooth extraction no voiced c/o pain or discomfort. on location monitoring complaint with signing in/out."</p> <p>R2's Departmental Notes, dated 6/10/2021 at 1:03 PM by V11, LPN, documents, "Management of this facility made this nurse aware that resident was not acting right this present day at 12:30 PM. Resident was sitting in activity room and c/o headache. Resident was not able to grasp hands of this nurse and bilateral upper extremities displayed involuntary movement and resident was able to speak at times but needed to allow time for resident to answer questions. Resident has moments of blank stare and not able to respond</p>	S9999		

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S9999	<p>Continued From page 5</p> <p>to this nurse. B/P 97/84 P75 -16-97.7. At 12:35 PM this present day, Dr. notified, and this nurse received new order to send resident to ER (emergency room) for eval and tx (treatment). This nurse called (local), ambulance and requested lights and sirens this present day. This nurse called and gave report to (local) ER nurse of this resident. 12:42 this day this nurse called daughter and made aware of resident status at this time. (Local) EMS (Emergency Medical Services) x 2 attendants here in this facility this present day at 12:50 PM to transport resident to ER for Eval (evaluation) and Tx."</p> <p>R2's POS dated 6/10/2021 documents Send to (local Emergency Room) for evaluation.</p> <p>R2's Departmental Notes, dated 6/10/2021 at 5:23 PM by V11, LPN, documents, "This nurse called local hospital to receive update and report that resident was being transferred to another hospital for altered mental status."</p> <p>R2's discharge instructions from hospital document altered mental status from 6/10/2021-6/14/2021 and in bold handwritten writing "Do not give Benadryl!" on page 6 of 6 instructions document, "You were hospitalized due to confusion and abnormal movements called myoclonus due to over sedation from your home medication. Please DISCONTINUE BENADRYL. Please use Tramadol sparingly and only as needed (Not scheduled)."</p> <p>R2's assessment plan from hospital documents, "The patient's mental status has notably improved. Likely etiology is toxic/metabolic in the setting of polypharmacy (Scheduled low-potency opioids and baclofen) + high amounts of Benadryl administration (receiving 300 mg PO every day</p>	S9999		

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S9999	<p>Continued From page 6</p> <p>for 3 days). Overall, we are reassured by his improvements. Will discuss continuing AED (antiepileptic drugs) therapy moving forward. Altered mental status likely toxic/metabolic in the setting of polypharmacy, (opioids, muscle relaxants, high diphenhydramine administration.)"</p> <p>R2's POS, dated 6/14/2021, documents 1.) D/C Benadryl 2.) Place Benadryl on Allergy List.</p> <p>R2's June 2021 Medication Administration Record documents, Amoxicillin 500 mg 10 doses given from 6/5/2021 through 6/10/2021; 1 dose of Ibuprofen on 6/6/2021 at 3:00 PM; and 8 doses of scheduled Benadryl given from 6/7/2021 through 6/10/2021.</p> <p>On 6/16/2021 at 11:49 AM, V3, Pharmacist, stated that if a physician ordered a medication and the nurse transcribed it as a scheduled medication, this is a medication error and it is a significant medication error with Benadryl being ordered as a PRN and given as a scheduled medication.</p> <p>On 6/16/2021 at 3:30 PM, V1, Administrator, asked, "Would you like a copy of the medication error form that we completed on R2? We do not keep medication error forms in the physical chart I keep them in a folder."</p> <p>The facility Medication Error Form dated 6/10/2021 documents in part, "(R2) given Benadryl 50 mg q 4 hours routine + order was 50 mg PRN for 5 days. Outcome to resident sent to ER for eval."</p> <p>On 6/16/2021 at 4:12 PM, V8, Nurse Practitioner, stated, "It is a medication error if a nurse gives a PRN medication as a scheduled medication. I told</p>	S9999		

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S9999	<p>Continued From page 7</p> <p>the facility to make out a medication error form for this mistake. Yes, I consider it a significant medication error when a resident has to go to the hospital over a PRN medication being given as a scheduled medication."</p> <p>On 6/17/2021 at 8:53 AM, V1, Administrator, stated that R2 was in the hospital from 6/10/2021 until 6/14/2021 she did not have any other assessments that were done on (R2) prior to hospitalization, from the nurses other than what was in the chart that she did not have any paper documentation.</p> <p>On 6/17/2021 at 10:30 AM, V10, daughter of R2, stated that she usually has contact with her dad frequently and she didn't know anything about the medication he was on after the dental visit until they notified her of the incident prior to being taken to the hospital. V10 stated that her father asked the nurses what the medication was for and they just told him he had to take it because the doctor ordered it.</p> <p>The facility's Medication Administration General Guidelines policy and procedure, dated 8/2016, documents, "13. When PRN medications are administered, the following documentation is provided: a. Date and time of administration, dose, route of administration (if other than oral), and if applicable, the injection site. b. Complaints or symptoms for which the medication was given. c. Results observed from giving the dose and the time results were noted. d. Resident pain evaluation per facility policy, if applicable. e. Signature or initials of person recording administration and signature or initials of person recording effects if different person administering."</p>	S9999		



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