STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	115592	A. Building B. Wing	08/21/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Countryside Post Acute	233 Carrollton Street Buchanan, GA 30113

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)
F 0727 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Many	Have a registered nurse on duty 8 hours a day; and select a registered nurse to be the director of nurses on a full time basis. Based on staff interviews, record review, review of the facility policy titled Departmental Supervision, Nursing, and review of the [NAME] Payroll-Based Journal (PBJ) dated January 1, 2025, through March 31, 2025, the facility failed to ensure the required Registered Nurse (RN) coverage of at least eight consecutive hours per day, seven days per week. This deficient practice had the potential to adversely affect all residents residing in the facility. The facility census was 52 residents. Findings include:A review of the facility policy titled Departmental Supervision, Nursing, revised August 2022, revealed the Policy Interpretation and Implementation section included, . 2. A registered nurse provides services at least eight consecutive hours every 24 hours, seven days a week. Review of the [NAME] Payroll-Based Journal (PBJ) dated January 1, 2025, through March 31, 2025, revealed that during the second quarter reporting, the facility was identified as not having an RN working on the dates of 1/1/2025, 1/4/2025, 1/11/2025, 1/12/2025, 1/19/2025, 1/26/2025, 2/2/2025, 2/8/2025, 2/9/2025, 3/2/2025, 3/15/2025, 3/16/2025, 3/22/2025, 3/23/2025 for eight consecutive hours each day.Review of the RN clock hour report, which was provided by the Administrator, dated 1/1/2025 through 3/31/2025, revealed there were nine days with no RN coverage for the entire facility (1/4/2025, 1/26/2025, 2/9/2025, 3/2/2025, 3/15/2025, 3/16/2025, 3/22/2025, and 3/23/2025)In an interview on 8/21/2025 at 11:00 am, the Director of Nursing (DON) revealed that there were only two full-time RNs on staff, including herself and the Minimum Data Set (MDS) Coordinator. She stated that there was one part-time RN on staff who only worked one day on the weekend. She further stated that she provided care for the residents when she was on the floor.In an interview on 8/21/2025 at 3:55 pm, the Administrator revealed that she was aware that there were no RN hours for nine days during the second quarter of 2025. The Administrator stated that the expectation was to have RN coverage. She was unable to provide an explanation of why there were no RN staff at the facility on those nine days. She stated that she attempted to gain waiver approval for RN coverage but was not approved. She confirmed that the information provided on the printout of the RN clock hour report was correct.

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

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	115592	A. Building B. Wing	08/21/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Countryside Post Acute	233 Carrollton Street Buchanan, GA 30113

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(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information)
F 0761 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Ensure drugs and biologicals used in the facility are labeled in accordance with currently accepted professional principles; and all drugs and biologicals must be stored in locked compartments, separately locked, compartments for controlled drugs. Based on observations, staff interview, review of manufacturer package inserts, and review of the facility policies titled Medication Labeling and Storage and Insulin Administration, the facility failed to ensure one opened insulin vial was discarded on the discard date and failed to date one opened insulin vial when opening on one of two medication carts. This deficient practice had the potential to place the residents receiving the insulin at increased risk of receiving insulin with altered effectiveness. Findings Include: Review of the facility's policy titled Medication Labeling and Storage, revised 2/2023, revealed the Medication Labeling section included, . 5. Multi-dose vials that have been opened or accessed (e.g., needle punctured) are dated and discarded within 28 days unless the manufacturer specifies a shorter or longer date for the open vial. Review of the facility's policy titled Insulin Administration, revised 2/2014, revealed the Steps in the Procedure (Insulin Injections via Syringe) section included, . 4. Check expiration date, if drawing from an opened multi-dose vial. If opening a new vial, record expiration date and time on the vial (follow manufacturer recommendations for expiration after opening).Review of the facility-provided Humalog (insulin lispro injection) package insert under the title How should I store Humalog? revealed Store opened vials . at room temperature . for up to 28 days and Throw away all opened vials after 28 days of use, even if there is insulin left in the vial.Review of the facility-provided Lantus (insulin glargine injection) package insert revealed page 11 under the title After Lantus vials have been opened (in-use), included, Store in-use (opened) Lantus vials . at room temperature . for up to 28 days and The Lantus vial you are using should be thrown away after 28 days or if the expiration date has passed, even if it still has insulin left in it.Observation and interview on 8/20/2025 at 10:35 am of the nurse's medication cart with Licensed Practical Nurse (LPN) AA on the Short Hall revealed one opened vial of Humalog (insulin lispro) labeled for R18 had a handwritten open date of 7/20/2025 and a handwritten discard date of 8/31/2025. LPN AA confirmed the insulin was past the discard date and stated it should have been discarded on the discard date. Continued observation of the medication cart revealed one opened insulin vial labeled Lantus (insulin glargine) for R18, without an opened or discard date on the vial. LPN AA confirmed the opened insulin vial was undated, stated she was unaware of its status, and discarded it during the observation. She stated the nurses were responsible for ensuring all opened insulin vials were dated when opened and discarded on the discard date. In an interview on 8/20/205 at 11:30 am, the Director of Nursing (DON) stated that it was the responsibility of each nurse assigned to a medication cart to ensure medications, including insulin, were properly labeled and discarded on the discard date. The DON stated that when a new insulin vial was opened, the nurse should label it with both the open date and the discard date, 28 days from the date of opening. The DON further stated that night shift nurses were assigned to check the medication carts each evening for expired medications, and the unit manager was responsible for conducting a weekly audit of both medication carts, as improper labeling or use of expired insulin may compromise medication potency, potentially contributing to inadequate glycemic control and elevated blood glucose levels.