

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 146054	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 09/12/2024
NAME OF PROVIDER OR SUPPLIER Gallatin Manor		STREET ADDRESS, CITY, STATE, ZIP CODE 900 West Race Street Ridgway, IL 62979	

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 0690</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Provide appropriate care for residents who are continent or incontinent of bowel/bladder, appropriate catheter care, and appropriate care to prevent urinary tract infections.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 49907</p> <p>Based on interview and record review, the facility failed to provide appropriate treatment and services to follow up on an abnormal urinalysis for 1 (R7) of 1 resident reviewed for urinary tract infections in a sample of 24.</p> <p>Findings include:</p> <p>R7's Face Sheet documented an admitted [DATE] and included a diagnosis of chronic kidney disease.</p> <p>R7's Minimum Data Set (MDS) dated [DATE] has a Brief Interview for Mental Status (BIMS) score of 00 out of 15 total, which indicates a severe impairment. R7's MDS further documents in section h-bowel and bladder, that R7 is always incontinent of bladder.</p> <p>A Physician's Note dated 03/01/2024, found in the miscellaneous tab of R7's medical record, documents that R7 was having an increase in behaviors and insomnia. This same physician's note documents an order for a CBC (complete blood count), BMP (basic metabolic panel), and a UA (urinalysis) and C&S (culture and sensitivity).</p> <p>R7's Progress Notes document on 03/03/2024 Resident straight cathed (sic) via sterile technique with immediate return of cloudy dark yellow urine. UA (Urinalysis) specimen collected and taken to (local) hospital lab. There is no other documentation in the progress notes related to this lab.</p> <p>A urinalysis for R7, dated 03/03/2024 at 07:32pm documents the following abnormal findings; positive for nitrates, slightly cloudy, [NAME] Blood cell count of 11-20 (normal range is less than 5), and many bacteria. The culture and sensitivity for the same above date lists sensitivities to 20 different antibiotics that could possibly treat the bacteria in R7's urine.</p> <p>On 09/12/2024 at 12:49 PM, V1 (Administrator) stated, if a urinalysis is done, it would not go on the infection tracking log unless it was treated. V1 stated, if there was no follow-up or orders received from the doctor on a pending urinalysis, someone should follow-up and it would be the infection prevention nurse. V1 stated he would still expect to see documentation in the resident's medical record that the doctor addressed an abnormal lab, even if there were no new orders.</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 0690</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>09/11/2024 at 12:28 PM, V2 (Director of Nursing/DON) stated that the Director of Nursing is the infection prevention nurse. V2 stated she was not employed here on 03/03/2024, but that she would try her best to locate the follow-up documentation to the UA results from 03/03/2024. She stated, she would expect to see some follow-up and/or antibiotics ordered on a lab like that.</p> <p>On 09/11/2024 at 02:30 PM, V2 (DON) stated she was still having issues locating any follow-up documentation from 03/03/2024.</p> <p>On 09/12/2024 at 10:36 AM, V8 (Licensed Practical Nurse/LPN) stated, when they received lab results, it comes over as a fax, they are then supposed to send the fax to the doctor to review and write orders if they need to.</p> <p>On 09/12/2024 at 10:55 AM, V2 stated, she had contacted the primary Physician yesterday and they could see where they had received the lab results from 03/03/2024, but there was no documentation of follow-up, or any orders given. V2 stated, the physician's office was unsure why it had not been addressed.</p>		

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<p>F 0742</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Provide the appropriate treatment and services to a resident who displays or is diagnosed with mental disorder or psychosocial adjustment difficulty, or who has a history of trauma and/or post-traumatic stress disorder.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 39744</p> <p>Based on interview and record review, the facility failed to develop an individualized plan of care for the treatment of PTSD (Post traumatic Stress Disorder) for 1 of 1 (R13) residents reviewed for mental health services in a sample of 24.</p> <p>Findings included:</p> <p>On 9/9/2024 at 10:30 AM, R13 stated he was a war veteran and had PTSD (Post Traumatic Stress Disorder). R13 said that due to his PTSD, he suffers from flash backs. R13 said when he reports having issues with flash backs the staff does not really do anything to help him.</p> <p>R13's Face Sheet documented R13 was admitted to this facility on 10/31/2018 with diagnoses of PTSD, schizophrenia, anxiety and dementia among others. R13's Minimum Data Set (MDS) dated [DATE] documented R13's has a Brief Interview for Mental Status (BIMS) score of 10, which indicated R13 had moderate cognitive impairment.</p> <p>A form in R13's Electronic Health Record (EHR) titled Initial Social History and dated 11/2/2018, documents R13 was admitted to this facility with the diagnosis of PTSD among others.</p> <p>A form in R13's EHR titled Psychiatric Evaluation and Consultation dated 8/22/2024 documents that during this evaluation, R13 reported not sleeping well at night due to getting flashbacks and getting nightmares every other day and R13 does not want to talk about the memories of his PTSD.</p> <p>R13's Physician Order Sheet (POS) dated 8/26/2024 documents R13 was prescribed Prazosin 6mg (milligrams) by mouth every day to treat PTSD.</p> <p>A review of R13's EHR and Care Pan revealed no plan of care for R13's PTSD. There were no individualized non-pharmacological interventions listed for the diagnosis of PTSD, nor any plan for tracking/monitoring of symptoms or the effectiveness of the medication prescribed for R13's PTSD.</p> <p>On 9/10/2024 at 11:00 AM, V6 (Licensed Practical Nurse/LPN) stated that R13 has reported to her having flashbacks, but she just encourages him to try to think positively and not to let it get him upset. V6 said as far as she knows, the staff do not track when R13 has PTSD symptoms.</p> <p>On 9/11/2024 at 9:15 AM, V10 (Certified Nursing Assistant/CNA) said she was not aware of any tracking of PTSD symptoms for R13.</p> <p>On 9/12/2024 at 9:50 AM, V2 (Director of Nursing/DON) said she was aware of R13's diagnosis of PTSD. V2 said R13's IDT (Interdisciplinary Team) should have developed a plan of care for R13's PTSD but they had not. V2 said the facility has not been monitoring or tracking R13's PTSD symptoms.</p> <p>On 9/12/2024 at 12:30 PM, V9 (Social Service Director/SSD) stated the staff are not tracking/monitoring R13 for PTSD symptoms, but were tracking other behavioral issues not related to PTSD.</p> <p>(continued on next page)</p>		

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<p>F 0742</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>On 9/11/2024 at 12:00 PM, V1 (Administrator) stated the facility did not have a policy regarding PTSD care.</p>		

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<p>F 0883</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Develop and implement policies and procedures for flu and pneumonia vaccinations.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 41610</p> <p>Based on interview and record review the facility failed to ensure pneumonia vaccinations were offered in accordance with Centers for Disease Control and Prevention (CDC) recommendations for five (R4, R8, R12, R25, R26) of five residents reviewed for immunizations in a sample of 24.</p> <p>Findings Include:</p> <p>1. R25's Face Sheet documents an admitted [DATE] and documents R25 is [AGE] years old. R25's Diagnosis Information listed on the Face Sheet included type 2 diabetes mellitus and malignant neoplasm of unspecified site of unspecified female breast.</p> <p>R25's facility document titled Clinical-Immunizations documents PCV13 (pneumococcal 13-valent conjugate vaccine) was administered on 9/29/2014. The facility did not have documentation to show R25 was offered another pneumococcal vaccine after receiving the PCV13 on 09/29/14 nor any documentation of refusal.</p> <p>R25's Physician Order Sheet (POS) documents an order of: may administer immunizations per facility policy with an order date of 03/16/2022.</p> <p>The CDC's Pneumococcal Vaccine Timing for Adults job aid documents the following under Adults greater than or equal to [AGE] years old, Complete pneumococcal vaccine schedules: If PCV13 was the only vaccine administered at any age, Option A documents to administer PCV20 (pneumococcal 20-valent conjugate vaccine) or PCV21 (pneumococcal 21-valent conjugate vaccine) greater than or equal to a year after; or Option B documents to administer PPSV23 (pneumococcal polysaccharide vaccine) greater than or equal to a year after. This job aid also documents consider minimum interval (8 weeks) for adults with immunocompromising condition .</p> <p>2. R12's Face Sheet documents an admitted [DATE] and documents R12 is [AGE] years old. R12's Diagnosis Information listed on the Face Sheet included Type 2 Diabetes Mellitus.</p> <p>R12's facility document titled Clinical-Immunizations documents PPSV23 was administered on 02/12/2015.</p> <p>The CDC's Pneumococcal Vaccine Timing for Adults job aid documents the following under Adults 19-[AGE] years old with chronic health conditions (which includes Diabetes mellitus), Complete pneumococcal vaccine schedules: If PPSV23 was the only prior vaccine administered, Option A documents to administer PCV20 or PCV21 greater than or equal to a year after; or Option B documents to administer PCV15 (pneumococcal 15-valent conjugate vaccine) greater than or equal to a year after.</p> <p>R12's POS documents an order of: may administer immunizations per facility policy with an order date of 07/01/22.</p> <p>The facility did not have documentation to show R12 was offered another pneumococcal vaccine after receiving the PPSV23 on 02/12/15 nor any documentation of refusal.</p> <p>(continued on next page)</p>		

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<p>F 0883</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>3. R26's Face Sheet documents an admitted [DATE] and documents R26 is [AGE] years old. R26's Diagnosis Information listed on the Face Sheet included unspecified bacterial pneumonia, chronic obstructive pulmonary disease, unspecified, hypoxemia, type 2 diabetes mellitus, other viral pneumonia, acute cough, acute upper respiratory infection, and cannabis use.</p> <p>R26's Immunization Report does not document administration of any pneumonia vaccinations.</p> <p>R26's POS documents an order of: may administer immunizations per facility policy with an order date of 07/29/2022.</p> <p>The CDC's Pneumococcal Vaccine Timing for Adults job aid documents the following under Adults 19-[AGE] years old with chronic health conditions (which includes Diabetes mellitus and chronic obstructive pulmonary disease), Complete pneumococcal vaccine schedules: If no prior pneumococcal vaccines have been administered, Option A documents to administer PCV20 or PCV21; or Option B documents if PCV15 is used, then follow with one dose of PPSV23 greater than or equal to one year later.</p> <p>The facility did not have documentation to show R26 was offered a pneumococcal vaccine nor any documentation of refusal.</p> <p>4. R4's Face Sheet documents an admitted [DATE] and documents R4 is [AGE] years old. R4's Diagnosis Information listed on the Face Sheet included pneumonia, unspecified organism, and heart failure, unspecified.</p> <p>R4's facility document titled Clinical-Immunizations documents Pneumovax Dose 1 (Manufacturer's Name: Prevnar 13) was administered on 5/1/2016 and Pneumovax Dose 1 (Manufacturer's Name: Pneumovax 23) was administered on 5/26/2017.</p> <p>R4's POS documents an order of: may administer immunizations per facility policy with an order date of 11/19/2019.</p> <p>The CDC's Pneumococcal Vaccine Timing for Adults job aid documents the following under Shared Clinical decision-making for those who already completed the series with PCV13 and PPSV23: Together, with the patient, vaccine providers may choose to administer PCV20 or PCV21 to adults (greater than or equal to) [AGE] years old who have already received PCV13 (but not PCV15, PCV20, or PCV21) at any age and PPSV23 at or after the age of [AGE] years old.</p> <p>The facility did not have documentation to show whether R4 was offered another pneumococcal vaccine or if R4's vaccine provider recommended consideration for the PCV20 or PCV21 vaccine for R4.</p> <p>5. R8's Face Sheet documents an admitted [DATE] and documents R8 is [AGE] years old. R8's Diagnosis Information listed on the Face Sheet included chronic obstructive pulmonary disease with (acute) exacerbation, other specified viral diseases, and prediabetes.</p> <p>R8's facility document titled Clinical-Immunizations in the electronic health record (EHR) documents Pneumonia, unspecified on 05/31/2017 and 12/06/2018. R8's State of Illinois Certificate of Child Health Examination document provided by the facility documents Pneumococcal Conjugate Dose 1 was administered on 05/31/2017 and Dose 2 was administered on 12/06/2018.</p> <p>(continued on next page)</p>		

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<p>F 0883</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>The facility did not have documentation to show what types of pneumonia vaccines were administered to R8 or any attempts to determine which pneumonia vaccines were administered.</p> <p>R8's POS documents an order of: may administer immunizations per facility policy with an order date of 01/05/2024.</p> <p>On 9/10/24 at 9:54 AM, V2 (Director of Nursing/DON) stated, no pneumonia vaccines have been given since V2 took over the role a few months ago. V2 stated the pneumonia vaccines should be given per the CDC and the facility's policy.</p> <p>The facility document titled, Pneumococcal Vaccination Policy and Procedure dated 10/16/2023 documents under Procedure: The pneumococcal vaccine is ordered upon admission by the attending physician. If the vaccine is not ordered, the physician/nurse must document as to reason why not .and documentation in (the facility's EHR) Immunization tab regarding the administration, type, time, lot, expiration and location of the pneumonia vaccine administration must be input into the Medication Administration Record, 24 hour Resident Condition Report and Progress Notes. This policy further documents the CDC recommends pneumococcal vaccination for adults 19 through [AGE] years old who have certain chronic medical conditions or other risk factors, including (but not limited to) diabetes mellitus, chronic lung disease, including chronic obstructive pulmonary disease, generalized malignancy, and cigarette smoking. For those who have not previously received any pneumococcal vaccine the CDC recommends to give one dose of PCV15 (Pneumococcal 15-valent Conjugate Vaccine) or PCV20. For those who have only received the PPSV23, PCV15 vaccination or PCV20 vaccination should be administered at least one year after the most recent PPSV23 vaccination. For Adults [AGE] years or older who have only received PPSV23 vaccination the PCV15 vaccination or PCV20 vaccination should be administered at least one year after the most recent PPSV23 vaccination. For adults who have received the PCV13, then give the PPSV23 vaccination. If the PCV15 vaccination is used this should be followed by PPSV23 vaccination one year later.</p> <p>The facility's Pneumococcal Vaccination Policy and Procedure does not include any updated information regarding the PCV21 vaccine that is documented as an option in the current CDC's Pneumococcal Vaccine Timing for Adults job aid.</p>		