

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 155488	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 06/02/2025
NAME OF PROVIDER OR SUPPLIER Rolling Hills Healthcare Center		STREET ADDRESS, CITY, STATE, ZIP CODE 3625 St Joseph Rd New Albany, IN 47150	

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>Based on record review and interview, the facility failed to ensure an intravenous (IV) antibiotic was given in a timely manner for 2 of 3 residents reviewed for pharmacy services. (Residents 2 and 4)</p> <p>Findings include:</p> <p>1. The record for Resident 2 was reviewed on 7/2/25 at 11:17 a.m. The resident's diagnoses included, but were not limited to, dehiscence of the surgical wound and infection following a surgical procedure.</p> <p>The physician's order, dated 5/8/25, indicated the resident was to receive Ceftriaxone Sodium 2 gram intravenously two times a day for post-op craniotomy for 10 Days and use 2 gram intravenously at bedtime for post-op craniotomy for 28 days.</p> <p>The care plan, dated 5/8/25, indicated Resident 2 was currently on intravenous antibiotic therapy for a surgical wound infection. The interventions included, but were not limited to, the resident would be free of signs and symptoms of infection at IV insertion site, administer the IV medications and flushes per the medical provider's orders, and enhanced barrier precautions.</p> <p>The review of the residents' Medication Administration Record (MAR) indicated the resident's p.m. dose was to be administered at 9:00 p.m. The resident MAR indicated the IV antibiotic was given late on the following dates:</p> <ul style="list-style-type: none"> - On 5/8/25 the resident's p.m. IV antibiotic dose was documented as given late, at 11:48 p.m. - On 5/9/25 the resident's p.m. IV antibiotic dose was documented as given late, at 11:19 p.m. - On 5/19/25 the resident's p.m. IV antibiotic dose was documented as given late, at 11:48 p.m. - On 5/22/25 the resident's p.m. IV antibiotic dose was documented as given late, on 5/23/25 at 12:28 a.m. - On 5/25/25 the resident's p.m. IV antibiotic dose was documented as given late, on 5/26/25 at 12:50 a.m. <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>The resident's clinical record lacked any documented comments to indicate a reason why the resident's medication was administered or why the medication was documented late.</p> <p>2. The record for Resident 4 was reviewed on 7/2/25 at 12:00 p.m. The resident's diagnoses included, but were not limited to, infection and inflammatory reaction due to the right hip prosthesis.</p> <p>The physician's order, dated 3/14/25, indicated the resident was to receive Ceftriaxone Sodium Solution Reconstituted 2 gm intravenously at bedtime for infection for 35 administrations.</p> <p>The physician's order, dated 4/16/25, indicated the resident was to receive Ceftriaxone Sodium Solution Reconstituted 2 gm intravenously at bedtime for a surgical site infection for 35 administrations.</p> <p>The review of the residents' MAR indicated the resident's p.m. dose was to be administered at 9:00 p.m. The resident MAR indicated the IV antibiotic was given late on the following dates:</p> <ul style="list-style-type: none"> - On 4/17/25 the resident's p.m. IV antibiotic dose was documented as given late, on 4/18/25 at 4:01 a.m. - On 4/18/25 the resident's p.m. IV antibiotic dose was documented as given late, at 11:25 p.m. - On 4/22/25 the resident's p.m. IV antibiotic dose was documented as given late, at 10:28 p.m. <p>The resident's clinical record lacked any documented comments to indicate a reason why the resident's medication was administered or why the medication was documented late.</p> <p>During an interview, on 6/2/25 at 11:30 a.m., the Director of Nursing (DON) indicated staff should give the medication on time and document correctly if charted late.</p> <p>During an interview, on 6/2/25 at 12:05 p.m., RN 5 indicated the residents' IV medications could be given an hour before and an hour after the medication was due. The IV antibiotics were supposed to be given at a specific time. If a medication was documented as being administered late, she thought it was due to when the nurse documented in the MAR. If a nurse had something come up and could not document the medication as being given on time the nurse could document a comment indicating the medication was given and a reason why the documentation was late.</p> <p>The current Medication Administration policy, included, but was not limited to, .f. Observe the [five rights] in giving each medication: .i. the right resident .ii. the right time .iii. the right medicine .iv. the right dose .v. the right route .ff. Medications will be administered within the time frame of one hour before up to one hour after time ordered</p> <p>This Citation relates to Complaint IN00459358.</p> <p>3.1-25(a)</p> <p>3.1-50(a)(2)</p>		