

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 155523	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 09/24/2024
NAME OF PROVIDER OR SUPPLIER Richland Bean Blossom Health Care Center		STREET ADDRESS, CITY, STATE, ZIP CODE 5911 State Road 46 Ellettsville, IN 47429	

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** 35318</p> <p>Based on interview and record review, the facility failed to ensure accurate acquiring and accounting of controlled substances for 1 of 3 residents reviewed for pharmacy services. (Resident E)</p> <p>Findings include:</p> <p>Resident E's clinical record was reviewed on 9/24/24 at 11:00 a.m. The diagnoses included, but were not limited to, end stage renal disease and pain.</p> <p>Physician Orders, dated 8/24/24 through 9/24/24, indicated Resident E's medications included, but were not limited to, hydrocodone-acetaminophen (a pain medication) Schedule II (drugs with high potential for abuse) tablet 7.5-325 mg (milligram) one every six hours as needed for pain. The medication start date was 4/17/24.</p> <p>The pharmacy document titled, Packing Slip was reviewed on 9/25/24 at 11:45 a.m., for Resident E and indicated 60 hydrocodone-acetaminophen tablets 7.5-325 mg were delivered to the facility on [DATE]. The medication was received and signed for by LPN 1.</p> <p>The facility document titled, Controlled Substance Acceptance Log was reviewed on 9/25/24 at 11:50 a.m., for Resident E. The document was observed to be blank for the acceptance of the 60 hydrocodone-acetaminophen tablets delivered by the pharmacy on 8/28/24.</p> <p>The pharmacy document titled, Controlled Drug Record was reviewed on 9/25/24 at 11:52 a.m., for Resident E. The document indicated only 30 hydrocodone-acetaminophen tablets were left instead of the 60 as indicated on the pharmacy Packing Slip.</p> <p>During an interview on 9/24/24 at 9:40 a.m., the Administrator indicated the pharmacy would deliver medications in the evening and the facility evening nurse would accept the medications from the pharmacy technician. The accepting nurse was supposed to fill out the document titled, Controlled Substance Acceptance Log, for all incoming narcotic medications. This document was not filled out for Resident E on 8/28/24, for the delivery of the hydrocodone-acetaminophen tablets. The pharmacy document titled, Packing Slip indicated 60 tablets were left in 2 separate medication cards of 30 each, however, the facility was showing only 1 card of 30 medications was delivered to facility.</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 0755</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>During a second interview on 9/24/24 at 12:13 p.m., the Administrator indicated the pharmacy would bring narcotic medications with a manifest titled, Packing Slip. The packing slip would indicate how many medications were being delivered. Resident E's Packing Slip for 8/28/24, indicated 60 hydrocodone-acetaminophen 7.5-325 mg tablets were delivered and accepted by the facility nurse LPN 1. LPN 1 failed to fill out the Controlled Substance Acceptance Log for the narcotics. The medication comes 30 in a card therefore, two cards would have been delivered by the pharmacy. The pharmacy only brought 1 document titled, Controlled Drug Record which indicated to the facility on ly one card was left with 30 narcotic tablets. The facility was unsure what happened to the second card of narcotics, however it was unable to be located.</p> <p>On 9/24/24 at 1:15 p.m., the Administrator provided the facility policy, Controlled Substances Policies with a revision date of 3/30/22, and indicated it was the policy currently being used by the facility. A review of the policy indicated, . All Controlled Substances: Controlled Substance Records: All CII-CV [schedule II] controlled substances ordered from [pharmacy name] are delivered with a Controlled Substance Record . each controlled substance prescription will have its own record, even if there are multiple controlled substances prescribed to a single patient .</p> <p>On 9/24/24 at 1:15 p.m., the Administrator provided the facility policy, Courier Deliveries with a revision date of 12/28/21, and indicated it was the policy currently being used by the facility. A review of the policy indicated, . 2. Courier will hand the totes/bags to the . nurse . 3. Courier will have the . nurse sign and date one manifest to verify its deliver . 4. Courier will leave one copy of the manifest with the package .</p> <p>This deficient practice was corrected on 9/11/24 after the facility implemented a systemic plan of correction that included the following actions: staff was inserviced on receiving and acquiring controlled substances from the pharmacy with ongoing monitoring and audits.</p> <p>This citation relates to Complaint IN00443589.</p> <p>3.1-25(e)(2)</p> <p>3.1-25(e)(3)</p>		