

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 245289	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 03/19/2026
NAME OF PROVIDER OR SUPPLIER The Terrace at Crystal LLC		STREET ADDRESS, CITY, STATE, ZIP CODE 3245 Vera Cruz Avenue North Crystal, MN 55422	

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 0658</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Ensure services provided by the nursing facility meet professional standards of quality.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on interview and record review the facility failed to administer long-acting insulin at consistent times according to the manufacturer's instructions for 2 of 3 residents (R2, R3) who were prescribed long-acting insulin. Findings include: R2R2's face sheet dated 3/19/26, identified diagnoses of type 2 diabetes with diabetic polyneuropathy (breakdown of nerves), and long-term use of insulin. R2's quarterly Minimum Data Set (MDS) dated [DATE], identified R2 had no cognitive issues. R2 had a therapeutic diet. R2 received insulin injections seven days a week. R2's care plan dated 9/23/25, identified R2 had diabetes mellitus with interventions which included but not limited to- administer diabetes medication as ordered by doctor. R2's physician order dated 9/23/25, identified Basaglar (long-acting) 62 units twice daily. R2's diabetic administration record dated March 2026, did not identify Basaglar order rather identified the physician order that was clinically equivalent. The administration record identified an order for Lantus 62 units twice daily however the times for administration were transcribed for 7:00 a.m.-11:00 a.m. and HS 19 (hour of sleep 7:00 p.m.). The manufacturer's package insert for Lantus under the section titled Patient Information included You may take LANTUS at any time during the day but you must take it at the same time every day. R2's administration record identified the [NAME] was administered at varying times for the evening scheduled dose and were not consistently given at the same time per the manufacturer's package insert. The following were examples from the record:-3/1/26-9:41 a.m. and 10:32 p.m.-3/2/26-9:17 a.m. and 9:43 p.m.-3/5/26-8:29 a.m. and 10:42 p.m.-3/6/26-9:04 a.m. and 8:27 p.m. R3R3's face sheet dated 3/19/26, identified diagnoses of type 2 diabetes. R3's quarterly MDS dated [DATE], identified R3 had no cognitive issues. R3 was on a therapeutic diet. R3 had insulin injections seven days per week. R3's care plan dated 6/2/25, identified R3 had diabetes mellitus with interventions that included but not limited to diabetes medication as ordered by doctor. R3's physician order dated 5/29/25, included Lantus 20 units daily. The manufacturer's package insert for Lantus under the section titled Patient Information included You may take LANTUS at any time during the day but you must take it at the same time every day. R3's diabetic administration record dated March 2026, included the physician order for Lantus 20 units in the morning with administration times of 7:00 a.m.-11:00 a.m. R3's administration record identified the [NAME] was administered at varying times for the evening scheduled dose and were not consistently given at the same time per the manufacturer's package insert. The following were examples from the record:-3/1/26-8:27 a.m.-3/2/26-10:00 a.m.-3/4/26-8:52 a.m.-3/13/26-12:09 p.m.-3/14/26-7:58 a.m. During an interview on 3/18/26 at 2:40 p.m. licensed practical nurse (LPN)-C stated long-acting insulin should be given at the same time every day for it to work and do what it is supposed to be doing. LPN-C administers long-acting insulin based on what the order in the medication administration record has for times to administer. During a phone interview on 3/19/26 at 10:43 a.m. registered nurse (RN)-A stated if the provider ordered long-acting insulin daily based on experience he would transcribe the order with a specific time so that it was given at the same time every day. During an interview on 3/19/26 at 7:49 a.m., RN nurse manager (NM)-B stated if long-acting insulin does not come with a specific time to administer, staff will transcribe the order with a window where we can administer. Lantus might be (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 0658</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>one where you want specific. NM-B stated it would be best to be given at a certain time every day. During an interview on 3/19/26 at 11:36 a.m., director of nursing (DON) stated some long-acting insulin orders are usually ordered once per day but do not always come with a specific time to be given. The provider would put a specific time in the order if they wanted a resident to have it at a specific time. During a phone interview on 3/19/26 at 10:13 a.m., pharmacist (P)-A stated long-acting insulin should be pretty specific with a very small window for the dose to be given. If the dose was given at different times daily the risk would be for the person to become hyperglycemic or hypoglycemic and could end up with ketoacidosis (potentially life threatening complication of high blood sugar levels) and that would not be good. The facility Insulin Administration policy dated 6/2022, identified characteristics and types of insulin: long-acting insulin: onset 1-2 hours, peak up to 8 hours, duration up to 24 hours.</p>