

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  265477	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  07/29/2024
NAME OF PROVIDER OR SUPPLIER  Springfield Skilled Care Center		STREET ADDRESS, CITY, STATE, ZIP CODE  2401 West Grand Springfield, MO 65802	

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 0584</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Honor the resident's right to a safe, clean, comfortable and homelike environment, including but not limited to receiving treatment and supports for daily living safely.</p> <p>48534</p> <p>1. Please refer to event ID JJ94112 for citation details.</p> <p>MO00240384, MO00240390</p> <p>Based on observation, interview, and record review, the facility failed to ensure a clean and homelike environment for all residents when staff failed to adequately and in a timely manner clean the floor of the resident room and failed to change the soiled bedding for one resident (Resident #2). The facility census was 110.</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 0657</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Develop the complete care plan within 7 days of the comprehensive assessment; and prepared, reviewed, and revised by a team of health professionals.</p> <p>48534</p> <p>1. Please refer to event ID JJ94112 for citation details.</p> <p>MO00240384</p> <p>Based on record review and interview, the facility failed to maintain a comprehensive person-centered care plan for all residents when staff failed to update the care plan for one resident (Resident #2) to include new information on communicating with the resident effectively when the resident returned from the hospital and failed to ensure all staff were aware of the change. The facility's census was 110.</p>		

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<p>F 0677</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Provide care and assistance to perform activities of daily living for any resident who is unable.</p> <p>48534</p> <p>1. Please refer to event ID JJ94112 for citation details.</p> <p>MO00240384, MO00240390</p> <p>Based on observation, interview, and record review, the facility failed to ensure staff provided necessary services for all dependent residents to maintain grooming and personal hygiene when staff failed to complete routine attempts to change urine-soaked clothing and complete bathing and/or showering for one resident (Resident #2) . The facility had a census of 110.</p>		

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<p>F 0689</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Ensure that a nursing home area is free from accident hazards and provides adequate supervision to prevent accidents.</p> <p>45190</p> <p>1. Please refer to event ID JJ94112 for citation details.</p> <p>MO00239914, MO00240161</p> <p>Based on observation, interview, and record review, the facility failed to ensure an environment as free from accident hazards as possible when staff failed to place the call light in reach of one resident (Resident #1) as care planned for a fall intervention. The facility census was 110.</p>		

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<p>F 0755</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Provide pharmaceutical services to meet the needs of each resident and employ or obtain the services of a licensed pharmacist.</p> <p><b>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY**</b> 48534</p> <p>Based on observation, interview, and record review, the facility failed to maintain an ongoing monitoring process to include accurate documentation and accountability of expired or unusable medications, failed to ensure medications that could not be returned to the pharmacy were destroyed in a timely manner for eleven residents (Resident #1, #2, #3, #4, #5, #6, #7, #8, #9, #10, and #11), and failed to develop a policy to address the proper documentation, destruction, and disposal of medications. The facility census was 105.</p> <p>Review of the facility's policy titled Controlled Substance Disposal, revised [DATE], showed the following:</p> <ul style="list-style-type: none"> <li>-Medications included in the Drug Enforcement Administration (DEA) classification as controlled substances are subject to special handling, storage, disposal, and record keeping in the facility in accordance with federal and state laws and regulations;</li> <li>-The Director of Nursing, in collaboration with the consultant pharmacist, is responsible for the facility's compliance with federal and state laws and regulations in the handling of controlled medications. Only authorized licensed nursing and pharmacy personnel have access to controlled medications;</li> <li>-All controlled substances remaining in the facility after a resident has been discharged , or the order is discontinued, are disposed of: in the facility by the Administrator, Director of Nursing and/or consultant pharmacist (or others as allowed by state law); or by returning to the DEA, or by retaining for destruction by an agent of the DEA or by sending to the appropriate state agency, as directed by state laws, regulations, and/or the DEA;</li> <li>-The Administrator, nurse(s) and/or pharmacist witnessing the destruction ensures that the following information is entered on the individual controlled substance accountability record/book: date of destruction, resident's name, name and strength of medication, prescription number, amount of medication destroyed and signatures of witnesses;</li> <li>-Accountability records for controlled substance that are disposed of or destroyed are maintained with the unused supply until it is destroyed or disposed of and then stored for five years or per applicable law or regulation.</li> </ul> <p>Review of the facility's policy titled Medication Destruction, revised [DATE], showed the following:</p> <ul style="list-style-type: none"> <li>-Discontinued medications and medication left in the facility after a resident's discharge, which do not qualify for return to the pharmacy for credit, or are donated are destroyed. Destruction methods comply with federal and state laws and regulations for medication destruction;</li> </ul> <p>(continued on next page)</p>		

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<p>F 0755</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>-All discontinued medications will be immediately removed from the resident's active medication and stored in a separate locked area for up to 90 days or as required by applicable law, and then destroyed by a manner in accordance with applicable state and federal laws.</p> <p>1. Observations on [DATE], at 2:50 P.M., of medication room [ROOM NUMBER] showed the following:</p> <p>-A pile of discontinued pills in bubble packs and individual pill packs located on the counter;</p> <p>-A green 18-gallon storage tote with a lid on the floor. Inside the tote were several bubble packs with tablets, individual pill packs with tablets, and bottles containing liquid medication.</p> <p>During an interview on [DATE], at 2:50 P.M., Registered Nurse (RN) A said the following:</p> <p>-The process to destroy medications that had been discontinued were to put the discontinued medications into the Drug Buster solution;</p> <p>-Controlled substances that were discontinued had to be destroyed by two RN's;</p> <p>-There was a logbook kept documenting destroyed medications;</p> <p>-Medications were destroyed when there were extra staff available to destroy the medications;</p> <p>-He/she did not know how long after medications are discontinued that they have to be destroyed;</p> <p>-There were approximately 200 to 300 pills on the counter to be destroyed and approximately 600 to 700 pills in the green tote to be destroyed;</p> <p>-Controlled substances that were discontinued were kept in the Director of Nursing's (DON) office.</p> <p>Observation on [DATE], at 3:08 P.M., in the DON's office showed the following:</p> <p>-A desk drawer approximately 13 inches wide, 11 inches tall, and 20 inches deep;</p> <p>-The drawer contained bubble packs, pill packs, and bottles of discontinued controlled substances. Not all medications contained the Controlled Substance Accountability Sheet;</p> <p>-Medications from the drawer had fallen out behind the drawer and were lying loose in the back of the desk.</p> <p>During an interview on [DATE], at 3:06 P.M., the DON said the following:</p> <p>-Two RN's or an RN and the pharmacist had to be present to destroy controlled substances;</p> <p>-Controlled substances are kept in his/her office in a drawer;</p> <p>-There should be a logbook that contained information on previously destroyed controlled substances;</p> <p>(continued on next page)</p>

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<p>F 0755</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>-There were approximately 200 different controlled substances in the drawer.</p> <p>During an interview on [DATE], at 3:04 P.M., the Minimum Data Set (MDS - a federally mandated assessment completed by facility staff) Coordinator/Licensed Practical Nurse (LPN) said there was a logbook that contained information from previous destroyed controlled substances.</p> <p>Reviews showed the facility did not provide the logbook containing documentation of previously destroyed controlled substances.</p> <p>During an interview on [DATE], at 3:56 P.M., RN B said the following:</p> <p>-Discontinued medications are removed from the medication cart and put in the medication room, in a designated space, to be destroyed;</p> <p>-Controlled substances took two RN's to destroy them;</p> <p>-Discontinued controlled substances were kept in a lock drawer in the DON's office;</p> <p>-He/she was not involved in destroying discontinued medications;</p> <p>-He/she was not aware of a time frame that discontinued meds had to be destroyed by.</p> <p>2. Review of Resident #1's medical record showed the resident expired on [DATE].</p> <p>Observation on [DATE], at 4:25 P.M., in the DON's office showed a pill pack with two tablets of clonazepam (used to treat panic disorder and anxiety), 1 milligram (mg), dated [DATE], with the resident's name in a drawer located in the DON's desk.</p> <p>3. Review of Resident #2's medical record showed the resident currently admitted to the facility.</p> <p>Observation on [DATE], at 4:25 P.M., in the DON's office showed 23 pill packs each containing 1 tablet of lorazepam, (used to treat anxiety), .5 mg, with the resident's name and no controlled substance accountability sheet, in a drawer located in the DON's desk.</p> <p>4. Review of Resident #3's medical record showed the resident currently admitted to the facility.</p> <p>Observation on [DATE], at 4:25 P.M., in the DON's office showed a bottle containing 20 milliliters (ml) of morphine sol (used to treat pain), expiration date of [DATE], with the resident's name.</p> <p>5. Review of Resident #4's medical record showed the resident currently admitted to the facility.</p> <p>Observation on [DATE], at 4:25 P.M., in the DON's office showed the following medication in a drawer located in the DON's desk:</p> <p>-One pill pack containing one tablet of lorazepam, .5 mg, use by date of [DATE], with the resident's name;</p> <p>(continued on next page)</p>		

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<p>F 0755</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>-Four pill packs containing 1 tablet each of lorazepam, .5 mg, use by date of [DATE], with the resident's name;</p> <p>-Three pill packs containing 1 tablet each of lorazepam, .5 mg, use by date of [DATE], with the resident's name;</p> <p>-Four pill packs containing 1 tablet each of lorazepam, .5 mg, use by date of [DATE], with the resident's name;</p> <p>-Four pill packs containing 1 tablet each of lorazepam, .5 mg, use by date of [DATE], with the resident's name;</p> <p>-Two pill packs containing 1 tablet each of lorazepam, .5 mg, use by date of [DATE], with the resident's name;</p> <p>-Two pill packs containing 1 tablet each of lorazepam, .5 mg, use by date of [DATE], with the resident's name.</p> <p>6. Review of Resident #5's medical record showed the resident currently admitted to the facility.</p> <p>Observation on [DATE], at 4:25 P.M., in the DON's office showed the following medication in a drawer located in the DON's desk:</p> <p>-A medication card with 29 tablets of clonazepam (used to treat panic disorder and anxiety), .5 mg, dated [DATE], with the resident's name;</p> <p>-A medication card with 29 tablets of clonazepam, .5 mg, dated [DATE], with the resident's name;</p> <p>-A medication card with 7 tablets of clonazepam, .5 mg, dated [DATE], with the resident's name;</p> <p>-A medication card with 30 tablets of clonazepam, .5 mg, dated [DATE], with the resident's name.</p> <p>7. Review of Resident #6's medical record showed the resident discharged to home on [DATE].</p> <p>Observation on [DATE], at 4:25 P.M., in the DON's office showed seven pill packs containing one tablet each of clonazepam, .5 mg, dated [DATE], with the resident's name and no controlled substance accountability sheet, in a drawer located in the DON's desk.</p> <p>Observation on [DATE], at 5:21 P.M., in the green tote located in the med room showed a medication card with four and a half tablets of losartan (used to treat high blood pressure), 50 mg, dated [DATE], with the resident's name.</p> <p>8. Review of Resident #7's medical record showed the resident expired on [DATE].</p> <p>Observation on [DATE], at 4:25 P.M., in the DON's office showed the following medication in a drawer located in the DON's desk:</p> <p>(continued on next page)</p>		

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<p>F 0755</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>-A medication card with 23 tablets of clonazepam, .5 mg, dated [DATE], with the resident's name and no controlled substance accountability sheet;</p> <p>-A medication card with 34 tablets of clonazepam, .5 mg, dated [DATE], with the resident's name and no controlled substance accountability sheet.</p> <p>9. Review of Resident #8's medical record showed the resident discharged to the hospital on [DATE].</p> <p>Observation on [DATE], at 5:21 P.M., in the green tote located in the medication room showed one pill pack containing one tablet of mirtazapine (used to treat depression), 15 mg, dated [DATE], with the resident's name.</p> <p>10. Review of Resident #9's medical record showed the resident currently at the facility.</p> <p>Observation on [DATE], at 5:21 P.M., in the green tote located in the med room showed a medication card with three tablets of sucralfate (used to treat ulcers), 1 mg, dated [DATE], with the resident's name.</p> <p>11. Review of Resident #10's medical record showed the resident currently at the facility.</p> <p>Observation on [DATE], at 5:21 P.M., in the green tote located in the medication room showed the following:</p> <p>-One pill pack containing one tablet of atorvastatin (used to treat high cholesterol), 40 mg, dated [DATE], with the resident's name;</p> <p>-One pill pack containing one tablet of olanzapine (used to treat schizophrenia), 5 mg, dated [DATE], with the resident's name.</p> <p>12. Review of Resident #11's medical record showed the resident currently at the facility.</p> <p>Observation on [DATE], at 5:21 P.M., in the green tote located in the medication room showed the following:</p> <p>-One pill pack containing one tablet of glipizide (used to treat high blood sugar levels), 5 mg, dated [DATE], with the resident's name;</p> <p>-One pill pack containing one tablet of citalopram (used to treat depression), 40 mg, dated [DATE], with the resident's name.</p> <p>13. During an interview on [DATE], at 6:37 P.M., the DON said the following:</p> <p>-Discontinued medications were to be put in the Drug Buster solution to be destroyed as soon as possible;</p> <p>-The DON said the number of discontinued medications the facility had on hand was not acceptable.</p> <p>(continued on next page)</p>		

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F 0755  Level of Harm - Minimal harm or potential for actual harm  Residents Affected - Some	14. During an interview on [DATE], at 6:45 P.M., the Administrator said discontinued medications should be destroyed within 30 days.  MO00239651

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<p>F 0880</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Provide and implement an infection prevention and control program.</p> <p>45190</p> <p>1. Please refer to event ID JJ94112 for citation details.</p> <p>MO00240390</p> <p>Based on observation, interview, and record review, the facility failed to implement an effective infection control program when staff failed to clean urine on a resident's floor in a timely manner, stepped in the urine and walked through the facility without the cleaning of shoes, and left a resident's bare feet in a urine puddle for one resident (Resident #1). Staff also failed to clean the blood pressure monitor between making contact with the floor and using on one resident (Resident #1). The facility census was 110.</p>		