

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 365364	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 04/11/2024
NAME OF PROVIDER OR SUPPLIER Garden Court Nursing and Rehabilitation Center		STREET ADDRESS, CITY, STATE, ZIP CODE 4911 Covenant House Drive Dayton, OH 45426	

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 - Some</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>46613</p> <p>Based on observations, resident and staff interviews and review of Resident Council Meeting minutes, the facility failed to ensure the 200 Hall shower was in good working condition for resident use. This affected one (#31) out of the residents reviewed for functioning shower and also had the potential to affect nine (#26, #28, #30, #31, #32, #33, #34, #35 and #36) residents who reside on the 200 hallway that utilize the shower room. Additionally, the facility failed to ensure the roof did not leak onto the resident hallway on the 500 hall. This had the potential to affect 10 (#55, #56, #57, #58, #59, #60, #61, #62, #63 and #64) residents who reside on the 500 hallway where the room was leaking. The facility census was 50.</p> <p>Findings include:</p> <p>Observation on 04/11/24 at 7:21 A.M. revealed water was leaking from the ceiling onto the hallway floor, into a large trash can, a small bucket, and onto a large white towel on the 500 Hall. The observation revealed the area of the floor with water was three feet wide by two feet long and there was not a wet floor sign present.</p> <p>Observation on 04/11/24 at 8:35 A.M. of the shower room on the 200 Hall revealed the shower head was missing from the shower, eight areas of a black substance, about the size of a dime, was observed on the ceiling tiles above the shower, and several areas of black substances, about the size of a pencil eraser, were observed on the grout near the bottom of the shower. The observation revealed the shower faucet worked but the water pressure was poor.</p> <p>Interview on 04/11/24 at 7:24 A.M. with Director of Nursing (DON) confirmed that ceiling was leaking water onto the 500 Hall hallway floor, into a large trash can, a small bucket, and onto a large white towel. DON confirmed the hallway did not contain a wet floor sign to caution staff or residents of the water on the floor. The facility confirmed there are 10 (#55, #56, #57, #58, #59, #60, #61, #62, #63 and #64) residents who reside on the 500 hallway where the room was leaking.</p> <p>Interview on 04/11/24 at 8:25 A.M. with State tested Nursing Assistant (STNA) #103 confirmed the shower for the 200 Hall had not been in proper working condition for a while. STNA #103 stated the 200 Hall shower was missing a shower head and the water did not have much pressure. STNA #103 confirmed the 200 Hall shower contained a black substance on the ceiling tiles over the shower and grout at the bottom of the shower.</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 0584</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Interview on 04/11/24 at 8:30 A.M. with Resident #31 confirmed he resided on the 200 Hall and stated the shower on 200 Hall did not have any water pressure, was missing a shower head, and he believed there was mold in the shower. Resident #31 stated staff offered to give him a shower in the 500 Hall shower but Resident #31 stated too many residents took showers in that shower room and it was hard to get a time to shower.</p> <p>Interview on 04/11/24 at 11:50 A.M. with Administrator confirmed the shower in the 200 Hall shower room was missing a shower head. Administrator stated she was not sure how long the 200 Hall shower had been missing a shower head. The facility confirmed there are nine (#26, #28, #30, #31, #32, #33, #34, #35 and #36) residents who reside on the 200 hallway that utilize the shower room.</p> <p>Review of the Resident Council Meeting minutes for January 2024 and March 2024 revealed residents voiced concerns related to the shower not working properly and only having one working shower. The January 2024 note also stated residents voiced concerns related to the showers not being properly cleaned.</p> <p>This deficiency represents non-compliance investigated under Complaint Number OH00151636.</p>

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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>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** 46613</p> <p>Based on medical record reviews, staff interview, and policy review, the facility failed to administer medications as ordered. This affected three (#31, #37, and #42) out of the three residents reviewed for medication administration. The facility census was 50.</p> <p>Findings include:</p> <p>1. Review of the medical record for resident #31 revealed an admitted [DATE] with medical diagnoses of congestive heart failure (CHF), hypertension (HTN), hyperlipidemia, glaucoma in the right eye, and convulsions.</p> <p>Review of the medical record for Resident #31 revealed a quarterly Minimum Data Set (MDS) assessment, dated 03/14/24, which indicated Resident #31 was cognitively intact and was independent with bed mobility, required supervision with toilet hygiene and transfers and moderate staff assistance with bathing.</p> <p>Review of the medical record for Resident #31 revealed physician orders dated 02/04/24 for meclizine 12.5 milligram (mg) one tablet by mouth three times per day, carvedilol 3.125 mg one tablet by mouth two times per day, Tylenol extra strength 500 mg two tablet by mouth every eight hours, gabapentin 100 mg two tablet by mouth three times per day, and atorvastatin 10 mg one tablet by mouth every evening and physician orders dated 02/05/24 for Mobic 15 mg one tablet by mouth two times per day, ferrous sulfate 325 mg one tablet by mouth daily, multivitamin one tablet by mouth daily, and Lasix 20 mg one tablet by mouth daily. Further review revealed physician orders dated 02/06/24 for hydralazine 50 mg one tablet by mouth two times per day, physician orders dated 02/07/24 for acetazolamide 250 mg two tablets by mouth three times per day and brimonidine tartrate ophthalmic solution 0.2% instill one drop to right eye three times per day, and a physician order dated 02/13/24 for norco 5-325 mg one tablet every 6 hours and gabapentin 300 mg two capsules three times per day.</p> <p>Review of the medical record for Resident #31 revealed the Medication Administration Record (MAR) for February 2024 did not contain documentation to support the following medications were administered as ordered on 02/09/24: ferrous sulfate, Lasix, multivitamin, acetazolamide, brimonidine tartrate ophthalmic solution, gabapentin, meclizine, hydralazine, and Tylenol extra strength. Further review revealed the March 2024 MAR did not contain documentation to support the following medication were administered as ordered on 03/08/24 and 03/15/24: brimonidine tartrate ophthalmic solution 0.2%, gabapentin, meclizine, and Norco.</p> <p>2. Review of the medical record for Resident #37 revealed an admitted [DATE] with medical diagnoses of diabetes mellitus with polyneuropathy, chronic kidney disease, anemia, and right hemiplegia.</p> <p>Review of the medical record for Resident #37 revealed a quarterly MDS assessment, dated 03/04/24, which indicated Resident #37 had severe cognitive impairment and was dependent for toilet hygiene, required maximum staff assistance for transfers and bed mobility and was set-up only for eating.</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 - Few</p>	<p>Review of the medical record for Resident #37 revealed a physician order dated 08/18/23 for Novolog injection solution 100 units per milliliter (ml), inject subcutaneous (SQ) with meals per sliding scale: 0-49 no insulin and notify physician, 50-199= zero units, 200-249 = two units, 250-299= four units, 300-349= six units, 350-399= eight units, 400-450= ten units, and 451-600= 12 units and notify the physician, an order dated 02/21/23 for metoprolol 50 mg one tablet by mouth two times per day, an order dated 03/12/23 for atorvastatin 10 mg one tablet by mouth daily, physician orders dated 10/23/23 for amlodipine desylate 10 mg one tablet by mouth every evening, Prazosin 1 mg one capsule by mouth every evening, oxcarbazepine 300 mg one tablet by mouth two times per day, oxcarbazepine 150 mg one tablet by mouth two times per day, neudexta 20-10 mg one capsule by mouth two times per day, lorazepam 0.5 mg one tablet by mouth two times per day, buspirone 10 mg one tablet by mouth two times per day, and Seroquel 200 mg one tablet by mouth four times per day, physician orders dated 10/24/23 for aspirin 81 mg one tablet by mouth daily and docusate sodium 100 mg one tablet by mouth daily. Further review revealed physician orders dated 10/25/23 for Norco 5-325 mg one capsule by mouth two times per day, an order dated 11/23/23 for Vistaril 25 mg one capsule by mouth two times per day, an order dated 12/07/23 for Zolof 25 mg one tablet by mouth every evening, and order dated 12/24/23 for Lantus 100 units per ml, inject 40 units SQ every evening, and an order dated 02/06/24 for glipizide 5 mg one tablet by mouth every morning.</p> <p>Review of the medical record for Resident #37 revealed MAR for March 2024 did not contain documentation to support the following medications were administered as ordered on 03/12/24: Lantus, Zolof, buspirone, ferrous sulfate, metoprolol, Norco, neudexta, oxcarbazepine, Vistaril, amlodipine, atorvastatin, Prazosin, and lorazepam. Further review revealed no documentation to support Isosorbide was administered as ordered on 03/08/24, 03/13/24, 03/15/24, and 03/22/24. Review of the March 2024 MAR revealed no documentation to support Seroquel was administered as ordered on 03/13/24, 03/15/24, 03/22/24, and 03/24/24. Review of the April 2024 MAR revealed no documentation to support the following medications were administered as ordered on 04/05/24: aspirin, Isosorbide, and Seroquel. Further review of the April 2024 MAR revealed no documentation to support the following medications were administered as ordered on 04/09/24: docusate sodium, glipizide, buspirone, ferrous sulfate, lorazepam, metoprolol, Norco, neudexta, oxcarbazepine, Vistaril, Isosorbide, Seroquel, and Novolog per sliding scale.</p> <p>3. Review of the medical record for Resident #42 revealed an admitted [DATE] with medical diagnoses of diabetes mellitus with neuropathy, hypertensive heart disease with heart failure, anemia, and chronic pain.</p> <p>Review of the medical record for Resident #42 revealed a quarterly MDS assessment, dated 03/20/24, which indicated Resident #42 was cognitively intact and required supervision with bed mobility, showers, transfers, and toilet hygiene.</p> <p>Review of the medical record for Resident #42 revealed physician orders dated 09/13/23 for tamsulosin 0.4 mg one capsule by mouth every evening, atorvastatin 20 mg one tablet by mouth every evening, metformin 500 mg one tablet by mouth two times per day, melatonin 10 mg one tablet by mouth every evening, orders dated 09/14/23 for meloxicam 7.5 mg one tablet by mouth daily, citalopram 20 mg one tablet by mouth daily, glipizide 5 mg one tablet by mouth daily, clopidogrel bisulfate 75 mg one tablet by mouth daily, ferrous sulfate 325 mg one tablet by mouth daily, an order dated 09/15/23 for Jardiance 10 mg one tablet by mouth daily, and an order dated 01/25/24 for gabapentin 400 mg two capsules by mouth every six hours. Further review of the physician orders revealed an order dated 03/27/24 for duloxetine 30 mg one tablet by mouth daily.</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 - Few</p>	<p>Review of the medical record for Resident #42 revealed the MAR for February 2024 did not contain documentation to support the following medications were administered as ordered on 02/07/24: citalopram, clopidogrel bisulfate, ferrous sulfate, gabapentin, glipizide, Jardiance, or meloxicam. Further review of the February 2024 MAR revealed no documentation to support Resident #42's metformin was administered as ordered on 02/24/24 or gabapentin was administered as ordered on 02/04/24, 02/09/24, 02/10/24, and 02/22/24. Review of the Resident #42's March 2024 MAR revealed no documentation to support the following medications were administered as ordered on 03/12/24 and 03/18/24: atorvastatin, melatonin, tamsulosin, and metformin. Further review of the March MAR revealed no documentation to support gabapentin was administered as ordered on 03/08/24, 03/13/24, 03/15/24, 03/19/24, and 03/22/24. Review of Resident #42's April MAR revealed no documentation to support the following medications were administered on 04/09/24: clopidogrel bisulfate, duloxetine, ferrous sulfate, glipizide, Jardiance, meloxicam, metformin, and gabapentin.</p> <p>Interview on 04/11/23 at 1:32 P.M. with Director of Nursing (DON) confirmed the medical records for Residents #31, #37, and #42 did not contain documentation that the medications stated above where administered as ordered.</p> <p>Review of the facility policy titled, Medication Administration, revised November 2018, stated medications are to be administered as prescribed in accordance with good nursing principles and practices and only by persons legally authorized to do so.</p> <p>This deficiency represents non-compliance investigated under Complaint Numbers OH00152180 and OH00151636.</p>		