

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  375406	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  12/05/2024
NAME OF PROVIDER OR SUPPLIER  Baptist Village of Enid		STREET ADDRESS, CITY, STATE, ZIP CODE  5801 North Oakwood Road Enid, OK 73703	

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 - 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>41318</p> <p>Based on record review and interview, the facility failed to ensure medications were administered as ordered for one (#53) of five sampled residents who was reviewed for unnecessary medications.</p> <p>Corporate Nurse #1 stated 53 residents received blood pressure medications.</p> <p>Findings:</p> <p>A Preparation for Medication Administration policy, dated 06/2021, documented medications were administered as prescribed.</p> <p>Resident #53 had diagnoses which included hypertension.</p> <p>A medication order form, dated 06/14/24, documented Resident #53 was to receive metoprolol succinate ER (beta blocker) 50 mg every day and 100 mg every night. It documented to hold the medication if systolic blood pressure was less than 100 and diastolic blood pressure was less than 50.</p> <p>A medication order form, dated 08/12/24, documented Resident #53 was to receive lisinopril (blood pressure medication)10 mg every day.</p> <p>A September 2024 Medications form, documented on 09/27/24 Resident #53's morning diastolic blood pressure was 49. It documented the resident received metoprolol succinate ER 50 mg and Lisinopril 10 mg.</p> <p>A November 2024 Medications form, documented on 11/10/24 Resident #53's evening systolic blood pressure was 81. It documented the resident received Metoprolol Succinate ER 100 mg.</p> <p>On 12/04/24 at 9:52 a.m., CMA #2 stated blood pressure medications usually had parameters instructing when not to administer the medication. They stated if the systolic was below 100 and if the diastolic was below 50, staff were not to administer the medication and they were to notify the nurse. CMA #2 was shown Resident #53's medications forms from September and November 2024. They stated they would not have administered the medications.</p> <p>On 12/04/24 at 9:57 a.m., LPN #3 was shown Resident #53's medication forms from September and November 2024. They stated the medications should not have been given.</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 0761</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Ensure drugs and biologicals used in the facility are labeled in accordance with currently accepted professional principles; and all drugs and biologicals must be stored in locked compartments, separately locked, compartments for controlled drugs.</p> <p>35749</p> <p>Based on observation, record review and interview, the facility failed to ensure a medication was labeled for one of two medication carts observed.</p> <p>The DON identified 63 residents resided in the facility.</p> <p>Findings:</p> <p>A Medication Ordering and Receiving from Provider Pharmacy policy, dated 06/2021, read in part, Medication containers having soiled, damaged, incomplete, illegible or makeshift labels are returned to the issuing pharmacy for relabeling or destroyed in accordance with the medication destruction policy.</p> <p>On 12/02/24 at 1:10 p.m., a box of ipratropium bromide (broncodilator) 0.5 mg and albuterol sulfate 3 mg Inhalation solution was observed to be in a medication cart. There was a common nickname handwritten on the top of the medication box. The medication did not have a label with a resident name, medication name, strength, directions for use, fill date, quantity dispensed, prescriber name or expiration. LPN #1 stated, That's for [resident name deleted]. LPN #1 was asked how staff knew who the medication was for since it did not have a label. They stated, It says [name deleted] on it. LPN #1 stated the medication had been there since they returned to work in August 2024.</p> <p>On 12/02/24 at 1:35 p.m., CMA #1 was asked how they knew they were giving a resident the correct medications. They stated, It has a label on it. CMA #1 was asked what they would do if the medication did not have a label on it. They stated, Then you don't give it.</p> <p>41318</p>		

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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>47453</p> <p>Provide and implement an infection prevention and control program.</p> <p>Based on record review and interview, the facility failed to maintain a water management program to prevent the growth of Legionella and other opportunistic waterborne pathogens in the building water system.</p> <p>The administrator identified 63 residents resided in facility.</p> <p>Findings:</p> <p>A Legionella policy, dated August 20 2024, read in part, is committed to the prevention, detection, and control of water-borne contaminants, including Legionella. The policy did not identify a system to prevent or detect water borne contaminants.</p> <p>On 12/04/24 at 10:30 a.m., the administrator was asked what system does the facility have in place to prevent and detect the water borne pathogens such as Legionella in the facility water system. They stated there was a policy, but not a system for testing.</p>		