

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 396072	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 03/27/2025
NAME OF PROVIDER OR SUPPLIER Millcreek Manor		STREET ADDRESS, CITY, STATE, ZIP CODE 5535 Peach Street Erie, PA 16509	

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 0760</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Ensure that residents are free from significant medication errors.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 40213</p> <p>Based on review of facility policy and clinical records, and staff interview, it was determined that the facility failed to ensure that a resident was free from significant medication errors for one of ten residents reviewed (Resident R1).</p> <p>Findings include:</p> <p>Review of a current facility policy entitled Management of Hypoglycemia revealed that nursing staff must notify the physician if the resident has signs of hypoglycemia [low blood sugar] that are not resolved by following the facility protocol for hypoglycemia management.</p> <p>Resident R1's clinical record revealed an admitted [DATE], with diagnoses that included diabetes (condition of improper blood sugar/insulin levels), pancreatotomy (removal of the pancreas), and Hodgkin's lymphoma (cancer of the immune system).</p> <p>Resident R1's clinical record revealed a physician's order dated 2/27/25, for Lispro (type of insulin) 100 Units/ml (milliliter) inject 3 units subcutaneous (sq - injected into the tissue between the skin and muscle) in the morning (9:00 a.m.) for diabetes. Hold if BS (blood sugar) is below 270 [milligrams/deciliter (mg/dL)].</p> <p>Resident R1's February 2025, Medication Administration Record (MAR) revealed that Resident R1 had a BS of 267 mg/dL on 2/13/25, and staff administered the Lispro 3 units, which should not have been given according to physician's orders.</p> <p>Lispro insulin was administered and not in accordance with physician's orders and Resident R1 was administered 3 units of Lispro when his/her BS was below 270 mg/dL on the above date and times and should have been held.</p> <p>Resident R1's clinical record revealed a physician's order dated 2/27/25, for Glucagon (type of sugar) intramuscular injection (IM) to be given if blood sugar is less than 90 mg/dl.</p> <p>Resident R1's February 2025 MAR revealed that Resident R1 had a BS of 100 mg/dL on 3/15/25 at 12:03 p. m., and staff gave the injection of Glucagon when the medication was ordered to be held. There was no documentation in the Resident R1's clinical record to indicate that they were experiencing symptoms related to hypoglycemia, such as reporting that they were feeling cold, clammy, or experiencing light headedness and no recorded communication with the physician.</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 0760</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Glucagon IM was administered and not in accordance with physician's orders and Resident R1 was administered Glucagon IM when BS was above 90 mg/dl when it should not have been given.</p> <p>During an interview on 3/25/25, at approximately 12:55 p.m. the Regional Director of Nursing confirmed that Resident R1's Lispro insulin was administered on 2/13/25 at 9:00 a.m. when it was ordered to be held and on and Glucagon IM was administered on 2/13/25 at 12:03 p.m. when it was ordered to not be administered.</p> <p>28 Pa. Code 211.12(d)(1)(5) Nursing services</p> <p>28 Pa. Code 211.10(c) Resident care policies</p>		