

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 415110	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 07/23/2024
NAME OF PROVIDER OR SUPPLIER Oakland Grove Health Care Center		STREET ADDRESS, CITY, STATE, ZIP CODE 560 Cumberland Hill Road Woonsocket, RI 02895	

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 0684</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Provide appropriate treatment and care according to orders, resident's preferences and goals.</p> <p>43987</p> <p>Based on record review, and staff interview, it has been determined that the facility failed to ensure that a resident receives treatment and care in accordance with professional standards of practice for 1 of 1 resident reviewed for the use of Humira (a medication used to treat rheumatoid arthritis), Resident ID #1.</p> <p>Findings are as follows:</p> <p>Record review revealed that Resident ID #1 was admitted to the facility in March of 2024 with diagnoses including, but not limited to, infection following a surgical procedure, rheumatoid arthritis and diabetes.</p> <p>Review of a community reported complaint submitted to the Rhode Island Department of Health on 6/26/2024 revealed that the resident had multiple concerns relative to the care s/he received while at the facility.</p> <p>Review of the physician orders revealed the following:</p> <p>-Humira subcutaneous pen -injector kit 40 MG (milligram)/0.8ML(milliliter) inject 1 application subcutaneously one time a day every 2 weeks on Friday. With a start date of 3/29/2024 and a discontinue (dc) date of 5/4/2024.</p> <p>-Humira subcutaneous pen-injector kit 40 MG/0.8ML inject 40 mg subcutaneously one time a day every 2 weeks on Friday. With a start date of 5/10/2024 and a dc date of 5/21/2024.</p> <p>-Humira subcutaneous prefilled syringe kit 40 MG/0.4ML inject 40 mg subcutaneously in the morning every 14 days. With a start date of 5/30/2024 and d/c date of 6/26/2024.</p> <p>Record review of the Medication Administration Records (MAR) for March, April, May and June of 2024 revealed the resident was not administered the medication for 3 of 6 opportunities on 3/29/2024, 4/12/2024 and 6/13/2024.</p> <p>Record review of the progress notes revealed that on the dates the Humira was scheduled but not administered staff documented that they were waiting for pharmacy to deliver the medication.</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 0684</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Further record review failed to reveal evidence that the physician was informed that the resident did not receive his/her medication on the above-mentioned dates.</p> <p>During a surveyor interview with the Assistant Director of Nursing in the presence of the Director of Nursing Services on 7/23/2024 at 10:07 AM and 1:10 PM, she acknowledged the resident did not receive Humira as prescribed. Additionally, she stated that she would have expected the nurses to notify the physician of the missed doses.</p>		