

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 505254	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 06/27/2025
NAME OF PROVIDER OR SUPPLIER Roo Lan Health & Rehab		STREET ADDRESS, CITY, STATE, ZIP CODE 1505 Carpenter Road SE Lacey, WA 98503	

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 - 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** .</p> <p>Based on interview and record review the facility failed to ensure accurate acquiring and receiving of all drugs and biologicals to meet the needs of 2 of 4 residents (6 and 9) reviewed. Failure to ensure ordered medications were received from pharmacy placed residents at risk for experiencing increased pain and a decreased quality of life.</p> <p>Findings included .</p> <p>&lt;Resident 6&gt;</p> <p>Resident 6 was admitted to the facility on [DATE]. According to the admission Minimum Data Set (MDS), an assessment tool, Resident 6 was cognitively intact, assessed with medically complex conditions including spinal stenosis and fractures of the thoracic vertebrae, received scheduled pain medication and was assessed with pain frequently.</p> <p>Review of the May 2025 Medication Administration Records (MARs) showed an order for Morphine Extended Release (ER), (narcotic pain medication) 30 milligrams to be administered every 12 hours for pain. Resident 6 did not receive three consecutive doses on 05/06/2025 at 8:00 PM, 05/07/2025 at 8:00 AM and 05/07/2025 at 8:00 PM.</p> <p>Progress notes, dated 05/07/2025 at 8:12 AM, showed med pending delivery.</p> <p>Progress notes, dated 05/07/2025 at 7:19 PM, showed Awaiting pharmacy delivery.</p> <p>In a telephone interview with Resident 6 on 06/13/2025, he stated he had chronic back pain and was prescribed Morphine twice a day. The resident acknowledged the facility ran out of my pain meds.</p> <p>&lt;Resident 9&gt;</p> <p>Resident 9 was admitted to the facility on [DATE]. According to the admission MDS, Resident 6 was cognitively intact, assessed with medically complex conditions including lumbar stenosis (narrowing of the open spaces in the lower lumbar spine) and back pain and received scheduled pain medication and was assessed to have pain occasionally.</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 0755</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Review of June 2025 MARs showed an order for Norco (narcotic pain medication) 5-325 milligrams to be administered three times per day for pain.</p> <p>Resident 9 did not receive 4 consecutive doses scheduled to be administered 06/03/2025 at bedtime and on 06/04/2025 in AM, lunch and bedtime.</p> <p>Progress notes dated 06/03/2025 at 11:50 PM, showed Norco 5-325 mg. Give 1 tablet three times a day for chronic pain. pharmacy to supply.</p> <p>Progress notes dated 06/04/2025 at 8:00 AM, showed Norco 5-325 mg. Give 1 tablet three times a day for chronic pain. medication awaiting delivery.</p> <p>In an interview with Staff C, Licensed Practical Nurse (LPN) on 06/18/2025 at 9:45 AM, she stated Resident 9 received scheduled narcotic medication. The LPN acknowledged Resident 9 missed several doses of her scheduled narcotic pain medication and was unsure what happened.</p> <p>In an interview with Resident 9 on 06/18/2025 at 1:08 PM, Resident 9 said the facility ran out of my pain medication a while ago and missed a few doses. Resident 9 said she took pain medication regularly for back pain.</p> <p>In an interview with Staff B, Director of Nursing Services (DNS) on 06/27/2025 at 2:05 PM, he acknowledged Resident 6 missed three consecutive doses of his regular scheduled narcotic pain medication on 05/06/2025 and 05/07/2025 due to the medication was not received from the pharmacy timely. The DNS acknowledged Resident 9 missed 4 consecutive doses of their regular scheduled pain medication on 06/03/2025 and 06/04/2025.</p> <p>Reference WAC 388-97-1300 (1) (a)</p>		