

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 505272	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 03/17/2025
NAME OF PROVIDER OR SUPPLIER Life Care Center of Mount Vernon		STREET ADDRESS, CITY, STATE, ZIP CODE 2120 East Division Street Mount Vernon, WA 98273	

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 0842</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Many</p>	<p>Safeguard resident-identifiable information and/or maintain medical records on each resident that are in accordance with accepted professional standards.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 43954</p> <p>Based on interview and record review, the facility failed to ensure resident records were completed accurately for 3 of 3 residents (Residents 1, 2, and 3) reviewed for accurate electronic medical record documentation related to the route of medication administration of residents who were to have nothing by mouth (NPO). These failures placed residents at risk to receive inaccurate routes of medications, harm, and diminished quality of life.</p> <p>Findings included .</p> <p><RESIDENT 1></p> <p>Resident 1 admitted to the facility on [DATE] with diagnoses to include dysphagia (difficulty swallowing) and malnutrition.</p> <p>Review of Resident 1's current physician orders, dated 03/10/2025, showed they were to have NPO and had an enteral feeding tube (feeding tube in stomach or intestine).</p> <p>Review of Resident 1's care plan showed their diet order was NPO, and had an enteral feeding tube, dated 03/10/2025.</p> <p>Review of Resident 1's medication administration record (MAR) dated March 2025 showed the resident's diet was NPO, and had the following medications ordered to given by mouth:</p> <ul style="list-style-type: none"> - Acetaminophen (Tylenol) 325 milligrams (mg) by mouth every 4 hours as needed, order date 03/10/2025 - Midodrine 2.5mg by mouth two times a day, order date 03/13/2025 - Milk of magnesia suspension, give 30 milliliters (mL) by mouth as needed, order date 03/10/2025. <p>In an interview on 03/17/2025 at 11:40 AM, Resident 1 stated they receive their medications through their enteral tube and had not received any medications by mouth.</p> <p><RESIDENT 2></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 0842</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Many</p>	<p>Resident 2 admitted to the facility on [DATE] with diagnoses to include dysphagia, heart failure and cancer of the tongue.</p> <p>Review of Resident 2's physician orders, dated 02/15/2025, showed they were NPO, and medications were to be given using their enteral tube.</p> <p>Review of Resident 2's care plan showed their diet order was NPO, and medication administration was to be given through their enteral feeding tube, dated 02/15/2025.</p> <p>Review of Resident 2's MAR dated February 2025 showed the resident diet was NPO, and they had the following medications ordered to be given by mouth:</p> <ul style="list-style-type: none"> - Cephalexin 5ml by mouth three times daily, order date 02/15/2025 - Clopidogrel 75mg by mouth daily, order date 02/15/2025 - Lexapro 15mg by mouth daily, order date 02/15/2025 - Furosemide 20mg by mouth daily, order date 02/15/2025 - Multivitamin with minerals by mouth daily, order date 02/15/2025 <p>Review of Resident 2's MAR dated March 2025 showed the resident diet was NPO, and had the following medications ordered to be given by mouth:</p> <ul style="list-style-type: none"> - Hydroxyzine 25mg by mouth once for one day, order date 03/08/2025 - Clopidogrel 75mg by mouth daily, order date 02/15/2025 - Cephalexin 250mg by mouth four times daily, order date 03/08/2025 - Furosemide 20mg by mouth as needed, order date 03/05/2025 - Furosemide 20mg by mouth daily, order date 02/15/2025 - Multivitamin with minerals by mouth daily, order date 02/15/2025 - Methadone 0.25ml by mouth ever 12 hours, order date 03/13/2025 <p>In an interview on 03/17/2025 at 11:50 AM, Staff D, Licensed Practical Nurse (LPN)/ Unit care coordinator (UCC), stated they were caring for Resident 2 today and they give all medications through the resident's enteral tube, Staff D stated Resident 2 was to have nothing by mouth.</p> <p><RESIDENT 3></p> <p>Resident 3 admitted to the facility on [DATE] with diagnoses to include dysphagia and malnutrition.</p> <p>(continued on next page)</p>		

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<p>F 0842</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Many</p>	<p>Review of Resident 3's physician orders, dated 12/03/2025, showed they were NPO, and medications were to be given using their enteral tube.</p> <p>Review of Resident 3's care plan showed their diet order was NPO, and medication administration was to be given through their enteral feeding tube, dated 02/15/2025.</p> <p>Review of Resident 3's MAR, dated December 2024, showed the resident diet was NPO, and had the following medications ordered to be taken by mouth::</p> <ul style="list-style-type: none"> - Amantadine 10ml by mouth twice daily, order date 12/03/2025 - Atorvastatin 40mg by mouth daily, order date 12/03/2025 - Omeprazole 20mg by mouth daily, order date 12/03/2025 <p>In an interview on 03/17/2025 at 2:46 PM, Staff C, Registered Nurse (RN) stated medication orders were reviewed by two licensed nurses on admission and for every new medication. Staff C stated Resident Care Managers (RCM) put the medication orders into the resident's Electronic Medical Record (EMR) and have a 2nd licensed nurse verify the orders were correct, which includes the correct route to give the medications to a resident. Staff C stated you would not give medications by mouth to a resident who had an NPO order.</p> <p>In an interview on 03/17/2025 at 3:20 PM, Staff D stated residents who had NPO orders should receive no medications by mouth unless there was a specific order to do so. Staff C stated when they enter medications into the electronic medical record (EMR) there was an option for the route to be given per enteral tube. Staff C stated 2 licensed nurses were supposed to verify the medication orders were completed and entered in the EMR correctly. Staff C stated if they saw a medication order was incorrect, they would call the provider to change the order to the proper route for the safety of the resident. Staff C verified Resident 1, Resident 2 and Resident 3 had incorrect medication orders that were ordered to give by mouth, when the residents were to be NPO.</p> <p>In a joint interview on 03/17/2025 at 4:00 PM with Staff A, Administrator, and Staff B, RN, Interim Director of Nursing Services (DNS), Staff B stated if a resident has an order to be NPO, it means nothing by mouth and that would include medications. Staff B stated their expectation was to have the proper route of medication ordered and for it to be changed by any nurse who found it was incorrect. Staff A stated their expectations was for 2 nurses to check off on all medications and for any licensed nurse to change an order if they see it was incorrect.</p> <p>Reference WAC: 388-97-1720 (1)(a)(ii)</p>		