

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6013346	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 08/19/2021
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NAME OF PROVIDER OR SUPPLIER HARRIS PLACE	STREET ADDRESS, CITY, STATE, ZIP CODE 209 HARRIS ROAD EAST PEORIA, IL 61611
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Z000	COMMENTS ANNUAL CERTIFICATION SURVEY - FULL INSPECTION OF CARE LICENSURE SURVEY	Z 000		
Z9999	<p>FINDINGS</p> <p>Statement of Licensure Violations:</p> <p>350.620a) 350.1060a) 350.1060d) 350.1060e) 350.1060f) 350.1060j) 350.1210 350.1430a)3) 350.3240a)</p> <p>Section 350.620 Resident Care Policies</p> <p>a) The facility shall have written policies and procedures governing all services provided by the facility which shall be formulated with the involvement of the administrator. The policies shall be available to the staff, residents, and the public. These written policies shall be followed in operating the facility and shall be reviewed at least annually.</p> <p>Section 350.1060 Training and Habilitation Services</p> <p>a) The facility shall provide training and habilitation services to facilitate the intellectual, sensor motor, and effective development of each</p>	Z9999	<p style="text-align: center;">Attachment A Statement of Licensure Violations</p>	

Illinois Department of Public Health
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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Z9999	<p>Continued From page 1</p> <p>resident in the facility.</p> <p>d) There shall be evidence of training and habilitation services activities designed to meet the training and habilitation objectives set for every resident.</p> <p>e) An appropriate, effective and individualized program that manages residents' behaviors shall be developed and implemented for residents with aggressive or self-abusive behavior. Adequate, properly trained and supervised staff shall be available to administer these programs.</p> <p>f) There shall be a functional training and habilitation record for each resident, maintained by and available to the training and habilitation staff.</p> <p>j) Appropriate records shall be maintained for each resident functioning in these programs. These shall show appropriateness of the program for the individual, resident's response to the program and any other pertinent observations and shall become a part of the resident's record.</p> <p>Section 350.1210 Health Services</p> <p>The facility shall provide all services necessary to maintain each resident in good physical health.</p> <p>Section 350.1430 Administration of Medication</p> <p>a) All medications shall be administered only by personnel who are licensed to administer medications, in accordance with their respective licensing requirements. Licensed practical nurses</p>	Z9999		

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Z9999	<p>Continued From page 2</p> <p>shall have successfully completed a course in pharmacology or have at least one year's full-time supervised experience in administering medications in a health care setting if their duties include administering medications to residents.</p> <p>3) Self-administration of medication shall be permitted only upon the written order of the licensed prescriber.</p> <p>Section 350.3240 Abuse and Neglect</p> <p>a) An owner, licensee, administrator, employee or agent of a facility shall not abuse or neglect a resident. (Section 2-107 of the Act)</p> <p>These Regulations were not met as evidenced by:</p> <p>Based on record review and interview the facility's governing body and management failed to implement their written policies and procedures by their failure to:</p> <p>< Accurately document the verbal and physical behaviors by R1 and R2 toward their peers R5, R6, R9 and R11, who were physically abused by R1 and R2.</p> <p>< Monitor for patterns and trends of abuse and neglect of individuals R5, R6, R9 and R11, who are physically or verbally abused by R1 and R2. This has the potential to affect all individuals living at the facility R1-R12.</p>	Z9999		

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Z9999	<p>Continued From page 3</p> <p>< Conduct an IDT (Interdisciplinary Team) meeting to review the person's needs, revise the intervention methods and monitor the overall effectiveness of the plan for the person.</p> <p>< Administer medication according to their policy when they had morning medications in unlabeled cups on the dining room table for (R2, R4 ,R5, R6, R7, R8, R9, R10 and R12) that residents were expected to self administer.</p> <p>Findings include:</p> <p>Facility Policy dated August 2021 and titled, "Abuse and Neglect Program" documents in part, "Policy: It is the policy of this facility that all residents have the right to be free from verbal, sexual, physical and mental abuse, corporal punishment, involuntary seclusion, misappropriation of property or neglect by anyone, including, but not limited to, facility staff, other residents, consultants or volunteers, staff of other agencies serving the resident, family members or legal guardians, friends or other individuals.</p> <p>Abuse - the willful infliction of injury, unreasonable confinement, intimidation punishment with resulting physical harm, pain or mental anguish. This also includes the deprivation by an individual, including a caretaker, of goods or services that are necessary to attain or maintain physical, mental and psychosocial well being. Neglect - failure to provide goods and/or services necessary to avoid physical harm, mental anguish or mental illness."</p> <p>This policy has a section titled, "Peer to Peer Abuse" which reads:</p>	Z9999		

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Z9999	<p>Continued From page 4</p> <p>1) "The staff of the facility will document the incident each time there is an incident of peer to peer physical contact, verbal abuse, that was volitional and not accidental or sexual abuse.</p> <p>4) In either case, an abbreviated Interdisciplinary Team Meeting (IDT) may be held to review the Behavior Management Program (BMP) for the person and determine if the current interventions strategies remain appropriate.</p> <p>5) After three incidents, the IDT will meet to review the person's needs, revise the intervention methods and review the overall plan for the person.</p> <p>6) These meeting and reviews will be documented and any changes in interventions or treatment plan will be noted."</p> <p>Facility Roster undated documents, 4 individuals function in the Mild Range of Intellectual Disability (R2, R3, R8, R9); 7 individuals function in the Moderate Range of Intellectual Disability (R1, R4, R5, R7, R10, R11, R12); and 1 individual functions in the Severe Range of Intellectual Disability (R6).</p> <p>1) R1's Individual Service Plan (ISP) dated 1/20/2021, documents he was admitted to the facility 2/28/12. R1 is a 46 year old male who functions at a Moderate Intellectual Disability level, with current diagnoses of Schizoaffective Disorder, Gastritis, Gastroduodenitis and Constipation.</p> <p>R1's Behavior Management Plan (BMP) dated 1/20/2021, documents R1 displays the following behaviors: A) Aggression, behaviors defined as hitting, kicking, shoving, choking others, pinching, biting, throwing objects, and using objects as weapons or any other form of physical aggression towards</p>	Z9999		

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Z9999	<p>Continued From page 5</p> <p>others.</p> <p>B) Hallucinations Behaviors defined as making statements that he sees or hears someone or something that is not there, talking to someone or something, and interacting with someone or something that is not there in physical form.</p> <p>C) Leaving the Designated Area defined as leaving the facility grounds without notification to the staff of leaving and/or leaving the eyesight of the staff.</p> <p>D) Disrobing defined as stripping of his clothing or notably for R1, pulling his pants down in public and thus exposing himself.</p> <p>E) Verbal Outburst defined as yelling, screaming and name calling.</p> <p>Staff will document all incidents of behaviors on the BER (electronic behavior report) and if injury occurs, staff is to complete a GER (general electronic report).</p> <p>Review of incidents involving R1 between 1/4/21 and 6/30/21 documents physical aggression towards other individuals with no BERs being completed for each incident.</p> <p>On 1/4/21, "R1 hit R6 (who is legally blind, Sensorineural hearing loss, Kyphoscoliosis, and utilizes a wheelchair) on the back of the head with an open hand."</p> <p>On 2/18/21, "R1 became upset and while walking out of the dining room pushed R9. R9 fell and hit her back on the kitchen table. DSP assisted R9 in getting up."</p> <p>On 4/20/21, "R1 became upset when a peer was speaking in a loud tone. R1 pushed a computer chair out of his direction. The computer chair rolled into the right shin of R6. A laceration was noted on her right shin. First Aid was</p>	Z9999		

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Z9999	<p>Continued From page 6</p> <p>administered, and R6 was transported via facility vehicle to local Emergency Room for evaluation. X-rays were completed showing no abnormalities and R6 received five stitches and was discharged back to the home.</p> <p>On 5/13/21, "R1 kicked house mate R6 in the right shin."</p> <p>On 6/30/21, "R1 became upset when house mate R5 told him to shut up and leave her alone. R1 then smacked R5 with an open hand on the cheek multiple times."</p> <p>On 6/24/21, "R1 hit R6 on the top of her head with an open hand after R6 became upset and verbal towards R1 for accidentally stepping on her foot."</p> <p>There is no evidence of R1's behaviors being documented on BERs to review and monitor behaviors for patterns and trends of abuse.</p> <p>Review of Human Rights Committee (HRC) meeting minutes for R1:</p> <p>On 1/13/21, R1's HRC documents, "In October 2021, R1 had 32 incidents of Aggression, 0 incidents of Leaving the Designated Area, 32 incidents of Hallucinations, 0 incidents of Disrobing. In November 2021, R1 had 10 incidents of Aggression, 0 incidents of Leaving the Designated Area, 22 incidents of Hallucinations, 0 incidents of Disrobing. In December 2021, R1 had 19 incidents of Aggression, 0 incidents of Leaving the Designated Area, 15 incidents of Hallucinations, 0 incidents of Disrobing."</p> <p>On 4/13/21, R1's HRC documents, "In January</p>	Z9999		

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Z9999	<p>Continued From page 7</p> <p>2021, R1 had 2 incidents of Aggression, 0 incidents of Leaving the Designated Area, 26 incidents of Hallucinations, 0 incidents of Disrobing. In February 2021, R1 had 0 incidents of Aggression, 0 incidents of Leaving the Designated Area, 15 incidents of Hallucinations, 0 incidents of Disrobing. In March 2021, R1 had 0 incidents of Aggression, 0 incidents of Leaving the Designated Area, 10 incidents of Hallucinations, 0 incidents of Disrobing."</p> <p>On 7/14/21, R1's HRC documents, "In April 2021, R1 had 0 incidents of Aggression, 0 incidents of Leaving the Designated Area, 5 incidents of Hallucinations, 0 incidents of Disrobing. In May 2021, R1 had 0 incidents of Aggression, 0 incidents of Leaving the Designated Area, 20 incidents of Hallucinations, 0 incidents of Disrobing. In June 2021, R1 had 1 incident of Aggression, 0 incidents of Leaving the Designated Area, 8 incidents of Hallucinations, 0 incidents of Disrobing."</p> <p>In an interview with E1, Residential Service Director (RSD), 8/12/21, at 12:09 PM, E1 (RSD) was asked how facility monitors for patterns and trends? E1 (RSD) stated "it comes from the tracking sheets." E1 (RSD) was asked to provide tracking sheets, but was unable to produce.</p> <p>Observations on 8/4/21 from 7:00 AM-9:10 AM, At 7:05 AM, R1 got up from his bed and was yelling loudly. E3/DSP was outside his room and stated, "That's why I don't mess with him." At 8:10 AM, R1 was yelling and cursing with no intervention by the staff. At 9:05 AM, R1 went to the medication room to take his medication because E4/cook/DSP stated, "He refused to take them earlier."</p>	Z9999		

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Z9999	<p>Continued From page 8</p> <p>Interview on 8/12/21 at 12:09 PM, E1/RSD (Residential Service Director) was asked if there were any BERs (behavior electronic record) on R1? E1 stated, "Only the one I sent for 4/20/21. E1 was asked how the facility monitors for patterns and trends of abuse? E1 stated, "They are supposed to document on the tracking sheets and BERs." E1 was asked where is the data coming from that is used for the HRC meetings and the Psychiatric consults? E1 stated, "It comes from the tracking sheets." E1 was asked if there are any IDT team meetings held for R1 per policy after 3 incidents? E1 stated, "No."</p> <p>There is no evidence that the behavior documentation presented at HRC's was accurate and tracking patterns and trends to prevent abuse and neglect to other individuals residing at facility.</p> <p>2) R2's Individual Support Plan (ISP) dated 5/12/20 indicates he was admitted to the facility on 5/22/19. R2 is a 46 year old male who functions at a Mild Intellectual Disability Level, with Current diagnoses of Schizophrenia and Sickle Cell Anemia.</p> <p>R2's Behavior Management Program (BMP) dated 5/12/20 indicates R2 displays the following behaviors:</p> <p>A) Physical Aggression defined as a behavior that has the potential to cause harm to another person, hitting, kicking, pushing etc.</p> <p>B) Verbal Aggression defined as elevated frustrated tone of voice or yelling at peers/staff.</p> <p>C) Inappropriate Touching defined as touching, petting, hugging or patting others without their permission.</p> <p>D) Repetitive Statements such as repeating himself several times after being acknowledged.</p> <p>E) Loud Tone using a voice volume above</p>	Z9999		
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Z9999	<p>Continued From page 9</p> <p>normal that causes discomfort to others.</p> <p>F) Leaving Designated Area (Elopement) such as leaving the area without notifying the staff or leaving area without staff supervision.</p> <p>Review of incidents involving R2 between 1/12/21 and 4/27/21 include the following:</p> <p>On 1/12/21, "R2 was transported to local hospital via ambulance for a psychiatric evaluation due to an increase in physical and verbal aggression. R2 was discharged back to the home with no changes or follow up scheduled."</p> <p>On 3/10/21, "R4 became upset when R2 took his hand-held game. R4 then hit R2 in the back with a closed fist."</p> <p>On 4/18/21, "R2 documents an individual was pinched on his arm by R2. Individual then punched R2 with a closed fist in the jaw."</p> <p>On 4/27/21, "An individual became upset after R2 was talking loudly about peers. The individual then hit R2 on his head and on his right shoulder."</p> <p>There is no evidence of R2's behavior being documented on BERs to review and monitor behaviors for patterns and trends of abuse.</p> <p>Review of HRC Meeting Minutes for R2:</p> <p>On 1/13/21, R2's HRC documents, "In October 2021, R2 had 0 incidents of Physical Aggression, 15 incidents of Verbal Aggression, 10 incidents of Repetitive Statements and 32 incidents of Loud Tone. In November 2021, R2 had 0 incidents of Physical Aggression, 26 incidents of Verbal Aggression, 5 incidents of Repetitive Statements</p>	Z9999		

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Z9999	<p>Continued From page 10</p> <p>and 8 incidents of Loud Tone. In December 2021, R2 had 0 incidents of Physical Aggression, 51 incidents of Verbal Aggression, 33 incidents of Repetitive Statements and 55 incidents of Loud Tone."</p> <p>On 4/13/21, R2's HRC documents, "In January 2021, R2 had 1 incident of Physical Aggression, 8 incidents of Verbal Aggression, 15 incidents of Repetitive Statements and 5 incidents of Loud Tone. In February 2021, R2 had 0 incidents of Physical Aggression, 6 incidents of Verbal Aggression, 5 incidents of Repetitive Statements and 1 incident of Loud Tone. In March 2021, R2 had 0 incidents of Physical Aggression, 7 incidents of Verbal Aggression, 20 incidents of Repetitive Statements, and 3 incidents of Loud Tone."</p> <p>On 7/14/21, R2's HRC documents, "In April 2021, R2 had 1 incident of Physical Aggression, 8 incidents of Verbal Aggression, 15 incidents of Repetitive Statements and 5 incidents of Loud Tone. In May 2021, R2 had 0 incidents of Physical Aggression, 6 incidents of Verbal Aggression, 5 incidents of Repetitive Statements and 1 incident of Loud Tone. In June 2021, R2 had 0 incidents of Physical Aggression, 7 incidents of Verbal Aggression, 20 incidents of Repetitive Statements, and 3 incidents of Loud Tone."</p> <p>Review of R2's Psychiatric Consultation on 6/8/21, documents in part, "Recommendations: Increase Zoloft to 150 mg, switch night time administration. Increase Seroquel to 200 mg at bedtime. Call in 2 weeks if no improvement will go up further (on sleep and mood). Continue Lithium 300 mg ER (extended release) in the morning and 600 mg at bedtime. Seroquel 50 mg</p>	Z9999		

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Z9999	<p>Continued From page 11</p> <p>in the morning and at 4:00 PM."</p> <p>Review of R2's Psychiatric Consultation on 8/2/21, documents in part, "Recommendations: Counseling biweekly-office to call. Increase Seroquel to 400 mg daily at bedtime. 1 Month follow up."</p> <p>There is no evidence the psychiatrist had accurate information with the lack of BERs or tracking of R2's behavior's to increase R2's behavior modifying medication.</p> <p>In an interview with E1, Residential Service Director (RSD), 8/12/21, at 12:09 PM, E1 (RSD) was asked how facility monitors for patterns and trends? E1 (RSD) stated "it comes from the tracking sheets." E1 (RSD) was asked to provide tracking sheets, but was unable to produce any. E1/RSD was asked if there were any BERs on R2? E1 stated, "Only the one I sent for 4/20/21. E1 stated, "They are supposed to document on the tracking sheets and BERs." E1 was asked where is the data coming from that is used for the Human Rights Committee meetings and the Psychiatric consults? E1 stated, "It comes from the tracking sheets." E1 was asked if there are any IDT team meetings held for R2 per policy after 3 incidents? E1 stated, "No" E1 was asked how R2 had the same data for the HRC meeting in April and July of 2021? E1 stated, "That might have been an error on my end."</p> <p>There is no evidence the behavior documentation presented at HRC's was accurate and tracking patterns and trends to prevent abuse and neglect to other individuals residing at the facility.</p> <p>3) Observations on 8/4/21 from 6:00 AM-7:30 AM, R2 was in the kitchen to eat breakfast. R2</p>	Z9999		

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Z9999	<p>Continued From page 12</p> <p>talked constantly in a very loud tone all through breakfast. R2 was verbally aggressive/argumentative toward R11 and R9. R2 told R11 to shut up and don't talk to us. R2 was yelling across the room at R9 disputing a statement R9 had made about a staff person being like their mother. E4/Direct Service Personnel and E5/Cook/DSP were working. E4 and E5 were not observed to implement R2's behavior interventions for Verbal Aggression, Repetitive Statements or Loud Tone.</p> <p>There was no evidence of interventions for R2 to lower his voice and remind him to speak appropriately to other individuals.</p> <p>In an interview with with E1, RSD on 8/5/21 at 11:31 AM, E1 was asked did staff fill out any behavior tracking reports for yesterday? E1 stated "no".</p> <p>Facility could provide no evidence of documented behaviors for R2.</p> <p>4) Facility Policy "Medication Administration Delegation to Authorized Direct Care Staff 116.40" REV 07/12/2014, page 3, #12, documents "On - going Supervision which is defined as an active process, in which the Registered Professional Nurse monitors, directs, guides, and evaluates the outcomes of and activity, or task. The registered nurse maintains the accountability for the tasks and responsibility as sub components of total patient care, delegated to qualified competent authorized personnel.</p> <p>On 8/4/21 surveyors went into the dining area at 0600 AM. Surveyor's observed medicine cups with no identification markers on the table by</p>	Z9999		

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STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6013346	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 08/19/2021
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NAME OF PROVIDER OR SUPPLIER HARRIS PLACE	STREET ADDRESS, CITY, STATE, ZIP CODE 209 HARRIS ROAD EAST PEORIA, IL 61611
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Z9999	<p>Continued From page 13</p> <p>each plate with medicine in them. R11 was sitting at the table eating and drinking his coffee. R2 arrived at 6:05 sat at R11's table. R10 came into the room at 6:08 AM and sat at the table. E3, Direct Support Personnel (DSP) and E4, DSP were in and out of the dinning room. At 6:15 AM R10 was told by E3, DSP to take her liquid medication, R4 arrived took medicine from cup next to his plate independently. At 6:20 AM R5 and R9 arrived for breakfast and they independently took medication next to plate. At 6:25 AM, R7 is in the dinning room he took the medication in front of his plate independently. At 6:30 AM R2 still has not taken medication by his plate. R6 arrives in dinning room per wheelchair, E3, DSP is in dinning room and hands R6 her cup of medication. R6 takes medication whole with water. At 6:46 AM R8, and R12 arrives at the table. E3, DSP took R8's plate to reheat it and R8 takes her medicine in the cup, by her plate, independently.</p> <p>There is no evidence of medication programs and training be conducted at the 7AM med pass.</p> <p>Observation on 8/4/21 at 4:25 PM, R2 came into dinning room for medication pass. R2 saw the card E5, DSP, was holding and said "oh we are going back to this way, ok."</p> <p>1. R2's POS, dated 8/2021, R2 receives the following medications at 7:00 AM: Purelax/Miralax 17 gms in 4-8 oz of liquid daily for Bowel Management. Allopurinol 300 mg's daily for Gout. Ferrous Sulfate 325 mg daily for Sickle-Cell Disease. Lithium 300 mg's daily for Schizophrenia. Docusate 100 mg's twice daily for bowel management. Lisinopril 5 mg's twice a day for Hypertension.</p>	Z9999		

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Z9999	<p>Continued From page 14</p> <p>Senna 8.6 mgs twice daily for Bowel management. Seroquel 50 mgs twice daily for Schizophrenia.</p> <p>2. R4's POS, dated 8/2021, R4 receives the following medications at 7:00 AM: Lisinopril 10 mg's daily for Hypertension. Seroquel 100 mg's daily for Bipolar Disorder. Oyster Shell/Vit D 500 mg/200 units for Supplement Docusate 100mg twice a day for Bowel Management</p> <p>3. R5's POS, dated 8/2021, R5 receives the following medications at 7:00 AM: Vitamin C 500 mg's daily for Anemia. Aspirin 81 mg daily for Cardiac Prevention. Reguloid Orange Powder dissolve 5ml in liquid and take by mouth daily for Bowel Management. Valsart/HCTZ tab 320-25 mg daily for Hypertension. Propranolol 60mg's ER, daily "Check Pulse" daily hold if pulse <55 for Hypertension. Pot CL Micro Tab 20 MeQ ER daily for Supplement. Zoloft 50 mg's daily for Depression. Melformin 500 mg's daily with meal for Diabetes Oyster Shell/Vit D 500mg/200units twice daily for Osteoporosis. Baclofen 10mg's three times daily for Contractures.</p> <p>4. R6's POS, dated 8/2021, R6 receives the following medications at 7:00 AM: Vitamin D3 25mcg daily for Osteoporosis. Multivitamin daily for Supplement Linzess 72 mcg daily dispense in original container Amlodipine 15mg daily for Hypertension. Oyster Shell/Vit D 500mg/200 U twice daily for</p>	Z9999		

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Z9999	<p>Continued From page 15</p> <p>Low Calcium</p> <p>5. R7's POS, dated 8/2021, R7 receives the following medications at 7:00 AM: One a day men's daily for Supplement. Vitamin C 500 mg's daily for Supplement. Flomax 0.4 mg's daily "30 minutes following same meal each day" for elevated PSA.</p> <p>6. R8's POS, dated 8/2021, R8 receives the following medications at 7:00 AM: Psyllium 15 ml's in 8oz of water daily for Bowel Management. Atorvastatin 10 mg's daily for Hypercholesterolemia. Zestoretic 20-25 mg's daily for Hypertension. Calcium 500 mg/Vit D400IU twice daily for Osteoporosis.</p> <p>7. R9's POS, dated 8/2021, R9 receives the following medications at 7:00 AM: Levothyroxine 175 mcg's daily on an empty stomach for Hypothyroidism. Lexapro 10 mg's daily for Depression/Bipolar Disorder. Trileptal 300 mg's three times daily for Bipolar Disorder.</p> <p>9. R10's POS, dated 8/2021, R10 receives the following medications at 7:00 AM: Therapeutic - tab M/Lutein daily for Supplement. Lexapro 20 mg's daily for Depression Synthroid 75 mcg daily for Hypothyroidism Folic Acid 1 mg daily for Supplement Oxybutynin 5 mg's daily for Bladder Spasm Lasix 60 mg's twice daily (AM & Noon) for CKD Valproic ACD SOL 250/5ml give 20 mls twice daily for Seizures. Vimpat 200 mg's twice daily for Seizures. Oyster Shell/Vit D 500 mg/200U three times a day</p>	Z9999		

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Z9999	<p>Continued From page 16</p> <p>Supplement</p> <p>10. R11's POS, dated 8/2021, R11 receives the following medications at 7:00 AM: Aspirin 325 mg's daily for Cardiac Prevention Linzess 145 mcg 1 cap daily for Chronic Constipation Lisinopril 10 mg's daily "hold if SBP <100 for Hypertension Prilosec 20 mg's daily for GERD Flomax daily at 7:30 AM for BPH Oyster Shell 500 mg's twice daily for Calcium Supplement Eye Health Lutein twice daily for Supplement.</p> <p>11. R12's POS, dated 8/2021, R12 receives the following medications at 7:00 AM: Aspirin 81 mg's daily for Cardiac Protection Patanol 0.1% instill 1 drop in each eye daily for Conjunctivitis Lisinopril 40 mg's daily for Hypertension Synthroid 75 mcg daily for Hypothyroidism Lexapro 20 mg's daily for Depression Eye Health Tab Lutein twice daily for Supplement Calcium/D3 600-10 twice daily for Calcium Supplement</p> <p>In review of Self Administration of Medication Assessments (SAMA) for all individuals in the facility indicate R1-R12 are not independent in taking medications.</p> <p>There is no evidence the facility is ensuring the individuals are receiving the correct medications as ordered.</p> <p>In an interview with E3, DSP, on 8/4/21, at 6:00 AM, E3 (DSP) was asked why medications are in the cups on the table? E3, DSP, stated "Usually I work alone so to get it done I just do it this way."</p>	Z9999		

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Z9999	Continued From page 17 In an interview with E2, Registered Nurse Trainer (RNT) on 8/4/21, at 11:12 AM, E2, RNT confirmed they are not suppose to do it like that and leave medication unattended. (B)	Z9999		