STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	IL6004733	A. BUILDING: ______ B. WING ______	C 03/11/2020

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
SYMPHONY OF LINCOLN PARK	**1366 WEST FULLERTON AVENUE CHICAGO, IL 60614**

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
S 000	Initial Comments Complaint Investigation 2081644/IL120661	S 000		
S9999	Final Observations Statement of Licensure Violations 300.610a) 300.1210b) 300.1210d)1) 300.1210d)2) 300.3240a) Section 300.610 Resident Care Policies a) The facility shall have written policies and procedures governing all services provided by the facility. The written policies and procedures shall be formulated by a Resident Care Policy Committee consisting of at least the administrator, the advisory physician or the medical advisory committee, and representatives of nursing and other services in the facility. The policies shall comply with the Act and this Part. The written policies shall be followed in operating the facility and shall be reviewed at least annually by this committee, documented by written, signed and dated minutes of the meeting. Section 300.1210 General Requirements for Nursing and Personal Care b) The facility shall provide the necessary care and services to attain or maintain the highest practicable physical, mental, and psychological well-being of the resident, in accordance with each resident's comprehensive resident care	S9999	Attachment A Statement of Licensure Violations	

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plan. Adequate and properly supervised nursing care and personal care shall be provided to each resident to meet the total nursing and personal care needs of the resident.

d) Pursuant to subsection (a), general nursing care shall include, at a minimum, the following and shall be practiced on a 24-hour, seven-day-a-week basis:

1) Medications, including oral, rectal, hypodermic, intravenous and intramuscular, shall be properly administered.

2) All treatments and procedures shall be administered as ordered by the physician.

Section 300.3240 Abuse and Neglect

a) An owner, licensee, administrator, employee or agent of a facility shall not abuse or neglect a resident. (Section 2-107 of the Act)

These Requirements are not met as evidenced by:

Based on interview and record review, the facility failed to ensure correct administration of medications for two (R3, R5) of four residents reviewed for medication administration. This deficient practice resulted in R3's emergent transfer to a local hospital with cardiac implications that required hospitalization for close monitoring.

Findings include:

R3's Admission Record documents the following medical diagnoses: Stiffness of Right Shoulder, Dysphagia, Dyskinesia, Chronic Obstructive

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Pulmonary Disease, Hypertensioin, Osteoarthritis and Dementia.
R3's diagnoses do not include any history of irregular heart beat, arrhythmia or atrial fibrillation.

R3's MDS (Minimum Data Set) dated 1/15/2020 documents that R3 is severely cognitively impaired. R3 could not be interviewed.

The Census List documents that R3 was admitted to the facility as 11/27/17 and indicates that R3 was transferred to a local hospital on 6/28/19.

R3's Progress Note dated 6/28/19 at 1:15 am and authored by V7 (Licensed Practical Nurse) reads: "Resident received medication other than the medications prescribed by MD (Medical Doctor)." This note documents that V8 (Physician) was called with an order to transfer resident to a local hospital for medical evaluation. A facility incident report subtitled "Medication Error" and dated 6/27/19 reiterates that R3 was administered the wrong medication.

R3's Physician Order Sheet (POS) and Medication Administration Record (MAR) dated June 2019 document that R3 was to due to receive the following medications on the evening shift of 6/27/19: Atorvastatin Calcium 20 mg (milligrams), Senna S 8.6 mg - 50 mg and Singulair 10 mg. Instead, R3 received medications that were not ordered by V8.

R3's Hospital Record dated 6/28/19 documents a note authored by V12 (Hospital Cardiologist) that reads: "Allergic Reaction: patient sent from NH (nursing home) due to her being given a Keflex tab around 2100 (9:00pm) which was not for her, she has a history of (Penicillin) allergy." This note

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continues to document that R3 mistakenly received Keflex 500 mg, Dextromethorphan-Quinidine (20 mg/10 mg) and one dose of Seroquel 100 mg. The note reads: "Brought to ER (emergency room) and admitted to telemetry for observation given the potential for QT prolongation." "Concern was raised about the interaction between the quinidine and the Seroquel."

R3's hospital note documented: "EKG's were suggestive of significant prolongation of the QT interval. For this reason a cardiology consultation was obtained and (R3) was observed an extra day." According to R3's history, the EKG from 6/28/19 had changes when compared to an EKG dated 10/17/2012. The hospital plan was to continue cardiac management, monitor blood pressure closely, continue telemetry monitoring and repeat EKG's every six hours.

It was noted that the Dextromethorphan/Quinidine, Seroquel and Keflex medications that were mistakenly given to R3 were ordered to be administered to R5. R5's POS documented an order dated 12/21/18 which read, "Give Keflex 500 mg every 12 hours indefinitely for suppression due to infected prosthesis." This POS also documents medication orders for Dextromethorphan/Quinidine 20mg/10mg and Seroquel 100 mg.

V8 (Medical Doctor/R3's Primary Doctor) was not available for interview.

On 3/10/2020 at 11:10am, V9 (Cardiologist) stated, "The combination of Seroquel and Nuedexta (Dextromethorphan/Quinidine), especially when given with antibiotics, can cause

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QT wave to be prolonged. It is an adverse reaction. It requires monitoring of the QT wave by EKG. If QT prolonged, it can lead to an arrhythmia or an abnormal heart rhythm."

On 3/11/2020 at 1:26 pm, V13 (Pharmacy Manager) stated, "Cardiac implication with Nuedexta and Seroquel and Keflex when given in combination. QT prolongation between Seroquel and Nuedexta can cause a severe interaction. If this is a brand new combination (of medications) for a resident, it would put a resident at a higher risk versus someone that's been on the medications for number of years. Also if brand new meds for patient, would let facility know to monitor QT status."

A facility policy dated May 27, 2011 and titled, "8 rights of medication administration" documents: 1. Right patient - Check the name on the order and the patient. Use 2 identifiers. Ask patient to identify himself/herself. 2. Right medication - Check the medication label. Check the order 3. Right dose

A facility policy dated 7/14 and titled, "Medication Administration" documents: GENERAL: All medications are administered safely and appropriately to aid residents to overcome illness, relieve and prevent symptoms and help in diagnosis. GUIDELINE: 1. An order is required for administration of all medications. 5. Check medication administration record prior to administering medication for the right medication, dose, route, patient and time. 15. Identify resident using two resident identifiers.

(B)