

Illinois Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6004212	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 05/10/2023
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NAME OF PROVIDER OR SUPPLIER ILLINI HERITAGE REHAB & HC	STREET ADDRESS, CITY, STATE, ZIP CODE 1315 CURT DRIVE, SUITE B CHAMPAIGN, IL 61821
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(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 # 2363602/IL159331 Complaint # 2363649/IL159393	S 000		
S9999	Final Observations Statement of Licensure Violations (1 of 2) 300.610a) 300.1010h) 300.1210a) 300.1210b) 300.1210d)2)3) 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 300.1010 Medical Care Policies h) The facility shall notify the resident's physician of any accident, injury, or significant change in a resident's condition that threatens the health, safety or welfare of a resident, including, but not limited to, the presence of incipient or manifest decubitus ulcers or a weight loss or gain	S9999		

Illinois Department of Public Health LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X8) DATE
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S9999	<p>Continued From page 1</p> <p>of five percent or more within a period of 30 days. The facility shall obtain and record the physician's plan of care for the care or treatment of such accident, injury or change in condition at the time of notification.</p> <p>Section 300.1210 General Requirements for Nursing and Personal Care</p> <p>a) Comprehensive Resident Care Plan. A facility, with the participation of the resident and the resident's guardian or representative, as applicable, must develop and implement a comprehensive care plan for each resident that includes measurable objectives and timetables to meet the resident's medical, nursing, and mental and psychosocial needs that are identified in the resident's comprehensive assessment, which allow the resident to attain or maintain the highest practicable level of independent functioning, and provide for discharge planning to the least restrictive setting based on the resident's care needs. The assessment shall be developed with the active participation of the resident and the resident's guardian or representative, as applicable. (Section 3-202.2a of the Act)</p> <p>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 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.</p> <p>d) Pursuant to subsection (a), general nursing care shall include, at a minimum, the following and shall be practiced on a 24-hour,</p>	S9999		
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S9999	<p>Continued From page 2</p> <p>seven-day-a-week basis:</p> <p>2) All treatments and procedures shall be administered as ordered by the physician.</p> <p>3) Objective observations of changes in a resident's condition, including mental and emotional changes, as a means for analyzing and determining care required and the need for further medical evaluation and treatment shall be made by nursing staff and recorded in the resident's medical record.</p> <p>These Requirements were not met as evidenced by:</p> <p>Based on observation, interview, and record review the facility failed to transcribe and implement physician orders for wound and pressure sore treatments and failed to update a pressure sore care plan for 2 of 4 residents (R6, R7) reviewed for wound care in a sample list of 11 residents. These failures resulted in R6's pressure sores deteriorating and R7's wounds deteriorating and R7 experiencing increased swelling and severe pain when staff failed to follow physician orders to wrap R7's legs/wounds.</p> <p>Findings include:</p> <p>1. R6's Medical Record documents medical diagnoses of Decubitus Ulcers, Multiple Sclerosis, Chronic Kidney Disease, Venous Insufficiency, Muscle Weakness, Obstructive Sleep Apnea and Needs Assistance with Personal Care.</p>	S9999		

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S9999	<p>Continued From page 3</p> <p>R6's Minimum Data Set (MDS) dated 2/14/23 documents R6 as cognitively intact. This same MDS documents R6 requires limited assistance of one person for bed mobility, extensive assistance of one person for dressing, toileting and personal hygiene and total dependence of two people for transfers.</p> <p>R6's Pressure Ulcer Risk Assessment dated 1/26/23 documents R6 as high risk for pressure ulcers.</p> <p>R6's Care Plan did not include updated pressure ulcer interventions for R6's Pressure Ulcers.</p> <p>R6's Wound Evaluation and Management Summary (WEMS) dated 5/3/23 documents physician orders of Calcium Alginate covered with absorbent pad twice daily for R6's Right Upper Medial Ischium Stage 4 Pressure Ulcer, Left Buttock Stage 4 Pressure Ulcer, Right Upper Thigh Stage 3 Pressure Ulcer, Right Buttock Stage 3 Pressure Ulcer, and Calcium Alginate with absorbent pad twice weekly for R6's Right Calf Stage 3 Pressure Ulcer, Left Upper Calf Stage 3 Pressure Ulcer and Left Lower Calf Stage 3 Pressure Ulcer.</p> <p>R6's Physician Order Sheet (POS) dated May 1-31, 2023, does not document V22 Wound Physician ordered treatments for R6's Pressure Ulcers to Right Ischium, Left Buttock, Right Upper Thigh, Right Buttock, Right Calf, Left Upper Calf and Left Lower Calf.</p> <p>R6's Treatment Administration Record (TAR) dated May 1-31, 2023, does not document V22 Wound Physician ordered treatments for R6's Pressure Ulcers to Right Ischium, Left Buttock, Right Upper Thigh, Right Buttock, Right Calf, Left</p>	S9999		
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S9999	<p>Continued From page 4</p> <p>Upper Calf and Left Lower Calf.</p> <p>On 5/9/23 at 11:35 PM V21 Licensed Practical Nurse (LPN) provided wound care for R6's Pressure Ulcers. R6's Right Upper Medial Ischium Stage 4 Pressure Ulcer was open with approximately 50% covered with black soft tissue. R6's dressing was saturated with a moderate amount of yellow and brown foul-smelling drainage. The peri-wound area was dark red and non-blanchable. R6's Left Buttock Stage 4 Pressure Ulcer had soft black center with yellow soft edges surrounded by open dark red tissue with moderate yellow and brown drainage. R6's Left Upper Lateral Calf Stage 3 Pressure Ulcer was dark brown with red soft tissue with copious amount of very foul, dark brown drainage. R6's prior dressing of Calcium Alginate and bordered foam was black, slimy and slid off of R6's leg as V21 LPN removed the outer drainage-soaked gauze wrap. R6's room had foul odor from infected wounds throughout dressing changes. R6's Sacrum had a softball sized, open, dark brown and red wound with moderate amount of brown and yellow drainage. This same wound was dressed with Calcium Alginate covered by silk tape that was adhered to R6's Sacrum, covered by an absorbent pad. R6's Coccyx had been packed with gauze. R6's coccyx was open with approximately an inch of depth revealing muscle tissue and a dime sized white firm area in the center.</p> <p>On 5/9/23 at 12:00 PM V21 Licensed Practical Nurse (LPN) stated "(R6) has two new wounds on his Sacrum and Coccyx that are not documented in (V22's) Wound Physician notes from 5/3/23. Those wounds must be new. (R6's) wounds smelled horrible. I about had to leave the room. They have really gotten bad. I didn't know they</p>	S9999		
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S9999	<p>Continued From page 5</p> <p>were that bad. I checked the orders before changing the dressings but (R6's) wound orders were not on the POS or TAR so I just followed the orders on (V22's) Wound Physician progress notes. Those orders should be written on the POS and the TAR, so the nurses know to change the dressings. It is no wonder they smelled so bad."</p> <p>On 5/9/23 at 2:00 PM V1 Administrator stated "(R6's) physician orders from (V22) Wound Physician should have been transcribed to (R6's) POS and TAR. I am saddened to see that my staff has failed so terribly. (R6) deserves to have the best care possible and he did not receive that here (facility). It breaks my heart to know that (R6) now has more significant Pressure Ulcers beyond those that were already there. We (facility) did not do the treatments, we failed to transcribe the orders, didn't update the care plan and most of all we failed (R6). My facility has to do better than that or we (facility) will never survive."</p> <p>On 5/10/23 at 10:00 AM V22 Wound Physician stated "This facility definitely caused harm to (R6) by not dressing all of his wounds as ordered. There is no continuity in staffing, so the orders never get processed. There have been several Administrators here and a few Director of Nurses (DON). One time I am here (facility) and talk to one person about the wound program and the next time it is someone else. No one knows what is going on here (facility) because no one want to take responsibility for the care of the residents. I even asked the floor nurse one day if she wanted access to the online wound program physician notes so the orders could be printed off and she told me she 'didn't want to do all that'. It is that attitude that I see here (facility). (R6's) wounds</p>	S9999		
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S9999	<p>Continued From page 6</p> <p>could have been doing better but there is no continuity in care." V22 Wound Physician stated residents have voiced to V22 that V22 is the only person who changes the resident dressings. V22 stated "(R6) has had pressure ulcers that have healed. (R6) definitely has the ability to heal. If the facility would start doing the treatments as ordered, then maybe new wounds wouldn't keep showing up."</p> <p>2. R7's Medical Record documents medical diagnoses of Morbid Obesity, Diabetes Mellitus Type II, Chronic Kidney Disease, Macular Degeneration, Neuropathy, Lymphademic wounds of Right Lower Leg and Left Lower Leg.</p> <p>R7's Minimum Data Set (MDS) dated 3/21/23 documents R7 as moderately cognitively impaired. This same MDS documents R7 as requiring limited assistance of one person for bed mobility, transfers, and extensive assistance of one person for dressing, toileting, and personal hygiene.</p> <p>R7's Care Plan documents an intervention dated 9/18/22 that instructs staff to treat Lymphademic wounds as ordered.</p> <p>R7's Wound Evaluation and Management Summary dated 5/3/23 documents R7's Lymphademic wound of Right Leg with partial thickness measuring 40 centimeters (cm) long by 16.5 cm wide by not measurable depth and Lymphademic wound of Left leg partial thickness measuring 40 cm long by 17 cm wide by not measurable depth. This same Summary documents physician orders to wrap both Right and Left leg Lymphademic wounds from ankles to knees with gauze wrap and elastic wrap twice per</p>	S9999		
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S9999	<p>Continued From page 7</p> <p>week for 30 days.</p> <p>R7's Weekly Wound Tracking Sheet dated 5/3/23 documents R7's Lymphadema wound on Right Leg measuring 40 cm long by 16.5 cm wide by non-measurable length with no drainage, no odor as new wound and Lymphadema wound on Left Leg measuring 40 cm long by 17 cm wide by not measurable with no drainage, no odor as new wound.</p> <p>R7's Physician Order Sheet (POS) dated May 1-31, 2023, does not document V22 Wound Physician orders to apply gauze wraps from ankles to knees and cover with elastic gauze wraps twice per week.</p> <p>R7's Treatment Administration Record (TAR) dated May 1-31, 2023, does not document V22 Wound Physician orders to apply gauze wraps from ankles to knees and cover with elastic gauze wraps twice per week.</p> <p>R7's Nurse Progress Notes do not document R7's Lymphadema wound dressings to Right and Left Lower Legs. These same progress notes do not document notification to Physician of treatments not being completed as ordered.</p> <p>On 5/6/23 at 1:00 PM, R7's bilateral lower legs and feet had no dressings in place. R7's Right and Left Lower legs had open areas with a moderate amount of yellow drainage. R7's wound drainage was observed on R7's legs and on R7's bed sheets.</p> <p>On 5/7/23 at 9:30 AM, R7's bilateral lower legs and feet had no dressings in place. R7's Right and Left Lower legs had open areas with a moderate amount of yellow/brown drainage.</p>	S9999		
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S9999	<p>Continued From page 8</p> <p>On 5/9/23 at 1:15 PM, R7's bilateral lower legs and feet had no dressings in place. R7's Right and Left Lower legs had open areas with a moderate amount of yellow/brown drainage. R7's wound drainage was observed on R7's legs and on R7's bed sheets.</p> <p>On 5/6/23 at 1:05 PM, R7 stated "A week ago Friday (4/28/23) was the last day I was asked to get a shower. Someone cut off my dressings that day but then I didn't get my shower because I started not feeling well. No one has even offered to put them on since then (4/28/23) except (V22) Wound Physician. I know (V22) Wound Physician gave orders for them (staff) to wrap my legs because of my Lymphadema in both lower legs. My legs have been so swollen and painful since they (facility) are not doing their job. I ask the nurses to wrap them, and they (staff) say they will but it never gets done. The pain isn't quite so bad when they are wrapped due to the compression. I just can't stand the pain."</p> <p>On 5/10/23 at 10:00 AM, V22 Wound Physician stated "This facility definitely caused harm to (R7) by not dressing her Lymphademic wounds as ordered. There is no continuity in staffing so the orders never get processed. There have been several Administrators here and a few Director of Nurses (DON). One time I am here (facility) and talk to one person about the wound program and the next time it is someone else. No one knows what is going on here (facility) because no one wants to take responsibility for the care of the residents. I even asked the floor nurse one day if she wanted access to the online wound program physician notes so the orders could be printed off and she told me she 'didn't want to do all that'. It is that attitude that I see here (facility). (R7's)</p>	S9999		

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S9999	<p>Continued From page 9</p> <p>wounds could have been doing better but there is no continuity in care." V22 Wound Physician stated R7 has voiced to V22 that V22 is the only person who changes the resident dressings. V22 stated "(R7) has these wounds that come and go. When I was here on 5/3/23, I resolved (R7's) other wounds and found two more. Now this week those two have gotten worse. I have seen (R7) before without the dressings in place. If the facility would stay on top of the treatment orders and complete the dressings (R7's) Lymphademic wounds on her lower legs might heal up and stay healed. (R7) has a lot going against her but it certainly doesn't help when the facility isn't completing the treatments I order."</p> <p>The facility policy titled 'Conformance with Physician Orders' reviewed 9/27/17 documents the facility must maintain a complete and accurate listing of current orders on the resident's Physician Order Sheet (POS).</p> <p>The facility policy titled 'Dressing Change' reviewed 3/16/23 documents Licensed Personnel should document dressing changes in nurse progress notes.</p> <p style="text-align: center;">(B)</p> <p>Statement of Licensure Violations (2 of 2)</p> <p>300.610a) 300.1610a)1) 300.1620a) 300.1620e) 300.1630d)</p> <p>Section 300.610 Resident Care Policies</p> <p>a) The facility shall have written policies and</p>	S9999		
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S9999	<p>Continued From page 10</p> <p>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.</p> <p>Section 300.1610 Medication Policies and Procedures</p> <p>a) Development of Medication Policies</p> <p>1) Every facility shall adopt written policies and procedures for properly and promptly obtaining, dispensing, administering, returning, and disposing of drugs and medications. These policies and procedures shall be consistent with the Act and this Part and shall be followed by the facility. These policies and procedures shall be in compliance with all applicable federal, State and local laws.</p> <p>Section 300.1620 Compliance with Licensed Prescriber's Orders</p> <p>a) All medications shall be given only upon the written, facsimile, or electronic order of a licensed prescriber. The facsimile or electronic order of a licensed prescriber shall be authenticated by the licensed prescriber within 10</p>	S9999		
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S9999	<p>Continued From page 11</p> <p>calendar days, in accordance with Section 300.1810. All orders shall have the handwritten signature (or unique identifier) of the licensed prescriber. (Rubber stamp signatures are not acceptable.) These medications shall be administered as ordered-by the licensed prescriber and at the designated time.</p> <p>e) The resident's licensed prescriber shall be notified of medications about to be stopped so that the licensed prescriber may promptly renew such orders to avoid interruption of the resident's therapeutic regimen.</p> <p>Section 300.1630 Administration of Medication</p> <p>d) If, for any reason, a licensed prescriber's medication order cannot be followed, the licensed prescriber shall be notified as soon as is reasonable, depending upon the situation, and a notation made in the resident's record.</p> <p>These Requirements were not met as evidenced by:</p> <p>Based on observation, interview and record review the facility failed to administer multiple doses of antibiotic and antianxiety medication as ordered by the physician for two of three residents (R6 and R4) reviewed for medication administration in a sample list of 11 residents. Failing to administer R6's antibiotic therapy resulted in R6's stage four Ischium pressure sore deteriorating.</p>	S9999		
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STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: IL6004212	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 05/10/2023
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NAME OF PROVIDER OR SUPPLIER ILLINI HERITAGE REHAB & HC	STREET ADDRESS, CITY, STATE, ZIP CODE 1315 CURT DRIVE, SUITE B CHAMPAIGN, IL 61821
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(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
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S9999	<p>Continued From page 12</p> <p>1.) R6's Minimum Data Set (MDS) dated 2/14/23 documents R6 as cognitively intact.</p> <p>R6's Wound Evaluation and Management Summary (WEMS) dated 5/3/23 documents a physician order for Levofloxacin (Levaquin) 750 milligrams (mg) daily for fourteen days starting 5/3/23 and Clindamycin 300 mg three times per day for fourteen days starting 5/3/23 for a Right Upper Medial Ischium Stage 4 Pressure Ulcer infection.</p> <p>R6's Physician Order Sheet (POS) and Medication Administration Record (MAR) dated May 2023 does not document R6's physician orders for Levaquin or Clindamycin.</p> <p>R6's Medical Record documents a total of eight missed doses of Levaquin and 20 missed doses of Clindamycin.</p> <p>On 5/9/23 at 11:35 AM V21 Licensed Practical Nurse (LPN) provided wound care to R6's Pressure Ulcers. R6's Right Ischium Pressure Ulcer was open with approximately 50% covered with black soft tissue. R6's dressing was saturated with moderate amount of yellow and brown foul-smelling drainage. The peri-wound of this area was dark red and non-blanchable. R6's Left Buttock Stage 4 Pressure Ulcer had soft black center with yellow soft edges surrounded by open dark red tissue with moderate yellow and brown drainage. R6's Left Upper Lateral Calf Stage 3 Pressure Ulcer was dark brown and red soft tissue with copious amount of very foul, dark brown drainage. R6's prior dressing of Calcium Alginate and bordered foam was black, slimy and slid off of R6's leg as V21 LPN removed outer gauze wrap. R6's room had foul odor from</p>	S9999		
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NAME OF PROVIDER OR SUPPLIER ILLINI HERITAGE REHAB & HC	STREET ADDRESS, CITY, STATE, ZIP CODE 1315 CURT DRIVE, SUITE B CHAMPAIGN, IL 61821
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S9999	<p>Continued From page 13</p> <p>infected wounds throughout dressing changes.</p> <p>On 5/9/23 at 2:30 PM R6's medication supply was observed and did not include Levaquin nor Clindamycin.</p> <p>On 5/9/23 at 2:35 PM the facility Emergency Kit (E-Kit) was observed to contain Levaquin and Clindamycin.</p> <p>On 5/9/23 at 12:00 PM V21 Licensed Practical Nurse (LPN) stated "(R6's) wounds smelled horrible. I about had to leave the room. They have really gotten bad. I didn't know they were that bad. You can tell they are really infected."</p> <p>On 5/9/23 at 3:00 PM V25 Pharmacist stated the pharmacy has not received any physician orders for R6's Levaquin and Clindamycin antibiotics.</p> <p>On 5/10/23 at 10:00 AM V22 Wound Physician stated the facility caused harm to R6 by not providing antibiotic therapy due to R6's Right Ischium Pressure Ulcer had deteriorated. V22 stated "No one knows what is going on here (facility) because no one wants to take responsibility for the care of the residents. Unfortunately it is the residents that suffer for the lack of care."</p> <p>2.) R4's Minimum Data Set (MDS) dated 4/17/23 documents R4 as moderately cognitively impaired.</p> <p>R4's Physician Order Sheet (POS) dated May 1-31, 2023 documents a physician order of Xanax 1.0 milligram (MG) twice daily for Anxiety.</p> <p>R4's Medication Administration Record (MAR)</p>	S9999		
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NAME OF PROVIDER OR SUPPLIER ILLINI HERITAGE REHAB & HC	STREET ADDRESS, CITY, STATE, ZIP CODE 1315 CURT DRIVE, SUITE B CHAMPAIGN, IL 61821
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S9999	<p>Continued From page 14</p> <p>dated May 1-31, 2023 documents R4's Xanax was not administered from 5/2/23-5/10/23 for a total of 14 missed doses.</p> <p>R4's Medical Record does not document notification to (V26) Physician from 5/2/23-5/10/23 for R4's missed doses of Xanax.</p> <p>On 5/6/23 at 9:20 AM the medication cart locked medication storage area did not have R4's Xanax nor Narcotic Administration count sheet to match.</p> <p>On 5/5/23 at 3:15 PM R4 stated with tears rolling down her cheeks "Please help them (facility) get me my Xanax. I have terrible Anxiety. I just cry all the time if I don't have it. They (facility) were giving it to me and now they aren't. I really need it."</p> <p>On 5/6/23 at 9:30 AM V17 Licensed Practical Nurse (LPN) stated "I don't have any Xanax for (R4). I don't know where it is but it is not in the cart. I will have to call pharmacy to find out what happened to it. (R4) has been asking me repeatedly for it. I know (R4's) anxiety is worse because she isn't getting it."</p> <p>On 5/9/23 at 3:00 PM V25 stated "the pharmacy dispensed a 30 day supply of (R4's) Xanax on 3/31/23. We (pharmacy) can not provide (R4's) Xanax again without a current prescription."</p> <p>On 5/9/23 at 3:30 PM V1 Administrator stated "We (facility) have been working today on getting (R4's) Xanax. (R4) has been very upset and crying more since she hasn't had it. We (facility) reached out to (V26) Physician today to ask for a renewed prescription. We (facility) haven't heard back yet. I don't know what took so long for us to attempt to contact (V26) Physician but (R4)</p>	S9999		
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S9999	Continued From page 15 should not have had any missed doses because of our (facility) error." The facility policy titled 'Medication Administration' revised 11/18/17 documents the facility is to document any medications not administered for any reason by circling initials and documenting on the back of the MAR the date, time, the medication and dosage, reason for omission and initials. If the medication is not available for a resident, call the pharmacy and notify the physician when the drug is expected to be available. Notify the physician as soon as practical when a scheduled dose of a medication has not been administered for any reason. (B)	S9999		