

GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

ORLENE HAWKS DIRECTOR

February 1, 2022

Ramon Beltran
Beacon Specialized Living Services, Inc.
Suite 110
890 N. 10th St.
Kalamazoo, MI 49009

RE: License #: AS390403155 Investigation #: 2022A0581010

Beacon Home at Ravine

Dear Mr. Beltran:

Attached is the Special Investigation Report for the above referenced facility. Due to the violations identified in the report, a written corrective action plan is required. The corrective action plan is due 15 days from the date of this letter and must include the following:

- How compliance with each rule will be achieved.
- Who is directly responsible for implementing the corrective action for each violation.
- Specific time frames for each violation as to when the correction will be completed or implemented.
- How continuing compliance will be maintained once compliance is achieved.
- The signature of the responsible party and a date.

If you desire technical assistance in addressing these issues, please feel free to contact me. In any event, the corrective action plan is due within 15 days. Failure to submit an acceptable corrective action plan will result in disciplinary action.

Please review the enclosed documentation for accuracy and contact me with any questions. In the event that I am not available and you need to speak to someone immediately, please contact the local office at (517) 284-9730.

Sincerely,

Cathy Cushman, Licensing Consultant Bureau of Community and Health Systems 611 W. Ottawa Street P.O. Box 30664 Lansing, MI 48909 (269) 615-5190

Carry Cuchman

enclosure

MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS BUREAU OF COMMUNITY AND HEALTH SYSTEMS SPECIAL INVESTIGATION REPORT

I. IDENTIFYING INFORMATION

License #:	AS390403155
Investigation #	2022A0581010
Investigation #:	2022A0361010
Complaint Receipt Date:	12/06/2021
Investigation Initiation Date:	12/07/2021
Papart Dua Data:	02/04/2022
Report Due Date:	02/04/2022
Licensee Name:	Beacon Specialized Living Services, Inc.
Licensee Address:	Suite 110
	890 N. 10th St.
	Kalamazoo, MI 49009
Licensee Telephone #:	(269) 427-8400
•	
Administrator:	Aubrey Napier
Lianna Basimaa	Danier Daltina
Licensee Designee:	Ramon Beltran
Name of Facility:	Beacon Home At Ravine
Facility Address:	6595 Ravine Road
	Kalamazoo, MI 49009
Facility Telephone #:	(269) 214-0255
r acmity relephone #.	(209) 214-0233
Original Issuance Date:	04/21/2020
License Status:	REGULAR
Effective Date	10/21/2020
Effective Date:	10/21/2020
Expiration Date:	10/20/2022
•	
Capacity:	6
Duo avena Trans.	DEVELOPMENTALLY DISABLES
Program Type:	DEVELOPMENTALLY DISABLED MENTALLY ILL
	IVILINIALLI ILL

II. ALLEGATION(S)

Violation Established?

Residents are not receiving their prescribed medication, as	Yes
required, as demonstrated by missing staff initials on resident	
Medication Administration Records.	

III. METHODOLOGY

12/06/2021	Special Investigation Intake 2022A0581010
12/07/2021	Special Investigation Initiated - Letter Email to Integrated Services of Kalamazoo Recipient Rights Officer, Michele Schiebel
12/07/2021	Referral - Recipient Rights Integrated Services of Kalamazoo is already investigating; therefore, a referral isn't necessary.
12/07/2021	Contact - Document Received Ms. Schiebel sent via email copies of eMARS.
12/07/2021	Contact - Document Received Ms. Schiebel emailed copies of two paper MARs and med attestation record.
12/14/2021	Inspection Completed On-site Interviewed staff and reviewed Medication Administration Records.
12/17/2021	Contact - Document Sent Email to facility home manager, Aubrey Napier.
12/17/2021	Contact - Telephone call made Voicemail left for Ms. Napier.
12/20/2021	Contact - Document Received Email from Ms. Napier.
01/18/2022	Exit Conference with licensee designee Ramon Beltran

ALLEGATION:

Residents are not receiving their prescribed medication, as required, as demonstrated by missing staff initials on resident Medication Administration Records.

INVESTIGATION:

On 12/06/2021, I received this complaint through the Bureau of Community Health Systems (BCHS') on-line complaint system. The complaint alleged the facility's electronic Medication Administration Records (eMARs) for August through October 2021 had "blanks" on them indicating the medications had not been administered to residents. The complaint alleged the eMARs showed the medications Ativan and Risperdal were missed more frequently and facility direct care staff members were not using paper MARs when the facility's computer was not working.

On 12/07/2021, I confirmed with Integrated Services of Kalamazoo (ISK) Recipient Rights Officer (RRO), Michele Schiebel, she had received the allegations and was investigating. Ms. Schiebel also forwarded me copies of all four ISK resident's eMARs for August, September, and October 2021 she received from the facility's NextStep program and their corresponding paper MARs.

Additionally, on 12/17/2021, I requested resident paper MARs from the facility's executive director, Aubrey Napier. On 12/20/2021, she emailed me the paper MARs from August to December 2021.

According to documentation on Resident A's generated eMAR from the facility's NextStep program for the month of August 2021, Resident A was prescribed the following medication, but the eMARs had missing staff initials:

- Ativan (Lorazepam), 0.5 mg, to be administered twice daily in morning and evening. Missing staff initials on Resident A's eMAR indicated Resident A did not receive this medication at 4 pm on 08/18.
- Ativan (Lorazepam), 1 mg, to be administered at bedtime. Missing staff initials on Resident A's eMAR indicated Resident A did not receive this medication on 08/08 and 08/20.
- Docusate Sodium, 100 mg, to be administered by mouth twice daily. Missing staff initials on Resident A's eMAR indicated Resident A did not receive this medication at 8 pm on 08/20.
- Lamictal (Lamotrigine), 100 mg, to be administered with 1 and ½ tablets by mouth twice daily. Missing staff initials on Resident A's eMAR indicated Resident A did not receive this medication on 08/20.

- Levetiracetam, 750 mg, to be administered by mouth twice daily. Missing staff initials on Resident A's eMAR indicated Resident A did not receive this medication at 8 pm on 08/20.
- Levothyroxine Sodium, 75 mcg, to be administered by mouth once daily on an empty stomach. Missing staff initials on Resident A's eMAR indicated Resident A did not receive this medication on 08/20 and 08/23.
- Loxapine, 50 mg, to be administered by mouth twice daily. Missing staff
 initials on Resident A's eMAR indicated Resident A did not receive this
 medication at 8 am on 08/25 and 8 pm on 08/13.
- Melatonin, 3 mg, to be administered by mouth once daily. Missing staff initials on Resident A's eMAR indicated Resident A did not receive this medication on 08/20.
- Ocean Nasal Spray 0.65 %, to be administered nasally twice daily. Missing staff initials on Resident A's eMAR indicated Resident A did not receive this medication on 08/20.
- Olanzapine, 20 mg, to be administered by mouth at bedtime. Missing staff initials on Resident A's eMAR indicated Resident A did not receive this medication on 08/20.

I reviewed Resident A's August paper MAR, used when the computer is not working, which indicated the following medications had been administered:

- Ativan (Lorazepam), 0.5 mg, to be administered twice daily in morning and evening. Staff initials on Resident A's paper MAR indicated Resident A received this medication at 4 pm on 08/18.
- Ativan (Lorazepam), 1 mg, to be administered at bedtime. Staff initials on Resident A's paper MAR indicated Resident A received this medication on 08/20.
- Docusate Sodium, 100 mg, to be administered by mouth twice daily. Staff initials on Resident A's paper MAR indicated Resident A received this medication at 8 pm on 08/20.
- Lamictal (Lamotrigine), 100 mg, to be administered with 1 and ½ tablets by mouth twice daily. Staff initials on Resident A's paper MAR indicated Resident A received this medication on 08/20.
- Levetiracetam, 750 mg, to be administered by mouth twice daily. Staff initials on Resident A's paper MAR indicated Resident A received this medication at 8 pm on 08/20.

- Melatonin, 3 mg, to be administered by mouth once daily. Staff initials on Resident A's paper MAR indicated Resident A received this medication on 08/20.
- Olanzapine, 20 mg, to be administered by mouth at bedtime. Staff initials on Resident A's paper MAR indicated Resident A received this medication on 08/20.

A handwritten notation at the end of the August paper MAR indicated "all 8 pm meds passed" on 08/20/2021. The notation also indicated the facility's internet had been down. Despite Resident A's August paper MAR indicating seven of her missed medications had actually been administered, there were still six instances where Resident A did not receive her required medication for August based on missing staff initials on both the electronic and paper MAR.

According to documentation on Resident B's generated eMAR from the facility's NextStep program for the month of August 2021, Resident B was prescribed the following medication, but the eMAR had missing staff initials:

- Acidophilus, to be administered once daily. Missing staff initials on Resident B's eMAR indicated Resident B did not receive this medication on 08/15 and 08/22.
- Advair Diskus, 250/50, to be administered by mouth into the lungs every 12 hours. Missing staff initials on Resident B's eMAR indicated Resident B did not receive this medication at 8 am on 08/15 and 08/22 and at 8 pm on 08/01, 08/02, 08/03, and 08/20.
- Fluoxetine, 10 mg, to be administered by mouth every morning. Missing staff initials on Resident B's eMAR indicated Resident B did not receive this medication on 08/15 and 08/22.
- Incruse Ellipta, 62.5 mcg/inh, to be administered into lungs once daily.
 Missing staff initials on Resident B's eMAR indicated Resident B did not receive this medication on 08/15 and 08/22.
- Isosorbide Mononitrate, 30 mg, to be administered by mouth every morning. Missing staff initials on Resident B's eMAR indicated Resident B did not receive this medication on 08/15 and 08/22.
- Lactase, 3000 units, to be administered by mouth three times daily with meals. Missing staff initials on Resident B's eMAR indicated Resident B did not receive this medication at 8 am on 08/15 and 08/22 or at 12 pm on 08/20 and 08/21 or at 4 pm on 08/18.

- Magnesium Oxide, 400 mg, to be administered twice daily. Missing staff initials on Resident B's eMAR indicated Resident B did not receive this medication at 8 am on 08/15 and 8/22 or at 8 pm on 08/01, 08/02, 08/03, and 08/20.
- Nutritional Supplement, 1 shake, to be administered once daily. Missing staff initials on Resident B's eMAR indicated Resident B did not receive this medication on 08/15 and 08/22.
- Polyeth Glyc 3350 NF, 17gm, to be administered by dissolving 1 capful in 8 oz of water or juice and drink by mouth every other day. Missing staff initials on Resident B's eMAR indicated Resident B did not receive this medication on 08/02, 08/04, 08/06, 08/08, 08/10, 08/12, 08/14, 08/16, 08/18, 08/20, 08/22, 08/24, 08/26, 08/28, and 08/30.
- Quetiapine, 25 mg, to be administered by mouth once daily at noon. Missing staff initials on Resident B's eMAR indicated Resident B did not receive this medication on 08/20 and 08/21.
- Quetiapine, 400 mg, to be administered by mouth every night at bedtime.
 Missing staff initials on Resident B's eMAR indicated Resident B did not receive this medication on 08/15 and 08/22.

Facility direct care staff did not provide me with Resident B's paper MAR for review.

According to documentation on Resident C's generated eMAR from the facility's NextStep program for the month of August 2021, Resident C was prescribed the following medication, but the eMARs had missing staff initials:

- CD Benz/Celecox/Topa, to be administered by taking 10 mls by mouth twice daily. Missing staff initials on Resident C's eMAR indicated Resident C did not receive this medication at 8 pm on 08/02, 08/19, 08/20, and 08/23.
- Children's Chewable Multivitamin, to be administered by taking by mouth twice daily. Missing staff initials on Resident C's eMAR indicated Resident C did not receive this medication at 8 pm on 08/02, 08/20 and 08/21.
- Escitalopram (Lexapro), 5 mg, to be administered at bedtime. Missing staff initials on Resident C's eMAR indicated Resident C did not receive this medication on 08/02, 08/19, and 08/20.
- Famotidine, 40 mg, to be administered by mouth at bedtime. Missing staff initials on Resident C's eMAR indicated Resident C did not receive this medication on 08/02, 08/19, and 08/20.

- Haldol (Haloperidol), 2 mg/ml, to be administered 0.5 ml by mouth at bedtime.
 Missing staff initials on Resident C's eMAR indicated Resident C did not receive this medication on 08/02, 08/19, and 08/20.
- Ketoconazole, 2%, to be administered by applying topically to scalp twice a week. Missing staff initials on Resident C's eMAR indicated Resident C did not receive this medication on 08/12, 08/23, and 08/26.
- Lamictal (Lamotrigine), 200 mg, to be administered twice daily. Missing staff initials on Resident C's eMAR indicated Resident C did not receive this medication at 8 pm on 08/02 and 08/20.
- Latuda, 80 mg, to be administered by mouth once daily. Missing staff initials on Resident C's eMAR indicated Resident C did not receive this mediation on 08/02, 08/19, and 08/20.
- Lovastatin, 10 mg. to be administered once daily. Missing staff initials on Resident C's eMAR indicated Resident C did not receive this medication on 08/02, 08/19 and 08/20.
- Lyrica, 20 mg/ml, to be administered by taking 10 ml every night. Missing staff initials on Resident C's eMAR indicated Resident C did not receive this medication on 08/02, 08/19, and 08/20.
- Metformin/HCL, 500, to be administered by mouth twice daily with meals.
 Missing staff initials on Resident C's eMAR indicated Resident did not receive this medication on 08/08.
- Nystatin 100,000 unit/gm cream, to be administered by apply topically twice daily. Missing staff initials on Resident C's eMAR indicated Resident C did not receive this medication at 8 am on 08/15 or at 8 pm on 08/02, 08/19 and 08/20.
- Omeprazole, 20 mg, to be administered by taking twice daily 1 hour before meals and other medication. Missing staff initials on Resident C's eMAR indicated Resident C did not receive this medication at 7 am on 08/15 and 08/20.
- Oxcarbazepine (Trileptal), 300 mg, to be administered by mouth twice daily. Missing staff initials on Resident C's eMAR indicated Resident C did not receive this medication at 8 pm on 08/02 and 08/19.
- Spironolactone, 25 mg/5 ml, 1 ml to be administered every other day. Missing staff initials on Resident C's eMAR indicated Resident C did not receive this medication on 08/02, 08/04, 08/06, 08/08, 08/10, 08/12, 08/14, 08/16, 08/18, 08/20, 08/22, 08/24, 08/26, 08/28, and 08/30.

- Valium (Diazepam), 10 mg, to be administered at bedtime. Missing staff initials on Resident C's eMAR indicated Resident C did not receive this medication on 08/02 and 08/19.
- Valium (Diazepam), 5 mg, to be administered twice daily. Missing staff initials indicated Resident C did not receive this medication at 12 pm on 08/20.

Facility direct care staff did not provide me with Resident C's paper MAR for review.

According to documentation on Resident D's generated eMAR from the facility's NextStep program for the month of August 2021, Resident D was prescribed the following medication, but the eMARs had missing staff initials:

- Ethinyl estr/levonorgestr, 30 mcg/ 0.15 mg, to be administered daily. Missing staff initials on Resident D's eMAR indicated Resident D did not receive this medication on 08/02, 08/03, and 08/20.
- Omega 3, 1000 mg, to be administered twice daily. Missing staff initials on Resident D's eMAR indicated Resident D did not receive this medication on 08/02, 08/03, and 08/20.
- Risperdal (Risperidone), 0.5 mg, to be administered three times daily. Missing staff initials on Resident D's eMAR indicated Resident D did not receive this medication at 4 pm on 08/18 or at 8 pm on 08/02, 08/03, and 08/20.
- Risperdal (Risperidone), 1 mg, to be administered three times daily. Missing staff initials on Resident D's eMAR indicated Resident D did not receive this medication at 4 pm on 08/18 or at 8 pm on 08/02, 08/03, and 08/20.

Resident D's August eMARs indicated there were "exceptions" for Resident D's medications not being administered. These exceptions indicated medication administered because of a "dose omission". Additionally, there were exceptions because the medication was not available or was not in stock; however, upon my review of the eMAR, there was no way to determine what days and times the aforementioned medications were unavailable or not in stock as direct care staff members did not make any notation on the eMAR on which specific dates those exceptions applied.

Facility staff did not provide me with Resident D's paper MAR for review.

According to documentation on Resident A's generated eMAR from the facility's NextStep program for the month of September 2021, Resident A was prescribed the following medication, but the eMARs had missing staff initials:

- Aripiprazole, 30 mg, to be administered in the morning. Missing staff initials on Resident A's eMAR indicated Resident A did not receive this medication on 09/08.
- Aspirin, 325 mg, to be administered every day. Missing staff initials on Resident A's eMAR indicated Resident A did not receive this medication on 09/08.
- Ativan (Lorazepam), 0.5 mg, to be administered twice daily in morning and evening. Missing staff initials on Resident A's eMAR indicated Resident A did not receive this medication at 8 am on 09/08 and 09/19 or at 4 pm on 09/08.
- Ativan (Lorazepam), 1 mg, to be administered at bedtime. Missing staff initials on Resident A's eMAR indicated Resident A did not receive this medication on 09/07, 09/08, and 09/13.
- Breo Ellipta, 200 mcg/25 mcg, to be administered by taking 1 puff into the lungs once daily. Missing staff initials on Resident A's eMAR indicated Resident A did not receive this medication on 09/08.
- Docusate Sodium, 100 mg, to be administered by mouth twice daily. Missing staff initials on Resident A's eMAR indicated Resident A did not receive this medication at 8 am on 09/08 or at 8 pm on 09/07, 09/08, and 09/13.
- FluticasonePropionate/ Flonase, 50 mcg, to be administered by inhaling one spray into each nostril once daily. Missing staff initials on Resident A's eMAR indicated Resident A did not receive this medication on 09/08.
- Lamictal (Lamotrigine), 100 mg, to be administered by giving 1 and ½ tablets by mouth twice daily. Missing staff initials on Resident A's eMAR indicated Resident A did not receive this medication at 8 am on 09/08 or at 8 pm on 09/07, 09/08, and 09/13.
- Levetiracetam, 750 mg, to be administered by mouth twice daily. Missing staff initials on Resident A's eMAR indicated Resident A did not receive this medication at 8 am on 09/08 or at 8 pm on 09/07, 09/08, and 09/13.
- Levothyroxine Sodium, 75 mcg, to be administered by mouth once daily on an empty stomach. Missing staff initials on Resident A's eMAR indicated Resident A did not receive this medication on 09/08.
- Loxapine, 50 mg, to be administered by mouth twice daily. Missing staff
 initials on Resident A's eMAR indicated Resident A did not receive this
 medication at 8 am on 09/08 or at 8 pm on 09/07, 09/08, and 09/13.

- Melatonin, 3 mg, to be administered by mouth once daily. Missing staff initials on Resident A's eMAR indicated Resident A did not receive this medication on 09/07, 09/08, and 09/13.
- Metamucil, 1 packet, to be administered by mixing one packet in liquid and drinking once daily. Missing staff initials on Resident A's eMAR indicated Resident A did not receive this medication on 09/08.
- Nifedipine, 30 mg, to be administered by mouth once daily. Missing staff initials on Resident A's eMAR indicated Resident A did not receive this medication on 09/08.
- Ocean Nasal Spray 0.65 %, to be administered nasally twice daily. Missing staff initials on Resident A's eMAR indicated Resident A did not receive this medication at 8 am on 09/08 or at 8 pm on 09/07, 09/08, and 09/13.
- Olanzapine, 20 mg, to be administered by mouth at bedtime. Missing staff initials on Resident A's eMaR indicated Resident A did not receive this medication on 09/07, 09/08, and 09/13.
- Oyster Shell Calcium / D, 500 mg/200IU, to be administered once daily.
 Missing staff initials on Resident A's eMAR indicated Resident A did not receive this medication on 09/08.

Resident A's September eMAR indicated there were "exceptions" for Resident A's medications not being administered. These exceptions indicated the medication was not available or was not in stock; however, upon my review of the eMAR, the only day where this notation was made was Resident A's Ativan (Lorazepam), 1 mg, at bedtime on 09/19 otherwise, there was no way to determine what other days and times the aforementioned medications were unavailable or not in stock as direct care staff members did not make any other notations on the eMAR on which specific dates this exception was applied.

I reviewed Resident A's September paper MAR; however, there was no indication the paper MARs had been utilized by any direct care staff member. For example, direct care staff initials were not present on the paper MAR for the corresponding dates of the missing staff initials on the eMAR.

According to documentation on Resident B's generated eMAR from the facility's NextStep program for the month of September 2021, Resident B was prescribed the following medication, but the eMARs had missing direct care staff initials:

 Acidophilus, to be administered once daily. Missing direct care staff initials on Resident B's eMAR indicated Resident B did not receive this medication on 09/08.

- Advair Diskus, 250/50, to be administered by mouth into the lungs every 12 hours. Missing staff initials on Resident B's eMAR indicated Resident B did not receive this medication at 8 am on 09/08 and at 8 pm on 09/07, 09/08, 09/13.
- Fluoxetine, 10 mg, to be administered by mouth every morning. Missing staff initials on Resident B's eMAR indicated Resident B did not receive this medication on 09/08.
- Incruse Ellipta, 62.5 mcg/inh, to be administered into lungs once daily.
 Missing staff initials on Resident B's eMAR indicated Resident B did not receive this medication on 09/08.
- Isosorbide Mononitrate, 30 mg, to be administered by mouth every morning.
 Missing staff initials on Resident B's eMAR indicated Resident B did not receive this medication on 09/08.
- Lactase, 3000 units, to be administered by mouth three times daily with meals. Missing staff initials on Resident B's eMAR indicated Resident B did not receive this medication at 8 am on 09/08 or at 12 pm on 09/08 or at 4 pm on 09/08.
- Magnesium Oxide, 400 mg, to be administered twice daily. Missing staff initials on Resident B's eMAR indicated Resident B did not receive this medication at 8 am on 09/08 or at 8 pm on 09/07, 09/08 and 09/13.
- Nutritional Supplement,1 shake, to be administered once daily. Missing staff initials on Resident B's eMAR indicated Resident B did not receive this medication on 09/08.
- Polyeth Glyc 3350 NF, 17gm, to be administered by dissolving 1 capful in 8 oz of water or juice and drink by mouth every other day. Missing staff initials on Resident B's eMAR indicated Resident B did not receive this medication on 09/01, 09/03, 09/05, 09/07, 09/09, 09/11, 09/13, 09/15, 09/17, 09/19, 09/21, 09/23, 09/25, 09/27, and 09/29.
- Quetiapine, 25 mg, to be administered by mouth once daily at noon. Missing staff initials on Resident B's eMAR indicated Resident B did not receive this medication on 09/08.
- Quetiapine, 400 mg, to be administered by mouth every night at bedtime.
 Missing staff initials on Resident B's eMAR indicated Resident B did not receive this medication on 09/07, 09/08, and 09/13.

 Viactiv, 1 tablet, to be administered twice daily. Missing staff initials on Resident B's eMAR indicated Resident B did not receive this medication at 8 am on 09/08 or at 8 pm on 09/07, 09/08, and 09/13.

I reviewed Resident B's September paper MAR; however, there was no indication paper MARs had been utilized by direct care staff members. For example, direct care staff initials were not present on the paper MAR for the corresponding dates of the missing staff initials on the eMAR.

According to documentation on Resident C's generated eMAR from the facility's NextStep program for the month of September 2021, Resident C was prescribed the following medication, but the eMARs had missing staff initials:

- CD Benz/Celecox/Topa, to be administered by taking 10 mls by mouth twice daily. Missing staff initials on Resident C's eMAR indicated Resident C did not receive this medication at 8 am 09/08 or 8 pm on 09/07, 09/08, 09/12, and 09/22.
- Escitalopram (Lexapro), 5 mg, to be administered at bedtime. Missing staff initials on Resident C's eMAR indicated Resident C did not receive this medication on 09/07, 09/08, 09/12, and 09/22.
- Famotidine, 40 mg, to be administered by mouth at bedtime. Missing staff initials on Resident C's eMAR indicated Resident C did not receive this medication on 09/07, 09/08, 09/12, and 09/22.
- Flonase (Fluticagone Nasal Spray), 50 mcg, to be administered by inhaling 1 spray in each nostril once daily. Missing staff initials on Resident C's eMAR indicated Resident C did not receive this medication on 09/08.
- Haldol (Haloperidol), 2 mg/ml, to be administered 0.5 ml by mouth at bedtime.
 Missing staff initials on Resident C's eMAR indicated Resident C did not receive this medication on 09/07, 09/08, 09/12, and 09/22.
- Ketoconazole, 2%, to be administered by applying topically to scalp twice a week. Missing staff initials on Resident C's eMAR indicated Resident C did not receive this medication on 09/13 and 09/23.
- Lamictal (Lamotrigine), 200 mg, to be administered twice daily. Missing staff initials on Resident C's eMAR indicated Resident C did not receive this medication at 8 am on 09/08 or 8 pm on 09/07, 09/08, 09/12, 09/22.
- Latuda, 80 mg, to be administered by mouth once daily. Missing staff initials on Resident C's eMAR indicated Resident C did not receive this mediation on 09/07, 09/08, 09/12, and 09/22.

- Lovastatin, 10 mg, to be administered once daily. Missing staff initials on Resident C's eMAR indicated Resident C did not receive this medication on 09/07, 09/08, 09/12, and 09/22.
- Lyrica, 20 mg/ml, to be administered by taking 10 ml every night. Missing staff initials on Resident C's eMAR indicated Resident C did not receive this medication on 09/07, 09/08, 09/12, and 09/22.
- Lyrica, 20 mg/ml, to be administered by taking 5 ml every morning. Missing staff initials on Resident C's eMAR indicated Resident C did not receive this medication on 09/08.
- Metformin/HCL, 500 mg, to be administered by taking 1 tablet by mouth two times daily with meals. Missing staff initials on Resident C's eMAR indicated Resident C did not receive this medication at 8 am on 09/08 or at 5 pm on 09/08 and 09/14.
- Multivitamin Chewable Tablet, 1 tablet, to be administered two times daily. Missing staff initials on Resident C's eMAR indicated Resident C did not receive this medication at 8 am on 09/08 or at 8 pm on 09/07, 09/08 and 09/12.
- Nystatin, 100,000 unit/gm cream, to be administered by apply topically twice daily. Missing staff initials on Resident C's eMAR indicated Resident C did not receive this medication at 8 am on 09/08 or at 8 pm on 09/07, 09/08, 09/12, and 09/22.
- Omeprazole, 20 mg, to be administered by taking two capsules by mouth twice daily 1 hour before meals and other medication. Missing staff initials on Resident C's eMAR indicated Resident C did not receive this medication at 7 am on 09/08, 09/11, 09/12, 09/14, and 09/24 or at 6 pm on 09/08 and 09/20.
- Oxcarbazepine (Trileptal), 300 mg, to be administered by mouth twice daily.
 Missing staff initials on Resident C's eMAR indicated Resident C did not
 receive this medication at 8 am on 09/08 or 8 pm on 09/07, 09/08, 09/12, and
 09/22.
- Polythylene Glycolax, 17 gm, to be administered by mixing in water or juice and drinking. Missing staff initials on Resident C's eMAR indicated Resident C did not receive this medication on 09/08.
- Spironolactone, 25 mg/5 ml, 1 ml to be administered every other day. Missing staff initials on Resident C's eMAR indicated Resident C did not receive this medication on 09/01, 09/03, 09/05, 09/07, 09/09, 09/11, 09/13, 09/15, 09/17, 09/19, 09/21, 09/23, 09/25, 09/27, and 09/29.

- Strattera, 18 mg, to be administered in the morning. Missing staff initials on Resident C's eMAR indicated Resident C did not receive this medication on 09/08.
- Trintellix, 20 mg, to be administered every morning. Missing staff initials on Resident C's eMAR indicated Resident C did not receive this medication on 09/08.
- Valium (Diazepam), 10 mg, to be administered at bedtime. Missing staff initials on Resident C's eMAR indicated Resident C did not receive this medication on 09/07, 09/08, 09/12, and 09/22.
- Valium (Diazepam), 5 mg, to be administered twice daily. Missing staff initials indicated Resident C did not receive this medication at 8 am on 09/08 or at 12 pm on 09/08.
- Vitamin B 12, 5000 mcg, to be administered once daily. Missing staff initials on Resident C's eMAR indicated Resident C did not receive this medication on 09/08.
- Vitamin D3, 2000 unit, to be administered once daily. Missing staff initials on Resident C's eMAR indicated Resident C did not receive this medication on 09/08.

Resident C's September eMAR indicated there were "exceptions" listed as potential reasons for Resident C's medications not being administered which included an exception of a "dose omission". Additionally, there were exceptions because the medication was not available or was not in stock.

Upon my review of the eMAR, the only days where there was any notation, which was the "dose omission" notation, was made was on 09/21 for Resident C's Nystatin 100,000 unit/gm cream, otherwise, there was no way to determine what other days and times the aforementioned medications were unavailable or not in stock as direct care staff members did not make any other notations on the eMAR for which specific dates this exception was applied.

Facility direct care staff members did not provide Resident C's paper MAR for my review.

According to documentation on Resident D's generated eMAR from the facility's NextStep program for the month of September 2021, Resident D was prescribed the following medication, but the eMARs had missing direct care staff initials:

• Ethinyl estr/levonorgestr, 30 mcg/ 0.15 mg, to be administered daily. Missing staff initials on Resident D's eMAR indicated Resident D did not receive this medication on 09/07, 09/08, and 09/13.

- Omega 3, 1000 mg, to be administered twice daily. Missing staff initials on Resident D's eMAR indicated Resident D did not receive this medication on at 8 am on 09/08 or at 8 pm on 09/07, 09/08, and 09/13.
- Risperdal (Risperidone), 0.5 mg, to be administered three times daily. Missing staff initials on Resident D's eMAR indicated Resident D did not receive this medication at 8 am on 09/08 or at 4 pm on 09/08 or at 8 pm on 09/07, 09/08, and 09/13.
- Risperdal (Risperidone), 1 mg, to be administered three times daily. Missing staff initials on Resident D's eMAR indicated Resident D did not receive this medication at 8 am on 09/08 or at 4 pm on 09/08 or at 8 pm on 09/07, 09/08, and 09/13.

Resident D's September eMAR indicated there were "exceptions" for Resident D's medications not being administered one of which was because of a "dose omission". Additionally, there were exceptions because the medication wasn't available or wasn't in stock. There was no way to determine what days and times the aforementioned medications were unavailable or not in stock as direct care staff members did not make any notation on the eMAR on which specific dates those exceptions were applied.

The facility did not provide Resident D's September paper MAR for my review.

According to documentation on Resident A's generated eMAR from the facility's NextStep program for the month of October 2021, Resident A was prescribed the following medication, but the eMARs had missing staff initials:

- Aripiprazole, 30 mg, to be administered in the morning. Missing staff initials on Resident A's eMAR indicated Resident A did not receive this medication on 10/14.
- Aspirin, 325 mg, to be administered by mouth every day. Missing staff initials on Resident A's eMAR indicated Resident A did not receive this medication on 10/14.
- Ativan (Lorazepam), 0.5 mg, to be administered twice daily in morning and evening. Missing staff initials on Resident A's eMAR indicated Resident A did not receive this medication at 8 am on 10/14 or at 4 pm on 10/20 and 10/21.
- Breo Ellipta, 200 mcg/25 mcg, to be administered by inhaling 1 puff into the lungs once daily. Missing staff initials on Resident A's eMAR indicated Resident A did not receive this medication on 10/14.

- Docusate Sodium, 100 mg, to be administered by mouth twice daily. Missing staff initials on Resident A's eMAR indicated Resident A did not receive this medication at 8 am on 10/14.
- Fluticasone Propionate/ Flonase, 50 mcg, to be administered by inhaling one spray in each nostril once daily. Missing staff initials on Resident A's eMAR indicated Resident A did not receive this medication on 10/14.
- Lamictal (Lamotrigine), 100 mg, to be administered by taking 1 and ½ tablets by mouth twice daily. Missing staff initials on Resident A's eMAR indicated Resident A did not receive this medication at 8 am on 10/14.
- Levetiracetam, 750 mg, to be administered by mouth twice daily. Missing staff initials on Resident A's eMAR indicated Resident A did not receive this medication at 8 am on 10/14.
- Levothyroxine Sodium, 75 mcg, to be administered by mouth once daily on an empty stomach. Missing staff initials on Resident A's eMAR indicated Resident A did not receive this medication on 10/23.
- Lorazepam, 0.5 mg, to be administered twice daily. Missing staff initials on Resident A's eMAR indicated Resident A did not receive this medication at 8 am on 10/26.
- Loxapine, 50 mg, to be administered by mouth twice daily. Missing staff initials on Resident A's eMAR indicated Resident A did not receive this medication at 8 am on 10/14.
- Metamucil, to be administered by mixing one packet in liquid and drinking once daily. Missing staff initials on Resident A's eMAR indicated Resident A did not receive this medication on 10/14.
- Ocean Nasal Spray 0.65 %, to be administered nasally twice daily. Missing staff initials on Resident A's eMAR indicated Resident A did not receive this medication at 8 am on 10/14.
- Oyster Shell Calcium / D, 500 mg/200 IU, to be administered once daily.
 Missing staff initials on Resident A's eMAR indicated Resident A did not receive this medication on 10/14.

I reviewed Resident A's October paper MAR, which indicated the following medications had been administered:

 Ativan (Lorazepam), 0.5 mg, to be administered twice daily in morning and evening. Staff initials on Resident A's paper MAR indicated Resident A received this medication at 4 pm on 10/21. Levothyroxine Sodium, 75 mcg, to be administered by mouth once daily on an empty stomach. There was an "X" in lieu of staff initials on Resident A's paper MAR indicating Resident A received this medication on 10/23.

According to documentation on Resident B's generated eMAR from the facility's NextStep program for the month of October 2021, Resident B was prescribed the following medication, but the eMARs had missing staff initials:

- Advair Diskus, 250/50, to be administered by mouth into the lungs every 12 hours. Missing staff initials on Resident B's eMAR indicated Resident B did not receive this medication at 8 pm on 10/04 and 10/15.
- Lactase, 3000 units, to be administered by mouth three times daily with meals. Missing staff initials on Resident B's eMAR indicated Resident B did not receive this medication at 12 pm on 10/09 and 10/24 or at 4 pm on 10/21.
- Magnesium Oxide, 400 mg, to be administered twice daily. Missing staff initials on Resident B's eMAR indicated Resident B did not receive this medication at 8 pm on 10/04 and 10/15.
- Polyeth Glyc 3350 NF, 17gm, to be administered by dissolving 1 capful in 8 oz of water or juice and drink by mouth every other day. Missing staff initials on Resident B's eMAR indicated Resident B did not receive this medication on 10/01, 10/03, 10/05, 10/07, 010/09,10/11, 10/13, 10/15,10/17, 10/19, 10/21, 10/23, 10/25, 10/27, 10/29, and 10/31.
- Quetiapine, 25 mg, to be administered by mouth once daily at noon. Missing staff initials on Resident B's eMAR indicated Resident B did not receive this medication on 10/09 and 10/24.
- Quetiapine, 400 mg, to be administered by mouth every night at bedtime.
 Missing staff initials on Resident B's eMAR indicated Resident B did not receive this medication on 10/04 and 10/15.
- Viactiv, 1 tablet, to be administered twice daily. Missing staff initials on Resident B's eMAR indicated Resident B did not receive this medication at 8 pm on 10/04 and 10/15.

The facility did not provide Resident B's October paper Mar for my review.

According to documentation on Resident C's generated eMAR from the facility's NextStep program for the month of October 2021, Resident C was prescribed the following medication, but the eMARs had missing staff initials:

- Carbamide Peroxide, 6.5%, to be administered by placing 5 drops into both ears 1 time weekly on Thursday. Missing staff initials on Resident C's eMAR indicated Resident C did not receive this medication on 10/28.
- CD Benz/Celecox/Topa, to be administered by taking 10 mls by mouth twice daily. Missing staff initials on Resident C's eMAR indicated Resident C did not receive this medication at 8 am on 10/11.
- Celecoxib, 200 mg, to be administered by taking 1 capsule by mouth twice daily. Missing staff initials on Resident C's eMAR indicated Resident C did not receive this medication at 8 am on 10/08, 10/11, and 10/26 or at 8 pm on 10/29.
- Famotidine, 40 mg, to be administered by mouth at bedtime. Missing staff initials on Resident C's eMAR indicated Resident C did not receive this medication on 10/29 and 10/31.
- Flonase (Fluticagone Nasal Spray), 50 mcg, to be administered by inhaling 1 spray in each nostril once daily. Missing staff initials on Resident C's eMAR indicated Resident C did not receive this medication on 10/11 and 10/26.
- Ketoconazole, 2%, to be administered by applying topically to scalp twice a week. Missing staff initials on Resident C's eMAR indicated Resident C did not receive this medication on 10/18 and 10/21.
- Lamictal (Lamotrigine), 200 mg, to be administered twice daily. Missing staff initials on Resident C's eMAR indicated Resident C did not receive this medication at 8 am on 10/11 and 10/26 or at 8 pm on 10/29 and 10/31.
- Lamictal/Lamotrigine, 50 mg, to be administered by dissolving one tablet by mouth twice daily (instruction indicated taking with other Lamotrigine for a total of 250 mg). Missing staff initials on Resident C's eMAR indicated Resident C did not receive this medication at 8 am on 10/26 or at 8 pm on 10/29 and 10/31.
- Latuda, 60 mg, to be administered as 1 tablet at breakfast with 350 calories.
 Missing staff initials on Resident C's eMAR indicated Resident C did not receive this mediation on 10/07, 10/11, and 10/26.
- Lovastatin, 10 mg, to be administered once daily. Missing staff initials on Resident C's eMAR indicated Resident C did not receive this medication on 10/29 and 10/31.
- Lyrica, 20 mg/ml, to be administered by taking 10 ml every night. Missing staff initials on Resident C's eMAR indicated Resident C did not receive this medication on 10/29 and 10/31.

- Lyrica, 20 mg/ml, to be administered by taking 5 ml every morning. Missing staff initials on Resident C's eMAR indicated Resident C did not receive this medication on 10/11 and 10/26.
- Metformin/HCL, 500 mg, to be administered by taking 1 tablet by mouth two times daily with meals. Missing staff initials on Resident C's eMAR indicated Resident C did not receive this medication at 8 am on 10/11 and 10/26 or at 5 pm on 10/08, 10/21, and 10/26.
- Multivitamin Chewable Tablet, 1 tablet, to be administered two times daily.
 Missing staff initials on Resident C's eMAR indicated Resident C did not
 receive this medication at 8 am on 10/11 and 10/26 or at 8 pm on 10/29 and
 10/31.
- Nystatin, 100,000 unit/gm cream, to be administered by apply topically twice daily. Missing staff initials on Resident C's eMAR indicated Resident C did not receive this medication at 8 am on 10/11 or at 8 pm on 10/29 and 10/31.
- Omeprazole, 20 mg, to be administered by taking two capsules by mouth twice daily 1 hour before meals and other medication. Missing staff initials on Resident C's eMAR indicated Resident C did not receive this medication at 7 am on 10/23 and 10/26 or at 6 pm on 10/03, 10/08, 10/21, 10/23, and 10/26.
- Oxcarbazepine (Trileptal), 300 mg, to be administered by mouth twice daily. Missing staff initials on Resident C's eMAR indicated Resident C did not receive this medication at 8 am on 10/11 and 10/26 or 8 pm on 10/29 and 10/31.
- Paxil (paroxetine), 20 mg, to be administered by taking 1 tablet daily. Missing staff initials on Resident C's eMAR indicated Resident C did not receive this medication on 10/08, 10/11, 10/14, and 10/26.
- Polythylene Glycolax, 17 gm, to be administered by mixing in water or juice and drinking. Missing staff initials on Resident C's eMAR indicated Resident C did not receive this medication on 10/11 and 10/26.
- Spironolactone, 25 mg/5 ml, 1 ml to be administered every other day. Missing staff initials on Resident C's eMAR indicated Resident C did not receive this medication on 10/01, 10/03, 10/05, 10/07, 10/09, 10/11, 10/13, 10/15, 10/17, 10/19, 10/21, 10/23, 10/25, 10/27, 10/29, and 10/31.
- Strattera, 25 mg, to be administered one time daily. Missing staff initials on Resident C's eMAR indicated Resident C did not receive this medication on 10/11 and 10/26.

- Topiramate, 200 mg, to be administered by mouth twice daily. Missing staff initials on Resident C's eMAR indicated Resident C did not receive this medication at 8 am on 10/8, 10/11, and 10/26 or at 8 pm on 10/29 and 10/31.
- Valium (Diazepam), 10 mg, to be administered at bedtime. Missing staff initials on Resident C's eMAR indicated Resident C did not receive this medication on 10/29 and 10/31.
- Valium (Diazepam), 5 mg, to be administered twice daily. Missing staff initials indicated Resident C did not receive this medication at 8 am on 10/11 or at 12 pm on 10/09 and 10/25.
- Vistaril, 50 mg, to be administered by taking two capsules at bedtime. Missing staff initials on Resident C's eMAR indicated Resident C did not receive this medication on 10/29 and 10/31.
- Vistaril, 25 mg, to be administered by 1 tablet, three times a day. Missing staff initials on Resident A's eMAR indicated Resident C did not receive this medication at 8 am on 10/08 and 10/11 or at 12 pm on 10/08 and 10/09.
- Vitamin B 12, 5000 mcg, to be administered once daily. Missing staff initials on Resident C's eMAR indicated Resident C did not receive this medication on 10/11 and 10/26.
- Vitamin D3, 2000 unit, to be administered once daily. Missing staff initials on Resident C's eMAR indicated Resident C did not receive this medication on 10/11 and 10/26.

Resident C's October eMAR indicated there were "exceptions" for Resident C's medications not being administered one of which was because of a "dose omission." However, there was no way to determine what days and times the aforementioned medications weren't administered as direct care staff members did not make any notation on the eMAR on which specific dates those exceptions were applied.

The facility did not provide Resident C's October paper MAR for my review.

According to documentation on Resident D's generated eMAR from the facility's NextStep program for the month of October 2021, Resident D was prescribed the following medication, but the eMARs had missing staff initials:

 Omega 3, 1000 mg, to be administered twice daily. Missing staff initials on Resident D's eMAR indicated Resident D did not receive this medication on at 8 am on 10/14 and 10/23.

- Risperdal (Risperidone), 0.5 mg, to be administered three times daily. Missing staff initials on Resident D's eMAR indicated Resident D did not receive this medication at 8 am on 10/14 and 10/23 or at 4 pm on 10/21.
- Risperdal (Risperidone), 1 mg, to be administered three times daily. Missing staff initials on Resident D's eMAR indicated Resident D did not receive this medication at 8 am on 10/14 and 10/23 or at 4 pm on 10/21.

The facility did not provide Resident D's October paper MAR for my review.

On 12/14/2021, I conducted an unannounced on-site investigation as part of my investigation. Only one direct care staff, Jasmine O'Connor, was working at the time of the on-site investigation. She indicated she had worked at the facility for approximately one year. Ms. O'Connor stated prior to 12/01/2021 staff would only use paper MARs if the facility's internet was down and staff were unable to access the eMARs. Ms. O'Connor stated that since 12/01/2021, staff were now expected to complete the eMARs and the paper MARs even if the internet is working. She stated both MARs were being completed to ensure staff were initialing when resident medications were being administered. Ms. O'Connor stated residents receive their prescribed medications indicating documentation had been a past issue.

I requested to review all six resident's eMARs; however, Ms. O'Connor indicated she was unable to generate any monthly eMAR reports. She indicated she was only able to go through each resident's med passes every day and determine if there were any missed doses. Ms. O'Connor was able to do this for each resident. While Ms. O'Connor was doing this, we pulled up the December paper MARs to verify any missed medication passes on the eMARs.

Upon review of Resident A's December eMAR and paper MAR, I did not observe any missed medications.

Upon review of Resident B's December eMAR and paper MAR, missing staff initials on both the eMAR and paper MAR for 12/13/2021 indicated Resident B did not receive her 4 pm Metformin medication.

Upon review of Resident C's and Resident D's December eMAR and paper MAR, I did not find any medication or doses that had not been administered.

Upon my review of the facility's medication cart, all resident medication appeared to be accounted for and administered, as required; except, I did not observe Resident D's PRN Lorazepam, .5 mg, prescription despite it being listed on her electronic and paper MAR.

APPLICABLE RULE		
R 400.14312	Resident medications.	
	(2) Medication shall be given, taken, or applied pursuant to label instructions.(6) A licensee shall take reasonable precautions to insure that prescription medication is not used by a person other than the resident for whom the medication was prescribed.	
ANALYSIS:	When I conducted my on-site investigation at the facility on 12/14/2021 and reviewed Resident B's paper MAR, it indicated Resident B was prescribed a PRN Lorazepam, .5 mg; however, facility staff was unable to locate this medication in the medication cart or in the facility. Subsequently, if Resident B requested this medication, it would not have been able to be administered, as required, and direct care staff are not ensuring the medication is not being used by another person by not safely maintaining its location.	
CONCLUSION:	VIOLATION ESTABLISHED	

APPLICABLE RU	JLE
R 400.14312	Resident medications.
	(4) When a licensee, administrator, or direct care staff member supervises the taking of medication by a resident, he or she shall comply with all of the following provisions: (b) Complete an individual medication log that contains all of the following information: (i) The medication. (ii) The dosage. (iii) Label instructions for use. (iv) Time to be administered. (v) The initials of the person who administers the medication, which shall be entered at the time the medication is given. (vi) A resident's refusal to accept prescribed medication or procedures.

ANALYSIS:	Based on my investigation, which included a review of the facility's electronic <i>Medication Administration Records</i> (eMAR) and paper MARs for Resident A, Resident B, Resident C, and Resident D and my interview with direct care staff, Jasmine O'Connor, there is evidence indicating direct care staff did not initial resident MARs after administering resident medication, as required, as demonstrated by extensive missing staff initials throughout the August, September, and October 2021 MARs. The inconsistency of staff not initialing the MARs makes it unclear if medication is being administered, but not initialed after staff administer it or if it simply not being administered.
CONCLUSION:	VIOLATION ESTABLISHED

On 01/18/2022, I conducted an exit conference with licensee designee, Ramon Beltran, via telephone. I informed Mr. Beltran of my findings, which he acknowledged. He reported the facility's executive director, Ms. Napier, was working on ensuring all MARs were completed. He confirmed both paper and electronic MARs were now being completed by staff. In addition, he stated facility medication passers were completing attestation forms after the end of each shift. He stated the attestation forms document staff reviewed both the electronic and paper MARs confirming all resident medication had been passed and that it was documented on both sets of MARs.

IV. RECOMMENDATION

Upon receipt of an acceptable plan of correction, I recommend no change in the current license status.

Carry Cushman				
0	01/18/2022			
Cathy Cushman Licensing Consultant		Date		
Approved By: Dawn Jimm	02/01/2022			
Dawn N. Timm Area Manager		Date		