

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTIONS		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:		(X2) MULTIPLE CONSTRUCTION A. BUILDING B. WING	(X3) DATE SURVEY COMPLETED 07/15/2026
NAME OF PROVIDER OR SUPPLIER RIVERWALK COMMUNITIES		STREET ADDRESS, CITY, STATE, ZIP CODE 401 S.E. 6TH STREET, EVANSVILLE, , 47713			
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES...	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION...	(X5) COMPLETION DATE	
R 0000	INITIAL COMMENTS This visit was for the Investigation of Intakes 470692, 470647, 469728, 470770. Intake 470692- State deficiencies related to the allegations are cited at R0297. Intake 470647 - No deficiencies related to the allegations are cited. Intake 469728- No deficiencies related to the allegations are cited. Intake 470770- No deficiencies related to the allegations are cited. Survey dates: July 14, 15, 2026. Facility number: 011274 Residential Census: 85 This State Residential Finding is cited in accordance with 410 IAC 16.2-5.	R 0000			

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	Quality review completed on July 17, 2026.			
R 0297	Pharmaceutical Services - Noncompliance 410 IAC 16.2-5-6(c)(1) (c) If the facility controls, handles, and administers medications for a resident, the facility shall do the following for that resident: (1) Make arrangements to ensure that pharmaceutical services are available to provide residents with prescribed medications in accordance with applicable laws of Indiana. Based on interview, and record review, the facility failed to ensure medications were documented as given for 3 of 3 residents reviewed for pharmaceutical services. (Resident B, Resident C, Resident D) Finding includes: 1. On 7/14/26 at 12:18 p.m., Resident C indicated she has not received her diuretic medications at times as ordered. On 7/15/26 at 9:45 a.m. Resident C's clinical record was reviewed, diagnoses included but were not limited to, acute or chronic right heart failure,	R 0297	R 297410 <i>IAC 16.2-5-6(c)(1)</i> <i>Pharmaceutical Services – Noncompliance</i> By submitting the enclosed plan of correction, the facility is not admitting to the truth or accuracy of any specific findings or allegations as part of any proceedings, and submits the enclosed response pursuant to its regulatory obligations. The facility requests that this plan of correction be considered its allegation of compliance and that the submission be accepted for desk review and paper compliance. The facility does ensure that pharmaceutical services are available to provide residents with prescribed medications in accordance with applicable laws of Indiana. The facility acknowledges the electronic Medication Administration Record (EMAR) documentation	08/30/2026

generalized edema, anxiety disorder, major depressive disorder, hyperlipidemia, type 2 diabetes mellitus, frequency of micturition.

The June and July 2026 EMAR (Electronic Medication Administration Record) were reviewed and included but were not limited to the following orders:

June & July 2026:

furosemide (diuretic) 40 mg (milligrams) tablet give orally two times a day for diuretic, start date 6/16/26, d/c (discontinue) date 6/30/26.

The EMAR was not signed as given and left blank on 6/20-8:00 a.m. dose, 6/26, 6/28, 6/29- 8:00 p.m. dose.

8:00 a.m. dose- 7/4, 7/5, 7/8, 7/9, 7/10, 7/11, 7/12, 7:00 p.m. dose- 7/1, 7/2, 7/3, 7/4, 7/5, 7/8, 7/9, 7/10, 7/14.

hydroxyzine (antihistamine) HCL 50 mg tablet give 1 tablet by mouth twice a day for anxiety, start date 3/19/25.

The EMAR was not signed as given and left blank on - 6/20-8:00 a.m. dose, 6/26- 8:00 p.m. dose, 6/28, 6/29- 8:00 p.m. dose.

8:00 a.m. dose on 7/2, 7/4, 7/5,

gaps identified during the survey and has taken the corrective actions outlined below.

**1.
Corrective Action for Residents Found to Have Been Affected (Residents B, C, D)**

¿ **Physician notification** – the attending physician for each of Residents B, C, and D will be notified in writing of the specific medications and dates for which EMAR documentation was incomplete, and any physician recommendations arising from that notification will be documented in the resident's medical record.

¿ **Clinical review** –the Director of Nursing (DON) or designee will complete an individualized clinical chart review for Residents B, C, and D to evaluate whether any signs, symptoms, or condition changes correlate with the medication administration windows lacking documentation (e.g., diuretic, cardiac, and antihypertensive therapies

7/8, 7/9, 7/10, 7/11, 7/12. 8:00 p.m. dose- 7/3, 7/4, 7/5, 7/10.

Aldactone (diuretic) oral tablet 25 mg (Spironolactone) give 1 tablet by mouth one time a day for lower BLE (bilateral lower extremity) edema, start date 6/19/26.

The EMAR was not signed as given and left blank on - 6/20.

7/2, 7/4, 7/5, 7/8, 7/9, 7/10, 7/11, 7/12.

atorvastatin calcium (lipid lowering agent) oral tablet 40 mg give 1 tablet by mouth at bedtime related to hyperlipidemia, start date 5/5/23.

The EMAR was not signed as given and left blank on - 6/25, 6/28, 6/29.

7/3, 7/4, 7/5, 7/10.

Jaurdiance oral tablet 10 mg give 1 tablet by mouth one time a day related to type 2 diabetes mellitus, start date 5/6/23.

The EMAR was not signed as given and left blank on- 6/20.

7/2, 7/4, 7/5, 7/8, 7/9, 7/10, 7/11, 7/12.

losartan potassium (antihypertensive) oral tablet 50 mg give 1 tablet by mouth one

for Resident C; insulin and cardiac therapies for Resident B; pain and antihypertensive therapies for Resident D). Findings will be documented in the resident's record.

¿ **Mortality/QAPI review** – because Resident B expired at the facility on 7/3/26, the EMAR documentation gaps for this resident will be incorporated into the facility's mortality review process and presented to the Quality Assurance and Performance Improvement (QAPI) committee for evaluation and any additional follow-up action.

¿ **Staff-specific re-education** – nursing staff assigned to medication administration for Residents B, C, and D during the identified date ranges will be identified through assignment/staffing records and will receive individual, documented one-on-one re-education on EMAR documentation requirements prior to resuming independent medication administration duties.

2.

time a day related to essential hypertension, start date 6/19/26, d/c date 7/13/26.

The EMAR was not signed as given and left blank on - 6/20.

7/2, 7/4, 7/5, 7/8, 7/9.

melatonin (sleep aide) oral 10 mg give 1 tablet by mouth at bedtime for insomnia, start date 6/18/26.

7/3, 7/4, 7/5, 7/10.

The EMAR was not signed as given and left blank on - 6/26, 6/28, 6/29.

metoprolol succinate ER (antihypertensive) oral tablet extended release 24 hour 25 mg give 1 tablet by mouth one time a day related to essential hypertension, start date 6/19/26.

7/2, 7/4, 7/5, 7/8, 7/9, 7/10, 7/11, 7/12.

The EMAR was not signed as given and left blank on- 6/20.

trazodone HCl (antidepressant) oral tablet 100 mg give 2 tablets by mouth at bedtime related to anxiety disorder, start date 8/28/23.

The EMAR was not signed as given and left blank on- 6/26, 6/28, 6/29.

Identification of Other Residents with the Potential to Be Affected

All residents receiving scheduled medications administered or documented via the facility EMAR have the potential to be affected by the same deficient practice.

¿ **Facility-wide audit** –the DON/designee will conduct a facility-wide retrospective audit of the EMAR for all residents, covering the 30-day period preceding the survey (approximately 6/15/26 through 7/15/26), to identify any additional instances of blank, unsigned, or improperly coded medication administration entries.

¿ **Follow-up on findings** –any additional gaps identified through this audit will be addressed using the same process described in Section 1 above — clinical review, physician notification where clinically indicated, and documentation of findings — and will be reported to the QAPI committee.

73, 7/4, 7/5, 7/10.

aspirin EC 81 mg tab , 1 tablet by mouth twice daily (indications for use : pain), start date 12/2/25.

The EMAR was not signed as given and left blank on- 6/20- 8:00 a.m. dose, 6/26- 8:00 p.m. dose, 6/28, 6/29, 8:00 p.m. dose.

8:00 a.m. dose - 7/2, 7/4, 7/5, 7/8, 7/9, 7/10, 7/11, 7/12, 8:00 p.m. dose- 7/3, 7/4, 7/5, 7/10.

famotidine (histamine -2- receptor antagonists) 20 mg tab, give orally two times a day for heartburn/indigestion, start date 6/18/26, d/c date 6/30/26.

The EMAR was not signed as given and left blank on - 6/20 -7:00 a.m. dose, 6/25, 6/28, 6/29- 4:00 p.m. dose.

acetaminophen (pain/fever reducer) 500 mg give 1 tablet by mouth 3 times a day indications for use, pain, start date 12/2/25.

The EMAR was not signed as given and left blank on - 9:00 a.m. dose- 6/20, 2:00 p.m. dose- 6/17, 6/18, 6/19, 6/20, 6/25, 6/26, 6/27, 6/28, 9:00 p.m.- 6/26, 6/28, 6/29.

9:00 a.m. dose- 7/2, 7/4,, 7/5, 7/8, 7/9, 7/10, 7/11, 7/12, 2:00 p.m. dose- 7/2, 7/4, 7/5, 7/8,

¿ **Audit completion** –the initial facility-wide audit will be completed within 15 days of this plan of correction's acceptance.

3. Systemic Changes to Ensure the Deficient Practice Does Not Recur

Root cause analysis identified a gap in licensed nurse and QMA workflow and training related to consistent, real-time EMAR documentation at the time of medication administration, including correct use of codes for held, refused, or unavailable medications.

¿ **Re-education** –all licensed nurses and QMAs will complete mandatory in-service education covering (1) the Riverwalk Communities medication administration policy and procedure, (2) physician orders related to medication administration, (3) required real-time documentation at the time of administration, and (4) correct use of

7/9, 7/10, 7/11, 7/12.

gabapentin 300 mg give 1 capsule three times a day by mouth for neuropathy, start date 6/18/26.

The EMAR was not signed as given and left blank on - 8:00 a.m. dose- 6/20, 2:00 p.m. dose- 6/18, 6/19, 6/20, 6/22, 6/25, 6/26, 6/27, 6/28, 8:00 p.m. dose- 6/26, 6/28, 6/29.

8:00 a.m. dose- 7/2, 7/4, 7/5, 7/8, 7/9, 7/10, 7/11, 7/12, 2:00 p.m.- 7/2, 7/4, 7/5, 7/8, 7/9, 7/10, 7/11, 7/12, 8:00 p.m. dose- 7/3, 7/4, 7/5, 7/10.

certizine(allergy medication) HCl oral tablet 10 mg give 1 tablet by mouth one time a day for seasonal allergies, start date 6/19/26.

The EMAR was not signed as given and left blank on - 7/2, 7/4, 7/5, 7/8, 7/9, 7/10, 7/11, 7/12.

levothyroxine sodium (thyroid hormone) 200 mcg (microgram) oral tablet give 1 tablet enterally in the morning related to hypothyroidism, start date 7/1/26.

The EMAR was not signed as given and left blank on -7/3, 7/11.

B. On 7/14/26 at 12:41 p.m.,

administration/omission codes, including notification requirements when a medication is refused, held, or unavailable.

¿ **Competency validation** – each

licensed nurse and QMA will complete a signed competency checklist and return demonstration confirming understanding of EMAR documentation requirements before resuming independent medication pass responsibilities; completed checklists will be filed in the employee's personnel record.

¿ **Supervisory end-of-shift reconciliation** –Unit

Managers/House Supervisors will conduct an end-of-shift EMAR reconciliation for each nursing shift for 30 days following implementation, comparing completed administrations against the EMAR to identify and correct blank or missing entries the same day, rather than after the fact.

¿ **Policy review and update** – the facility's Medication

Resident B's clinical record was reviewed, diagnoses included but was were not limited to, type 2 diabetes mellitus, atrial fibrillation, polyneuropathy, unspecified. Resident B expired at the facility on 7/3/26.

The June and July 2026 EMAR (Electronic Medication Administration Record) were reviewed and included but were not limited to the following orders:

June & July 2026:

dicyclomine 10 mg 1 capsule by mouth 4 times daily dx: IBS (irritable bowel syndrome), start date 6/17/26, d/c date 7/6/26.

The EMAR was not signed as given and left blank on - 8: 00 a.m. dose- 6/27, 6/28, 12:00 p.m. dose- 6/14, 6/21, 6/27, 6/28, 4:00 p.m. dose- 6/6, 6/13, 8:00 p.m. dose- 6/6, 6/7, 6/13, 6/19.

Eliquis(blood thinner) 5 mg 1 tablet by mouth twice daily for atrial flutter, start date 6/17/26, d/c date 7/6/26.

The EMAR was not signed as given and left blank on - 8:00 a.m. dose- 6/27, 6/28, 8:00 p.m. dose - 6/6, 6/7, 6/13, 6/19.

fluticasone prop (allergy medication) 50 mcg 1 spray each nostril twice daily use

Administration policy (last revised 10/25/19) will be reviewed and updated as needed to reinforce real-time documentation expectations, the escalation process for identified gaps, and accountability measures for repeated non-compliance.

¿ **New hire/agency orientation**

–EMAR documentation expectations will be incorporated into new hire and agency/contract staff orientation prior to any staff member being assigned independent medication administration duties.

4. Monitoring to Ensure the Corrective Action Is Effective (QA Program)

¿ **Audit tool and schedule –**

the DON, Unit Manager, licensed nurse, or designee will complete a structured EMAR Documentation Compliance Audit Tool according to the following schedule: daily for 30 days, then 5 days/week for 30 days, then 3 days/week for 30 days, then

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allergies, start date 6/17/26.

The EMAR was not signed as given and left blank on - 8: 00 a.m. dose- 6/27, 6/28, 8:00 p.m. dose- 6/19.

furosemide (diuretic) 40 mg 1 tablet by mouth daily, start date, 6/18. 26, d/c date 7/6/26.

The EMAR was not signed as given and left blank on - 6/27, 6/28.

gabapentin (anticonvulsant) 300 mg by mouth twice a day for neuropathy, start date 6/17/26, d/c date 7/6/26.

The EMAR was not signed as given and left blank on - 8:00 a.m. dose- 6/27, 6/28, 8:00 p.m. dose- 6/6, 6/7, 6/12, 6/19.

galantamine HBR (dementia medication) 8 mg 1 tablet by mouth twice daily for dementia, start date 6/17/26, d/c 7/6/26.

The EMAR was not signed as given and left blank on - 8:00 a.m. dose- 6/27, 6/28, 8:00 p.m. dose - 6/6, 6/7, 6/13, 6/19.

gemtesa (urinary antispasmodics) 75 mg 1 tablet by mouth daily for overactive bladder, start date 6/18/26. d/c date 7/6/26.

The EMAR was not signed as given and left blank on - 6/27,

weekly for 30 days.

¿ **Escalation for recurrence** – any individual staff member with a recurring documentation gap identified during monitoring will receive immediate, focused re-education and will be subject to increased individual audit oversight until compliance is sustained.

¿ **QAPI reporting** –audit results and trends will be reviewed monthly by the facility's QAPI committee, with the goal of sustaining EMAR documentation compliance at or above 95% before reducing audit frequency per the schedule above.

Immediate resident-specific actions (physician notification and clinical chart review for Residents B, C, and D) will be completed within 5 business days of this plan of correction's acceptance. The facility-wide audit described in Section 2 will be completed within 15 days of acceptance. All systemic changes described in Section 3, including staff re-education and competency

6/28.

Iprat-albut 0.5-3 mg/3 ml(milliliter), nebulizer treatment 3 x a day routinely, indications for use, shortness of breath/wheezing, start date 6/17/26, d/c date 7/6/26.

The EMAR was not signed as given and left blank on - 8:00 a.m. dose- 6/8, 6/10, 12:00 p.m.- 6/8, 6/10, 6/20, 6/21, 8:00 p.m. dose- 6/6, 6/7, 6/13, 6/19.

levothyroxine(thyroid hormone) 50 mcg give 1 tablet orally one time a day every Mon, Tues, Wed, Thu, Fri, for thyroid maintenance, start date 5/29/26, d/c date 7/6/26.

The EMAR was not signed as given and left blank on - 6/4, 6/8, 6/11, 6/23, 6/25.

loratadine (antihistamine) 10 mg 1 tablet by mouth for allergies, start date 6/18/26, d/c date 7/6/26.

The EMAR was not signed as given and left blank on - 6/27, 6/28.

lorsartan pot (antihypertensive) 25 mg 1 tablet by mouth daily, start date 6/18/26, d/c date 7/6/26.

validation, will be fully implemented by:

**August
30, 2026**

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The EMAR was not signed as given and left blank on- 6/27, 6/28.

pantoprazole DR 20 (proton pump inhibitor) mg 1 tablet by mouth daily for gerd, start date 6/18/26, d/c date 7/6/26.

The EMAR was not signed as given and left blank on -6/27, 6/28.

prazosin (alpha -1 adrenergic blocker) 2 mg capsule, 1 capsule by mouth at bedtime, start date 1/7/26, d/c date 7/6/26.

The EMAR was not signed as given and left blank on - 6/6, 6/7, 6/13, 6/19.

ropinirole (dopamine angonists) 3 mg take 1 tablet by mouth 3 times a daily, start date 6/17/26, d/c 7/6/26.

The EMAR was not signed as given and left blank on - 8:00 a.m. dose - 6/27, 6/28, 12:00 p.m. dose- 6/14, 6/21, 6/27, 6/28, 8:00 p.m. dose- 6/6, 6/7, 6/13, 6/19.

simvastatin (cholesterol medication) 20 mg take 1 tablet by mouth at bedtime, start date 6/17/26, d/c date 7/6/26.

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The EMAR was not signed as given and left blank on - 6/6, 6/7, 6/13, 6/19.

tamsulosin(alpha adrenergic antagonists) 0.4 mg 1 capsule daily for overactive bladder, start date 6/17/26, d/c date 7/6/26.

The EMAR was not signed as given and left blank on - 6/6, 6/7, 6/13, 6/19.

lantus solarstar (long acting basal insulin) 100 units/M inject 48 unit subqutaneously in the evening for diabetes, start date 6/18/26, d/c date 7/6/26.

The EMAR was not signed as given and left blank on - 6/12, 6/28.

melatonin 10 mg give one capsule orally at bedtime for insomnia, start date 6/3/26, d/c date 7/6/26.

The EMAR was not signed as given and left blank on - 6/6, 6/7, 6/19.

metoprolol ER (antihypertensive) 25 mg 1 tablet by mouth daily hold id SBP (systolic blood pressure) < 90, DBP (diastolic blood pressure) < 60, or pulse < 50, start date 6/20/26, d/c date 7/6/26.

The EMAR was not signed as

given and left blank on - 6/27, 6/28.

hydroxyzine 10 mg 1 tablet by mouth twice daily for itching, start date 1/29/26, d/c date 7/6/26.

The EMAR was not signed as given and left blank on - 7:30 a.m. dose- 6/27/6/28, 7:30 p.m. dose- 6/6, 6/7, 6/19.

lorazepam 0.5 mg take 1 tablet daily by mouth twice a day, start date 3/23/26, d/c date 7/6/26.

The EMAR was not signed as given and left blank on - 8:00 a.m. dose - 6/27, 6/28, 8:00 p.m., dose- 6/6, 6/7, 6/13, 6/19.

depakote (anticonvulsant) oral delayed release 125 mg give 125 mg by mouth three times a day, administer depakote 125 mg with 250 mg po (orally) of for total dose of 375 mg TID (three times a day) start date 6/4/26, d/c date 7/6/26.

The EMAR was not signed as given and left blank on - 8:00 a.m. dose- 6/27, 6/28, 2:00 p.m. dose - 6/5, 6/14, 6/21, 6/27, 6/28, 8:00 p.m. dose- 6/6, 6/7, 6/13, 6/19.

depakote oral tablet 250 mg give 250 mg by mouth three times a day administer depakote 250 mg with 125 mg po TID for a total dose of 375 mg, start

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date 6/4/26, d/c date 7/6/26.

The EMAR was not signed as given and left blank on - 8:00 a.m.- 6/27, 6/28, 2:00 p.m.- 6/5, 6/14, 6/20, 6/27, 6/28, 8:00 p.m. dose - 6/6, 6/7, 6/13, 6/19.

homology (insulin) 100 units/ml inject 12 unit subcutaneously three times a day for diabetes, start date 6/17/26, d/c date 7/6/26.

The EMAR was not signed as given and left blank on - 11:30 a.m. dose- 6/11, 4:30 a.m. dose- 6/12, 6/28.

7/1- 11:30 a.m. dose

hydrocodone acetaminophen 10-325 mg give 1 tablet by mouth four times a day for chronic pain, start date 2/23/26, d/c date 7/6/26.

The EMAR was not signed as given and left blank on - 8:00 a.m. dose- 6/27, 6/28, 12:00 p.m dose- 6/14, 6/21, 6/27, 6/28, 4:00 p.m. dose- 6/6, 6/7, 6/13, 8:00 p.m. dose- 6/6, 6/7, 6/13, 6/19.

Mounjaro 10mg/0.5 ml pen inject 10 mg subcutaneously one time a day every Wed, start date, 5/20/26, d/c date 7/6/26.

The EMAR was not signed as given and left blank on - 7/1.

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3. On 7/14/26 at 10:38 a.m. Resident D's clinical record was reviewed, diganoses included but were not limited to, hypertension, acquired absence of right leg above knee, cardiomyopathy.

The June and July 2026 EMAR (Electronic Medication Administration Record) were reviewed and included but were not limited to the following orders:

carvedilol (antihypertensive) 12.5 mg 1 tablet by mouth twice daily, start date 5/20/24.

The EMAR was not signed as given and left blank on - 8:00 a.m. dose- 7/2, 7/4, 7/5, 7/8, 7/9, 7/11, 7/12, 5:00 p.m.dose- 7/2, 7/4, 7/5, 7/8, 7/9, 7/10.

naproxen (nonsteroidal antiinfalmmatory) 500 mg 1 tablet by mouth twice a day for pain, start date, 4/9/26.

The EMAR was not signed as given and left blank on - 8:00 a.m.- 7/2, 7/4, 7/5, 7/8, 7/9, 7/11, 7/12, 5:00 p.m. dose- 7/2, 7/3, 7/4, 7/5, 7/8, 7/9, 7/10.

aldactone (antihypertensive) 50 mg give 1 tablet by mouth one time a day, start date 4/27/23.

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The EMAR was not signed as given and left blank on - 7/2, 7/4, 7/5, 7/8, 7/9, 7/11, 7/12.

allopurinol (xanthine oxidase inhibitor) 100 mg 1 tablet by mouth daily, start date 7/17/25.

The EMAR was not signed as given and left blank on - 7/2, 7/4, 7/5, 7/8, 7/9, 7/11, 7/12.

loratadine (antihistamine) 10 mg give 1 tablet by mouth in the morning , start date 12/10/24.

The EMAR was not signed as given and left blank on - 7/2, 7/4, 7/5, 7/8, 7/9, 7/11, 7/12.

lorsarton (antihypertensive) 25 mg 1 tablet by mouth daily, start date 3/27/25.

The EMAR was not signed as given and left blank on - 7/2, 7/4, 7/5, 7/8, 7/9, 7/11, 7/12.

montelukast (leukotriene modifier) 10 mg 1 tablet by mouth at bedtime, start date 12/10/24.

The EMAR was not signed as given and left blank on - 7/1, 7/2, 7/3, 7/4, 7/5, 7/8, 7/9, 7/10.

amlodipine besy (antipypertensive) 5 mg give 1 tablet orally two times a day, start date 6/4/26.

The EMAR was not signed as

given and left blank on - 8:00 a.m. dose- 7/2, 7/4, 7/5, 7/8, 7/9, 7/11, 7/12, 5:00 p.m.- 7/3, 7/4, 7/5, 7/8, 7/10.

On 7/15/26 at 11:15 a.m. RN 2 indicated if a resident refuses a medication or not available to take a medication, a code is supposed to be put in the EMAR, if a medication is given the nurse is supposed to sign on the EMAR.

On 7/15/26 at 12:12 p.m., the Director of Nursing indicated nursing staff should be signing the EMAR if a medication is given, if not a code as to why not given should be documented.

On 7/15/26 at 12:45 p.m. the DON provided the current policy on medication administration, with a revision date of 10/25/19. The policy included but was not limited to: All medications should be administered as prescribed...3. the nurse administering the medication is to initial the resident's medication record in the space provided under the date for that drug and the schedule time of administration. 4. If a regularly scheduled medication is withheld or refused the nurse is to initial and circle the initial in the resident's medication record. The physician will be notified if the resident consistently refuses medications

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or treatments. Is the medication is out of stock, the pharmacy contacted to deliver the medication as soon as possible. The physician will be notiifed if the resident consistantly refuses medications/treatmnts or if the medication is out of stock and cannot be delivered in a timely manner...

This citation related to Intake 470692.

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting provided it is determined that other safeguards provide sufficient protection to the patients. (See instructions.)

LABORATORY DIRECTOR'S OR
PROVIDER/SUPPLIER REPRESENTATIVE'S
SIGNATUREKatie Goldsberry

TITLEAdministrator

(X6) DATE07/30/2026