STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTIONS	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
		A. BUILDING B. WING	05/04/2022

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
LAKE MEADOWS SENIOR ASSISTED LIVING	11570 E 126TH STREET, FISHERS, , 46037

(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 Complaints IN00379192 and IN00378889. This visit included a Residential COVID-19 Quality Assurance Walk Through. Complaint IN00379192: Substantiated. State residential findings related to the allegations are cited at R240 and R407. Complaint IN00378889: Substantiated. No State Residential Findings related to the allegations were cited. Survey dates: 5/4/22 Facility number: 014910 Residential Census: 114 These state residential findings are cited in accordance with 410 IAC 16.2-5. Quality review completed on May 9, 2022	R 0000	Disclaimer: The submission of this plan correction does not indicate an admission by Lake Meadows Senior Assisted Living that the findings and allegations contained herein are an accurate, true representation of the quality of care provided, and living environment provided to the residents of Lake Meadows Senior Assisted Living. The facility recognizes its obligation to provide legally and medically necessary care and services to its residents in an economic and efficient manner. The facility hereby maintains it is in substantial compliance with the requirements of participation for Assisted Living Facilities. To this end, the plan of correction shall serve as the credible allegation of compliance with all state and federal requirements governing the management of this facility. It is thus submitted as a matter of statue only. The facility respectfully requests from the department a desk review for substantial compliance.	

R 0240	Health Services - Deficiency 410 IAC 16.2-5-4(d) (d) Personal care, and assistance with activities of daily living, shall be provided based upon individual needs and preferences. Based on observation, interview and record review, the facility failed to administer medications as ordered for 1 of 3 residents reviewed. (Resident Z) Findings include: The clinical record for Resident Z was reviewed on 5/4/22 at 2:00 p.m. The diagnosis included, but was not limited to, dementia. A physician order dated 4/19/21 indicated Resident Z was to receive a lozenge [dissolvable tablet] of 1.25 milligrams of BI-EST at bedtime for hormone replacement. The April 2022 Medication Administration Record (MAR) for Resident Z indicated the lozenge was to be administered at 8:00 p.m., daily. The following days the medication was not documented as administered: 4/1/22, 4/9/22, 4/16/22, 4/19/22, 4/23/22, 4/24/22, 4/27/22, and 4/28/22 The May 2022 MAR indicated	R 0240	**R240** **Corrective Actions** It is the intent of Lake Meadows to follow all Physician orders and ensure their plan of care is followed and appropriate interventions used to meet the resident's needs. The facility's Nursing leadership team has reviewed the facility's policies and procedures regarding Physician's orders and medication policy and procedures. Current deficiencies were identified, and current practices updated in consideration of this deficiency and facility protocols. The Director of Nursing or Designee will audit delivery and completion of Physician orders daily while on duty. Nursing staff will be educated, and in-servicing will be provided by the Director of Nursing or Designee to all nursing staff no later than 06/03/2021.	06/03/2022

	Resident Z had not received the lozenge medication on 5/3/22. Qualified Medication Aide (QMA) 6 documented the medication as not available. During a Confidential Interview on 5/4/22 at 12:42 p.m., they indicated Resident Z had a troche (dissolvable tablet) medication that was ordered to be administered. The staff were documenting as administered, but it was not available to administer. The medication had not been available to administer to the resident for months. An observation was made of the memory care medication cart with Qualified Nursing Assistants (QMA) 5 and 6 on 5/4/22 at 3:16 p.m. The cart was observed with Resident Z's medications. QMA 5 was unable to locate the troche 1.25 milligrams of BI-EST that was to be administered in the evening. QMA 6 indicated the family was suppose to supply, but never has. QMA 5 and QMA 6 indicated they have never seen her hormone replacement medication in the cart to administer. An interview was conducted with Director of Nursing on 5/4/22 at 3:52 p.m. She indicated the staff were waiting for Resident Z's troche 1.25 milligrams of BI-EST to be sent		**Identifications of others** All residents have the potential to be affected by this alleged deficiency. **Measures/Systemic changes** The Director of Nursing will educate clinical staff on following physician orders and documenting in the eMAR for completion. Clinical staff will also be in-serviced on the use of the service plan of care documents to ensure consistent delivery of care including following Physician orders. In addition, the Administrator/Director of Nursing will review the 24/72 hours reports on a timely basis for noted changes of condition and appropriate follow up by nursing staff. **Monitoring** Compliance will be monitored by use of an audit process and tracking form. The Director of Nursing/designee will conduct an audit of 10% of the current resident’s charts as follows: 3 times weekly for	

	from the pharmacy. This State Tag relates to complaint IN00379192. Based on observation, interview and record review, the facility failed to administer medications as ordered for 1 of 3 residents reviewed. (Resident Z) Findings include: The clinical record for Resident Z was reviewed on 5/4/22 at 2:00 p.m. The diagnosis included, but was not limited to, dementia. A physician order dated 4/19/21 indicated Resident Z was to receive a lozenge [dissolvable tablet] of 1.25 milligrams of BI-EST at bedtime for hormone replacement. The April 2022 Medication Administration Record (MAR) for Resident Z indicated the lozenge was to be administered at 8:00 p.m., daily. The following days the medication was not documented as administered: 4/1/22, 4/9/22, 4/16/22, 4/19/22, 4/23/22, 4/24/22, 4/27/22, and 4/28/22		one month; weekly for two months and monthly thereafter. Audit will note any physician orders not followed appropriately, if resolved and how. Any deficiencies found in the audits will be corrected at the time discovered and retraining provided to staff or additional monitoring conducted, as necessary, to ensure compliance. Findings will be reported to the QAPI Committee for review and recommendations. **Compliance Date is June 3, 2022**	

	The May 2022 MAR indicated Resident Z had not received the lozenge medication on 5/3/22. Qualified Medication Aide (QMA) 6 documented the medication as not available. During a Confidential Interview on 5/4/22 at 12:42 p.m., they indicated Resident Z had a troche (dissolvable tablet) medication that was ordered to be administered. The staff were documenting as administered, but it was not available to administer. The medication had not been available to administer to the resident for months. An observation was made of the memory care medication cart with Qualified Nursing Assistants (QMA) 5 and 6 on 5/4/22 at 3:16 p.m. The cart was observed with Resident Z's medications. QMA 5 was unable to locate the troche 1.25 milligrams of BI-EST that was to be administered in the evening. QMA 6 indicated the family was suppose to supply, but never has. QMA 5 and QMA 6 indicated they have never seen her hormone replacement medication in the cart to administer. An interview was conducted with Director of Nursing on 5/4/22 at 3:52 p.m. She indicated the staff were waiting for Resident Z's troche 1.25			

	milligrams of BI-EST to be sent from the pharmacy. This State Tag relates to complaint IN00379192.			
R 0407	Infection Control - Noncompliance 410 IAC 16.2-5-12(b)(1-4) (b) The facility must establish an infection control program that includes the following: (1) A system that enables the facility to analyze patterns of known infectious symptoms. (2) Provides orientation and in-service education on infection prevention and control, including universal precautions. (3) Offering health information to residents, including, but not limited to, infection transmission and immunizations. (4) Reporting communicable disease to public health authorities. Based on interview and record review, the facility failed to properly prevent and/or contain COVID-19 by not reporting staff and residents that had tested positive for COVID-19 to Redcap or Indiana Department of Health, and not increasing monitoring of residents that had COVID-19 for 23 of 114 residents reviewed for COVID-19 and 3 of 3 staff members reviewed for infection	R 0407	R 0407 **Corrective Actions** It is Lake Meadows Senior Assisted Living's intention to provide every resident with a safe, sanitary and comfortable environment and help prevent the development and transmission of diseases and infection. Upon the discovery of this allegation of noncompliance, Lake Meadows Assisted Living will immediately began reporting all positive covid cases via redcap. Upon clarification with the ISDH and current newsletters regarding RedCap reporting the facility is required to report all positive COVID cases to the ISDH via Redcap. **Identifications of others** All residents had the potential to be affected by the	06/03/2022

control. (Residents' B, C, D, E, F, G, H, J, K, L, M, N, O, P, Q, R, S, T, U, V, W, X, and Y)

Findings include:

1. During a confidential interview on 5/4/22 at 12:42 p.m., they indicated the facility had positive staff and residents of COVID-19.

An interview was conducted with the Director of Nursing (DON) and the Executive Director (ED) on 5/4/22 at 9:10 a.m. The DON indicated there were residents currently in isolation with COVID-19. The facility was in outbreak testing and had been since 4/22/22 when it was identified the facility's first positive resident case. They have not reported the cases to the Redcap system. They were told they no longer need to report positive COVID-19 cases to Redcap.

A list of COVID-19 positive residents and staff were provided by the ED on 5/4/22 at 10:48 a.m. It indicated the following residents and staff, and the date he or she tested positive:

Residents' B, C, D, E, F, G, H, J, K and L = all tested positive on 4/22/22,

Residents' M, Q, S, T, V, W, X = all tested positive on 4/26/22,

noncompliance practice.

Measures/Systemic changes

To ensure noncompliance does not reoccur, going forth, Lake Meadows Assisted Living will provide education to ED/DON on COVID reporting guidelines on or before 05/27/2022. ED will monitor ISDH newsletters weekly and communicate any changes related to COVID reporting to the DON upon notification.

Monitoring

The ED/designee will review ISDH newsletters regarding COVID-19 reporting. Upon notification of any reporting related changes in regard to COVID-19 this information will be immediately passed on to the DON. Facility will keep a COVID positive log with dates reported to ISDH Redcap. Findings will be reported to the QAPI Committee for review and recommendations.

Compliance Date is June 3,

	Residents' N, O, P, R and U = all tested positive on 4/27/22, and Resident Y = tested positive on 4/28/22 Employee 1 = tested positive on 4/25/22, Employee 2 = tested positive on 4/25/22 and Employee 3 = tested positive on 4/20/22 The Indiana Department of Health Long-Term Care (LTC) Newsletter dated 3/10/22 indicated a link for facilities to refer to for reporting guidance. The guidance document, "LTC Facility COVID-19 Data Submission Guidelines" last updated on 3/8/22, indicated assisted livings were to report to the Indiana Department of Health gateway system and Redcap within 24 hours of outbreak cases. "...Outbreak Case Alert: 1 or more confirmed resident and/or staff cases in a facility where no confirmed cases were identified during 4-week period prior to the most recent week. The purpose of this reporting is to identify facility associated infections. Facilities do not count resident cases that were positive upon admission OR new admission that turns positive while in transmission-based precautions (TBP) or staff cases that did not		**2022**	

enter the building during the infectious period (48 hours) before their positive test or symptoms and after the onset of symptoms or positive test)..."

2a. The clinical record for Resident V was reviewed on 5/4/22 at 11:18 a.m. The diagnosis included, but was not limited to, type 2 diabetes mellitus. Resident was positive for COVID on 4/26/22.

A physician order dated 3/23/22 indicated, "Monitor Resident for Signs and Symptoms of Covid-19. Monitor and record temperature and POsat % [oxygen saturations percentages]. Ask resident if they are having any of the following signs and symptoms: ? [question] fever or chills? Cough? Shortness of breath or difficulty breathing? fatigue? Muscle or body aches? headache? New loss of taste or smell? sore throat? congestion or runny nose? Nausea or vomiting? Diarrhea Notify Nurse with any positive response or elevated temperature. one time a day. COVID screening."

The April and May 2022 Medication Record (MAR) indicated Resident V was monitored once a day for COVID-19.

2b. The clinical record for Resident W was reviewed on

5/4/22 at 11:18 a.m. The diagnosis included, but was not limited to, acute cough. Resident W was positive for COVID on 4/26/22.

A physician order dated 12/13/22 indicated, "Monitor Resident for Signs and Symptoms of Covid-19. Monitor and record temperature and POsat % [oxygen saturations percentages]. Ask resident if they are having any of the following signs and symptoms: ? [question] fever or chills? Cough? Shortness of breath or difficulty breathing? fatigue? Muscle or body aches? headache? New loss of taste or smell? sore throat? congestion or runny nose? Nausea or vomiting? Diarrhea Notify Nurse with any positive response or elevated temperature. in the evening COVID screening."

The April and May 2022 Medication Record (MAR) indicated Resident W was monitored once a day for COVID-19.

2c. The clinical record for Resident X was reviewed on 5/4/22 at 11:20 a.m. The diagnosis included, but was not limited to, stroke. Resident X was positive for COVID on 4/26/22.

A physician order dated 10/23/22 indicated, "Monitor

Resident for Signs and Symptoms of COVID-19. Monitor and record temperature and POsat % [oxygen saturations percentages]. Ask resident if they are having any of the following signs and symptoms: ? [question] fever or chills? Cough? Shortness of breath or difficulty breathing? fatigue? Muscle or body aches? headache? New loss of taste or smell? sore throat? congestion or runny nose? Nausea or vomiting? Diarrhea Notify Nurse with any positive response or elevated temperature. in the evening COVID screening."

The April and May 2022 Medication Record (MAR) indicated Resident X was monitored once a day for COVID-19.

2d. The clinical record for Resident Y was reviewed on 5/4/22 at 11:22 a.m. The diagnosis included, but was not limited to, stroke. Resident Y was positive for COVID on 4/28/22.

A physician order dated 12/13/21 indicated, "Monitor Resident for Signs and Symptoms of COVID-19. Monitor and record temperature and POsat % [oxygen saturations percentages]. Ask resident if they are having any of the following signs and symptoms: ? [question] fever or

chills? Cough? Shortness of breath or difficulty breathing? fatigue? Muscle or body aches? headache? New loss of taste or smell? sore throat? congestion or runny nose? Nausea or vomiting? Diarrhea Notify Nurse with any positive response or elevated temperature. in the evening COVID screening."

The April and May 2022 Medication Record (MAR) indicated Resident Y was monitored once a day for COVID-19.

2e. The clinical record for Resident Y was reviewed on 5/4/22 at 11:25 a.m. The diagnosis included, but was not limited to, stroke. Resident Y was positive for COVID on 4/28/22.

A physician order dated 11/16/22 indicated, "Monitor Resident for Signs and Symptoms of COVID-19. Monitor and record temperature and POsat % [oxygen saturations percentages]. Ask resident if they are having any of the following signs and symptoms: ? [question] fever or chills? Cough? Shortness of breath or difficulty breathing? fatigue? Muscle or body aches? headache? New loss of taste or smell? sore throat? congestion or runny nose? Nausea or vomiting? Diarrhea Notify Nurse with any positive response or

elevated temperature. in the evening COVID screening."

The April and May 2022 Medication Record (MAR) indicated Resident Y was monitored once a day for COVID-19.

2f. The clinical record for Resident C was reviewed on 5/4/22 at 11:25 a.m. The diagnosis included, but was not limited to, stroke. Resident C was positive for COVID on 4/22/22.

A physician order dated 2/1/22 indicated, "Monitor Resident for Signs and Symptoms of COVID-19. Monitor and record temperature and POsat % [oxygen saturations percentages]. Ask resident if they are having any of the following signs and symptoms: ? [question] fever or chills? Cough? Shortness of breath or difficulty breathing? fatigue? Muscle or body aches? headache? New loss of taste or smell? sore throat? congestion or runny nose? Nausea or vomiting? Diarrhea Notify Nurse with any positive response or elevated temperature. in the evening COVID screening."

The April and May 2022 Medication Record (MAR) indicated Resident C was monitored once a day for COVID-19.

2g. The clinical record for Resident G was reviewed on 5/4/22 at 11:25 a.m. The diagnosis included, but was not limited to, chronic kidney disease. Resident G was positive for COVID on 4/22/22.

A physician order dated 2/1/22 indicated, "Monitor Resident for Signs and Symptoms of COVID-19. Monitor and record temperature and POsat % [oxygen saturations percentages]. Ask resident if they are having any of the following signs and symptoms: ? [question] fever or chills? Cough? Shortness of breath or difficulty breathing? fatigue? Muscle or body aches? headache? New loss of taste or smell? sore throat? congestion or runny nose? Nausea or vomiting? Diarrhea Notify Nurse with any positive response or elevated temperature. in the evening COVID screening."

The April and May 2022 Medication Record (MAR) indicated Resident G was monitored once a day for COVID-19.

2h. The clinical record for Resident D was reviewed on 5/4/22 at 11:30 a.m. The diagnosis included, but was not limited to, dementia. Resident D was positive for COVID on 4/22/22.

A physician order dated 1/18/22 indicated, "Monitor Resident for Signs and Symptoms of COVID-19. Monitor and record temperature and POsat % [oxygen saturations percentages]. Ask resident if they are having any of the following signs and symptoms: ? [question] fever or chills? Cough? Shortness of breath or difficulty breathing? fatigue? Muscle or body aches? headache? New loss of taste or smell? sore throat? congestion or runny nose? Nausea or vomiting? Diarrhea Notify Nurse with any positive response or elevated temperature. in the evening COVID screening."

The April and May 2022 Medication Record (MAR) indicated Resident D was monitored once a day for COVID-19.

2i. The clinical record for Resident E was reviewed on 5/4/22 at 11:33 a.m. The diagnosis included, but was not limited to, dementia. Resident E was positive for COVID on 4/22/22.

A physician order dated 2/17/22 indicated, "Monitor Resident for Signs and Symptoms of COVID-19. Monitor and record temperature and POsat % [oxygen saturations percentages]. Ask resident if they are having any of the

following signs and symptoms: ? [question] fever or chills? Cough? Shortness of breath or difficulty breathing? fatigue? Muscle or body aches? headache? New loss of taste or smell? sore throat? congestion or runny nose? Nausea or vomiting? Diarrhea Notify Nurse with any positive response or elevated temperature. every day shift COVID screening."

The April and May 2022 Medication Record (MAR) indicated Resident E was monitored once a day for COVID-19.

2j. The clinical record for Resident F was reviewed on 5/4/22 at 11:40 a.m. The diagnosis included, but was not limited to, dementia. Resident F was positive for COVID on 4/22/22.

A physician order dated 2/1/22 indicated, "Monitor Resident for Signs and Symptoms of COVID-19. Monitor and record temperature and POsat % [oxygen saturations percentages]. Ask resident if they are having any of the following signs and symptoms: ? [question] fever or chills? Cough? Shortness of breath or difficulty breathing? fatigue? Muscle or body aches? headache? New loss of taste or smell? sore throat? congestion or runny nose? Nausea or

vomiting? Diarrhea Notify Nurse with any positive response or elevated temperature. in the evening COVID screening."

The April and May 2022 Medication Record (MAR) indicated Resident F was monitored once a day for COVID-19.

2k. The clinical record for Resident H was reviewed on 5/4/22 at 11:42 a.m. The diagnosis included, but was not limited to, dementia. Resident H was positive for COVID on 4/22/22.

A physician order dated 12/19/22 indicated, "Monitor Resident for Signs and Symptoms of COVID-19. Monitor and record temperature and POsat % [oxygen saturations percentages]. Ask resident if they are having any of the following signs and symptoms: ? [question] fever or chills? Cough? Shortness of breath or difficulty breathing? fatigue? Muscle or body aches? headache? New loss of taste or smell? sore throat? congestion or runny nose? Nausea or vomiting? Diarrhea Notify Nurse with any positive response or elevated temperature. in the evening COVID screening."

The April and May 2022 Medication Record (MAR) indicated Resident H was

monitored once a day for COVID-19.

2l. The clinical record for Resident J was reviewed on 5/4/22 at 11:45 a.m. The diagnosis included, but was not limited to, dementia. Resident J was positive for COVID on 4/22/22.

A physician order dated 1/18/22 indicated, "Monitor Resident for Signs and Symptoms of COVID-19. Monitor and record temperature and POsat % [oxygen saturations percentages]. Ask resident if they are having any of the following signs and symptoms: ? [question] fever or chills? Cough? Shortness of breath or difficulty breathing? fatigue? Muscle or body aches? headache? New loss of taste or smell? sore throat? congestion or runny nose? Nausea or vomiting? Diarrhea Notify Nurse with any positive response or elevated temperature. in the evening COVID screening."

The April and May 2022 Medication Record (MAR) indicated Resident J was monitored once a day for COVID-19.

2m. The clinical record for Resident B was reviewed on 5/4/22 at 11:47 a.m. The diagnosis included, but was not limited to, dementia. Resident B

was positive for COVID on 4/22/22.

A physician order dated 3/10/22 indicated, "Monitor Resident for Signs and Symptoms of COVID-19. Monitor and record temperature and POsat % [oxygen saturations percentages]. Ask resident if they are having any of the following signs and symptoms: ? [question] fever or chills? Cough? Shortness of breath or difficulty breathing? fatigue? Muscle or body aches? headache? New loss of taste or smell? sore throat? congestion or runny nose? Nausea or vomiting? Diarrhea Notify Nurse with any positive response or elevated temperature. every day shift for COVID screening."

The April and May 2022 Medication Record (MAR) indicated Resident B was monitored once a day for COVID-19.

2n. The clinical record for Resident K was reviewed on 5/4/22 at 11:50 a.m. The diagnosis included, but was not limited to, dementia. Resident K was positive for COVID on 4/22/22.

A physician order dated 2/1/22 indicated, "Monitor Resident for Signs and Symptoms of COVID-19. Monitor and record temperature and POsat %

	[oxygen saturations percentages]. Ask resident if they are having any of the following signs and symptoms: ? [question] fever or chills? Cough? Shortness of breath or difficulty breathing? fatigue? Muscle or body aches? headache? New loss of taste or smell? sore throat? congestion or runny nose? Nausea or vomiting? Diarrhea Notify Nurse with any positive response or elevated temperature. every day shift for COVID screening." The April and May 2022 Medication Record (MAR) indicated Resident K was monitored once a day for COVID-19. 2o. The clinical record for Resident L was reviewed on 5/4/22 at 11:52 a.m. The diagnosis included, but was not limited to, dementia. Resident L was positive for COVID on 4/22/22. A physician order dated 2/1/22 indicated, "Monitor Resident for Signs and Symptoms of COVID-19. Monitor and record temperature and POsat % [oxygen saturations percentages]. Ask resident if they are having any of the following signs and symptoms: ? [question] fever or chills? Cough? Shortness of breath or difficulty breathing? fatigue? Muscle or body aches?			

	headache? New loss of taste or smell? sore throat? congestion or runny nose? Nausea or vomiting? Diarrhea Notify Nurse with any positive response or elevated temperature. every day shift for COVID screening." The April and May 2022 Medication Record (MAR) indicated Resident L was monitored once a day for COVID-19. 2p. The clinical record for Resident M was reviewed on 5/4/22 at 11:56 a.m. The diagnosis included, but was not limited to, Cerebral Palsy. Resident M was positive for COVID on 4/26/22.			

A physician order dated 1/20/22 indicated, "Monitor Resident for Signs and Symptoms of COVID-19. Monitor and record temperature and POsat % [oxygen saturations percentages]. Ask resident if they are having any of the following signs and symptoms: ? [question] fever or chills? Cough? Shortness of breath or difficulty breathing? fatigue? Muscle or body aches? headache? New loss of taste or smell? sore throat? congestion or runny nose? Nausea or vomiting? Diarrhea Notify Nurse with any positive response or elevated temperature. every evening shift for COVID screening."

The April and May 2022 Medication Record (MAR) indicated Resident M was monitored once a day for COVID-19.

2q. The clinical record for Resident N was reviewed on 5/4/22 at 11:59 a.m. The diagnosis included, but was not limited to, kidney failure. Resident N was positive for COVID on 4/27/22.

A physician order dated 3/17/22 indicated, "Monitor Resident for Signs and Symptoms of COVID-19. Monitor and record temperature and POsat % [oxygen saturations percentages]. Ask resident if

they are having any of the following signs and symptoms: ? [question] fever or chills? Cough? Shortness of breath or difficulty breathing? fatigue? Muscle or body aches? headache? New loss of taste or smell? sore throat? congestion or runny nose? Nausea or vomiting? Diarrhea Notify Nurse with any positive response or elevated temperature. every evening shift for COVID screening."

The April and May 2022 Medication Record (MAR) indicated Resident N was monitored once a day for COVID-19.

2r. The clinical record for Resident O was reviewed on 5/4/22 at 12:00 p.m. The diagnosis included, but was not limited to, chronic lymphocytic leukemia. Resident O was positive for COVID on 4/27/22.

A physician order dated 2/24/22 indicated, "Monitor Resident for Signs and Symptoms of COVID-19. Monitor and record temperature and POsat % [oxygen saturations percentages]. Ask resident if they are having any of the following signs and symptoms: ? [question] fever or chills? Cough? Shortness of breath or difficulty breathing? fatigue? Muscle or body aches? headache? New loss of taste or

smell? sore throat? congestion or runny nose? Nausea or vomiting? Diarrhea Notify Nurse with any positive response or elevated temperature. every day shift for COVID screening."

The April and May 2022 Medication Record (MAR) indicated Resident O was monitored once a day for COVID-19.

2s. The clinical record for Resident P was reviewed on 5/4/22 at 12:03 p.m. The diagnosis included, but was not limited to, stroke. Resident P was positive for COVID on 4/27/22.

A physician order dated 2/14/22 indicated, "Monitor Resident for Signs and Symptoms of COVID-19. Monitor and record temperature and POsat % [oxygen saturations percentages]. Ask resident if they are having any of the following signs and symptoms: ? [question] fever or chills? Cough? Shortness of breath or difficulty breathing? fatigue? Muscle or body aches? headache? New loss of taste or smell? sore throat? congestion or runny nose? Nausea or vomiting? Diarrhea Notify Nurse with any positive response or elevated temperature. every evening shift for COVID screening."

The April and May 2022 Medication Record (MAR) indicated Resident P was monitored once a day for COVID-19.

2t. The clinical record for Resident Q was reviewed on 5/4/22 at 12:06 p.m. The diagnosis included, but was not limited to, kidney failure. Resident Q was positive for COVID on 4/26/22.

A physician order dated 9/11/22 indicated, "Monitor Resident for Signs and Symptoms of COVID-19. Monitor and record temperature and POsat % [oxygen saturations percentages]. Ask resident if they are having any of the following signs and symptoms: ? [question] fever or chills? Cough? Shortness of breath or difficulty breathing? fatigue? Muscle or body aches? headache? New loss of taste or smell? sore throat? congestion or runny nose? Nausea or vomiting? Diarrhea Notify Nurse with any positive response or elevated temperature. at bedtime."

The April and May 2022 Medication Record (MAR) indicated Resident Q was monitored once a day for COVID-19.

2u. The clinical record for Resident R was reviewed on

5/4/22 at 12:05 p.m. The diagnosis included, but was not limited to, emphysema [damage of air sacs of the lungs]. Resident B was positive for COVID on 4/27/22.

A physician order dated 1/3/22 indicated, "Monitor Resident for Signs and Symptoms of COVID-19. Monitor and record temperature and POsat % [oxygen saturations percentages]. Ask resident if they are having any of the following signs and symptoms: ? [question] fever or chills? Cough? Shortness of breath or difficulty breathing? fatigue? Muscle or body aches? headache? New loss of taste or smell? sore throat? congestion or runny nose? Nausea or vomiting? Diarrhea Notify Nurse with any positive response or elevated temperature. every evening shift for COVID screening."

The April and May 2022 Medication Record (MAR) indicated Resident R was monitored once a day for COVID-19.

2v. The clinical record for Resident S was reviewed on 5/4/22 at 12:10 p.m. The diagnosis included, but was not limited to, asthma. Resident S was positive for COVID on 4/26/22.

A physician order dated 3/31/22 indicated, "Monitor Resident for Signs and Symptoms of COVID-19. Monitor and record temperature and POsat % [oxygen saturations percentages]. Ask resident if they are having any of the following signs and symptoms: ? [question] fever or chills? Cough? Shortness of breath or difficulty breathing? fatigue? Muscle or body aches? headache? New loss of taste or smell? sore throat? congestion or runny nose? Nausea or vomiting? Diarrhea Notify Nurse with any positive response or elevated temperature. every day shift for COVID screening."

The April and May 2022 Medication Record (MAR) indicated Resident S was monitored once a day for COVID-19.

2w. The clinical record for Resident T was reviewed on 5/4/22 at 12:17 p.m. The diagnosis included, but was not limited to, dementia. Resident T was positive for COVID on 4/26/22.

A physician order dated 1/3/22 indicated, "Monitor Resident for Signs and Symptoms of COVID-19. Monitor and record temperature and POsat % [oxygen saturations percentages]. Ask resident if they are having any of the

following signs and symptoms: ? [question] fever or chills? Cough? Shortness of breath or difficulty breathing? fatigue? Muscle or body aches? headache? New loss of taste or smell? sore throat? congestion or runny nose? Nausea or vomiting? Diarrhea Notify Nurse with any positive response or elevated temperature. every evening shift for COVID screening."

The April and May 2022 Medication Record (MAR) indicated Resident T was monitored once a day for COVID-19.

2x. The clinical record for Resident U was reviewed on 5/4/22 at 12:20 p.m. The diagnosis included, but was not limited to, dementia. Resident U was positive for COVID on 4/27/22.

A physician order dated 4/5/22 indicated, "Monitor Resident for Signs and Symptoms of COVID-19. Monitor and record temperature and POsat % [oxygen saturations percentages]. Ask resident if they are having any of the following signs and symptoms: ? [question] fever or chills? Cough? Shortness of breath or difficulty breathing? fatigue? Muscle or body aches? headache? New loss of taste or smell? sore throat? congestion

or runny nose? Nausea or vomiting? Diarrhea Notify Nurse with any positive response or elevated temperature. every evening shift for COVID screening."

The April and May 2022 Medication Record (MAR) indicated Resident U was monitored once a day for COVID-19.

An interview was conducted with License Practical Nurse (LPN) 4 on 5/4/22 at 12:05 p.m. She indicated during an outbreak with COVID-19, the residents are assessed and monitored every shift, and it would be documented in the medical chart. If the facility was not in outbreak the residents would be assessed and monitored once a day for COVID-19.

The clinical records for Resident B,C, D, E, F, G, H, J, K,L, M, N, O, P, Q, R, S, T, U, V, W, X and Y did not include increase monitoring.

An interview was conducted with the Director of Nursing on 5/4/22 3:52 p.m. She indicated she was unaware residents that had tested positive for COVID-19 was needing increase monitoring.

A "Best Practice Guideline: Infection Control Guidelines for Infectious Respiratory Disease

	Outbreak" policy was provided by the Executive Director on 5/5/22 at 11:00 a.m. It indicated "...Purpose: To promote a safe environment for staff, residents and visitors to work and visit during a severe outbreak of infectious respiratory disease. Guidance: It is the intention of Priority Life Care to provide a safe environment for all staff to work, residents to live in, and guests to visit...Guidelines: 1. The Community Executive Director (ED) or designee will monitor the CDC [Centers of Disease Control and Prevention] website daily for updated information during a severe respiratory infectious disease outbreak. The Community will follow recommendations from the CDC and local and state health departments...4. The Community will take proactive measures to minimize the spread of respiratory germs within the community:..c. Monitor residents and employees for fever or respiratory symptoms:...c. The Community will report any new or suspected of COVID-19 or other infectious respiratory disease involving residents or employees to the local health department, including the state Healthcare Acquired Infection/Antimicrobial Resistance Coordinator..." The COVID-19 IP [Infection Prevention] Toolkit dated			

3/23/22, referenced a referred link to, "The Long Term Care COVID-19 Clinical Guidance" dated 2/8/22. It indicated "...Assessment of residents...Screen all residents daily for fever and for COVID-19 symptoms. Ideally, include an assessment of oxygen saturation via pulse oximetry. Because some of the symptoms are similar, it may be difficult to tell the difference between influenza, COVID-19, and other acute respiratory infections, based on symptoms alone. Consider testing for pathogens other than COVID-19 and initiating appropriate infection prevention precautions for symptomatic older adults...Increase monitoring of residents with suspected or confirmed COVID-19, including assessment of symptoms, vital signs, oxygen saturation via pulse oximetry, and respiratory exam, to at least three times daily to identify and quickly manage serious infection..."

On 5/4/2022 at 1:30 p.m., "The Interim Infection Prevention and Control Recommendations to Prevent SARS-COV-2 [COVID-19] in the Nursing Homes", updated 2/2/2022, was retrieved from the CDC website, indicated, "...Evaluate Residents at least Daily...Manage Residents with Suspected or Confirmed SARS-CoV-2 Infection:...Increase monitoring

of residents with suspected or confirmed SARS-CoV-2 infection, including assessment of symptoms, vital signs, oxygen saturation via pulse oximetry, and respiratory exam, to identify and quickly manage serious infection..."

This State Tag relates to complaint IN00379192.

Based on interview and record review, the facility failed to properly prevent and/or contain COVID-19 by not reporting staff and residents that had tested positive for COVID-19 to Redcap or Indiana Department of Health, and not increasing monitoring of residents that had COVID-19 for 23 of 114 residents reviewed for COVID-19 and 3 of 3 staff members reviewed for infection control. (Residents' B, C, D, E, F, G, H, J, K, L, M, N, O, P, Q, R, S, T, U, V, W, X, and Y)

Findings include:

1. During a confidential interview on 5/4/22 at 12:42 p.m., they indicated the facility had positive staff and residents of COVID-19.

An interview was conducted with the Director of Nursing (DON) and the Executive Director (ED) on 5/4/22 at 9:10 a.m. The DON indicated there were residents currently in isolation with COVID-19. The

facility was in outbreak testing and had been since 4/22/22 when it was identified the facility's first positive resident case. They have not reported the cases to the Redcap system. They were told they no longer need to report positive COVID-19 cases to Redcap.

A list of COVID-19 positive residents and staff were provided by the ED on 5/4/22 at 10:48 a.m. It indicated the following residents and staff, and the date he or she tested positive:

Residents' B, C, D, E, F, G, H, J, K and L = all tested positive on 4/22/22,

Residents' M, Q, S, T, V, W, X = all tested positive on 4/26/22,

Residents' N, O, P, R and U = all tested positive on 4/27/22, and

Resident Y = tested positive on 4/28/22

Employee 1 = tested positive on 4/25/22,

Employee 2 = tested positive on 4/25/22 and

Employee 3 = tested positive on 4/20/22

The Indiana Department of Health Long-Term Care (LTC) Newsletter dated 3/10/22

indicated a link for facilities to refer to for reporting guidance. The guidance document, "LTC Facility COVID-19 Data Submission Guidelines" last updated on 3/8/22, indicated assisted livings were to report to the Indiana Department of Health gateway system and Redcap within 24 hours of outbreak cases. "...Outbreak Case Alert: 1 or more confirmed resident and/or staff cases in a facility where no confirmed cases were identified during 4-week period prior to the most recent week. The purpose of this reporting is to identify facility associated infections. Facilities do not count resident cases that were positive upon admission OR new admission that turns positive while in transmission-based precautions (TBP) or staff cases that did not enter the building during the infectious period (48 hours) before their positive test or symptoms and after the onset of symptoms or positive test)..."

2a. The clinical record for Resident V was reviewed on 5/4/22 at 11:18 a.m. The diagnosis included, but was not limited to, type 2 diabetes mellitus. Resident was positive for COVID on 4/26/22.

A physician order dated 3/23/22 indicated, "Monitor Resident for Signs and Symptoms of Covid-19. Monitor and record

temperature and POsat % [oxygen saturations percentages]. Ask resident if they are having any of the following signs and symptoms: ? [question] fever or chills? Cough? Shortness of breath or difficulty breathing? fatigue? Muscle or body aches? headache? New loss of taste or smell? sore throat? congestion or runny nose? Nausea or vomiting? Diarrhea Notify Nurse with any positive response or elevated temperature. one time a day. COVID screening."

The April and May 2022 Medication Record (MAR) indicated Resident V was monitored once a day for COVID-19.

2b. The clinical record for Resident W was reviewed on 5/4/22 at 11:18 a.m. The diagnosis included, but was not limited to, acute cough. Resident W was positive for COVID on 4/26/22.

A physician order dated 12/13/22 indicated, "Monitor Resident for Signs and Symptoms of Covid-19. Monitor and record temperature and POsat % [oxygen saturations percentages]. Ask resident if they are having any of the following signs and symptoms: ? [question] fever or chills? Cough? Shortness of breath or difficulty breathing? fatigue?

	Muscle or body aches? headache? New loss of taste or smell? sore throat? congestion or runny nose? Nausea or vomiting? Diarrhea Notify Nurse with any positive response or elevated temperature. in the evening COVID screening." The April and May 2022 Medication Record (MAR) indicated Resident W was monitored once a day for COVID-19. 2c. The clinical record for Resident X was reviewed on 5/4/22 at 11:20 a.m. The diagnosis included, but was not limited to, stroke. Resident X was positive for COVID on 4/26/22.			

A physician order dated 10/23/22 indicated, "Monitor Resident for Signs and Symptoms of COVID-19. Monitor and record temperature and POsat % [oxygen saturations percentages]. Ask resident if they are having any of the following signs and symptoms: ? [question] fever or chills? Cough? Shortness of breath or difficulty breathing? fatigue? Muscle or body aches? headache? New loss of taste or smell? sore throat? congestion or runny nose? Nausea or vomiting? Diarrhea Notify Nurse with any positive response or elevated temperature. in the evening COVID screening."

The April and May 2022 Medication Record (MAR) indicated Resident X was monitored once a day for COVID-19.

2d. The clinical record for Resident Y was reviewed on 5/4/22 at 11:22 a.m. The diagnosis included, but was not limited to, stroke. Resident Y was positive for COVID on 4/28/22.

A physician order dated 12/13/21 indicated, "Monitor Resident for Signs and Symptoms of COVID-19. Monitor and record temperature and POsat % [oxygen saturations percentages]. Ask resident if they are having any

of the following signs and symptoms: ? [question] fever or chills? Cough? Shortness of breath or difficulty breathing? fatigue? Muscle or body aches? headache? New loss of taste or smell? sore throat? congestion or runny nose? Nausea or vomiting? Diarrhea Notify Nurse with any positive response or elevated temperature. in the evening COVID screening."

The April and May 2022 Medication Record (MAR) indicated Resident Y was monitored once a day for COVID-19.

2e. The clinical record for Resident Y was reviewed on 5/4/22 at 11:25 a.m. The diagnosis included, but was not limited to, stroke. Resident Y was positive for COVID on 4/28/22.

A physician order dated 11/16/22 indicated, "Monitor Resident for Signs and Symptoms of COVID-19. Monitor and record temperature and POsat % [oxygen saturations percentages]. Ask resident if they are having any of the following signs and symptoms: ? [question] fever or chills? Cough? Shortness of breath or difficulty breathing? fatigue? Muscle or body aches? headache? New loss of taste or smell? sore throat? congestion or runny nose? Nausea or

vomiting? Diarrhea Notify Nurse with any positive response or elevated temperature. in the evening COVID screening."

The April and May 2022 Medication Record (MAR) indicated Resident Y was monitored once a day for COVID-19.

2f. The clinical record for Resident C was reviewed on 5/4/22 at 11:25 a.m. The diagnosis included, but was not limited to, stroke. Resident C was positive for COVID on 4/22/22.

A physician order dated 2/1/22 indicated, "Monitor Resident for Signs and Symptoms of COVID-19. Monitor and record temperature and POsat % [oxygen saturations percentages]. Ask resident if they are having any of the following signs and symptoms: ? [question] fever or chills? Cough? Shortness of breath or difficulty breathing? fatigue? Muscle or body aches? headache? New loss of taste or smell? sore throat? congestion or runny nose? Nausea or vomiting? Diarrhea Notify Nurse with any positive response or elevated temperature. in the evening COVID screening."

The April and May 2022 Medication Record (MAR) indicated Resident C was

monitored once a day for COVID-19.

2g. The clinical record for Resident G was reviewed on 5/4/22 at 11:25 a.m. The diagnosis included, but was not limited to, chronic kidney disease. Resident G was positive for COVID on 4/22/22.

A physician order dated 2/1/22 indicated, "Monitor Resident for Signs and Symptoms of COVID-19. Monitor and record temperature and POsat % [oxygen saturations percentages]. Ask resident if they are having any of the following signs and symptoms: ? [question] fever or chills? Cough? Shortness of breath or difficulty breathing? fatigue? Muscle or body aches? headache? New loss of taste or smell? sore throat? congestion or runny nose? Nausea or vomiting? Diarrhea Notify Nurse with any positive response or elevated temperature. in the evening COVID screening."

The April and May 2022 Medication Record (MAR) indicated Resident G was monitored once a day for COVID-19.

2h. The clinical record for Resident D was reviewed on 5/4/22 at 11:30 a.m. The diagnosis included, but was not limited to, dementia. Resident D

was positive for COVID on 4/22/22.

A physician order dated 1/18/22 indicated, "Monitor Resident for Signs and Symptoms of COVID-19. Monitor and record temperature and POsat % [oxygen saturations percentages]. Ask resident if they are having any of the following signs and symptoms: ? [question] fever or chills? Cough? Shortness of breath or difficulty breathing? fatigue? Muscle or body aches? headache? New loss of taste or smell? sore throat? congestion or runny nose? Nausea or vomiting? Diarrhea Notify Nurse with any positive response or elevated temperature. in the evening COVID screening."

The April and May 2022 Medication Record (MAR) indicated Resident D was monitored once a day for COVID-19.

2i. The clinical record for Resident E was reviewed on 5/4/22 at 11:33 a.m. The diagnosis included, but was not limited to, dementia. Resident E was positive for COVID on 4/22/22.

A physician order dated 2/17/22 indicated, "Monitor Resident for Signs and Symptoms of COVID-19. Monitor and record temperature and POsat %

[oxygen saturations percentages]. Ask resident if they are having any of the following signs and symptoms: ? [question] fever or chills? Cough? Shortness of breath or difficulty breathing? fatigue? Muscle or body aches? headache? New loss of taste or smell? sore throat? congestion or runny nose? Nausea or vomiting? Diarrhea Notify Nurse with any positive response or elevated temperature. every day shift COVID screening."

The April and May 2022 Medication Record (MAR) indicated Resident E was monitored once a day for COVID-19.

2j. The clinical record for Resident F was reviewed on 5/4/22 at 11:40 a.m. The diagnosis included, but was not limited to, dementia. Resident F was positive for COVID on 4/22/22.

A physician order dated 2/1/22 indicated, "Monitor Resident for Signs and Symptoms of COVID-19. Monitor and record temperature and POsat % [oxygen saturations percentages]. Ask resident if they are having any of the following signs and symptoms: ? [question] fever or chills? Cough? Shortness of breath or difficulty breathing? fatigue? Muscle or body aches?

	headache? New loss of taste or smell? sore throat? congestion or runny nose? Nausea or vomiting? Diarrhea Notify Nurse with any positive response or elevated temperature. in the evening COVID screening." The April and May 2022 Medication Record (MAR) indicated Resident F was monitored once a day for COVID-19. 2k. The clinical record for Resident H was reviewed on 5/4/22 at 11:42 a.m. The diagnosis included, but was not limited to, dementia. Resident H was positive for COVID on 4/22/22. A physician order dated 12/19/22 indicated, "Monitor Resident for Signs and Symptoms of COVID-19. Monitor and record temperature and POsat % [oxygen saturations percentages]. Ask resident if they are having any of the following signs and symptoms: ? [question] fever or chills? Cough? Shortness of breath or difficulty breathing? fatigue? Muscle or body aches? headache? New loss of taste or smell? sore throat? congestion or runny nose? Nausea or vomiting? Diarrhea Notify Nurse with any positive response or elevated temperature. in the evening COVID screening."			

The April and May 2022 Medication Record (MAR) indicated Resident H was monitored once a day for COVID-19.

2l. The clinical record for Resident J was reviewed on 5/4/22 at 11:45 a.m. The diagnosis included, but was not limited to, dementia. Resident J was positive for COVID on 4/22/22.

A physician order dated 1/18/22 indicated, "Monitor Resident for Signs and Symptoms of COVID-19. Monitor and record temperature and POsat % [oxygen saturations percentages]. Ask resident if they are having any of the following signs and symptoms: ? [question] fever or chills? Cough? Shortness of breath or difficulty breathing? fatigue? Muscle or body aches? headache? New loss of taste or smell? sore throat? congestion or runny nose? Nausea or vomiting? Diarrhea Notify Nurse with any positive response or elevated temperature. in the evening COVID screening."

The April and May 2022 Medication Record (MAR) indicated Resident J was monitored once a day for COVID-19.

2m. The clinical record for Resident B was reviewed on

5/4/22 at 11:47 a.m. The diagnosis included, but was not limited to, dementia. Resident B was positive for COVID on 4/22/22.

A physician order dated 3/10/22 indicated, "Monitor Resident for Signs and Symptoms of COVID-19. Monitor and record temperature and POsat % [oxygen saturations percentages]. Ask resident if they are having any of the following signs and symptoms: ? [question] fever or chills? Cough? Shortness of breath or difficulty breathing? fatigue? Muscle or body aches? headache? New loss of taste or smell? sore throat? congestion or runny nose? Nausea or vomiting? Diarrhea Notify Nurse with any positive response or elevated temperature. every day shift for COVID screening."

The April and May 2022 Medication Record (MAR) indicated Resident B was monitored once a day for COVID-19.

2n. The clinical record for Resident K was reviewed on 5/4/22 at 11:50 a.m. The diagnosis included, but was not limited to, dementia. Resident K was positive for COVID on 4/22/22.

A physician order dated 2/1/22 indicated, "Monitor Resident for

	Signs and Symptoms of COVID-19. Monitor and record temperature and POsat % [oxygen saturations percentages]. Ask resident if they are having any of the following signs and symptoms: ? [question] fever or chills? Cough? Shortness of breath or difficulty breathing? fatigue? Muscle or body aches? headache? New loss of taste or smell? sore throat? congestion or runny nose? Nausea or vomiting? Diarrhea Notify Nurse with any positive response or elevated temperature. every day shift for COVID screening." The April and May 2022 Medication Record (MAR) indicated Resident K was monitored once a day for COVID-19. 2o. The clinical record for Resident L was reviewed on 5/4/22 at 11:52 a.m. The diagnosis included, but was not limited to, dementia. Resident L was positive for COVID on 4/22/22. A physician order dated 2/1/22 indicated, "Monitor Resident for Signs and Symptoms of COVID-19. Monitor and record temperature and POsat % [oxygen saturations percentages]. Ask resident if they are having any of the following signs and symptoms: ? [question] fever or chills?			

	Cough? Shortness of breath or difficulty breathing? fatigue? Muscle or body aches? headache? New loss of taste or smell? sore throat? congestion or runny nose? Nausea or vomiting? Diarrhea Notify Nurse with any positive response or elevated temperature. every day shift for COVID screening." The April and May 2022 Medication Record (MAR) indicated Resident L was monitored once a day for COVID-19. 2p. The clinical record for Resident M was reviewed on 5/4/22 at 11:56 a.m. The diagnosis included, but was not limited to, Cerebral Palsy. Resident M was positive for COVID on 4/26/22. A physician order dated 1/20/22 indicated, "Monitor Resident for Signs and Symptoms of COVID-19. Monitor and record temperature and POsat % [oxygen saturations percentages]. Ask resident if they are having any of the following signs and symptoms: ? [question] fever or chills? Cough? Shortness of breath or difficulty breathing? fatigue? Muscle or body aches? headache? New loss of taste or smell? sore throat? congestion or runny nose? Nausea or vomiting? Diarrhea Notify Nurse with any positive response or			

elevated temperature. every evening shift for COVID screening."

The April and May 2022 Medication Record (MAR) indicated Resident M was monitored once a day for COVID-19.

2q. The clinical record for Resident N was reviewed on 5/4/22 at 11:59 a.m. The diagnosis included, but was not limited to, kidney failure. Resident N was positive for COVID on 4/27/22.

A physician order dated 3/17/22 indicated, "Monitor Resident for Signs and Symptoms of COVID-19. Monitor and record temperature and POsat % [oxygen saturations percentages]. Ask resident if they are having any of the following signs and symptoms: ? [question] fever or chills? Cough? Shortness of breath or difficulty breathing? fatigue? Muscle or body aches? headache? New loss of taste or smell? sore throat? congestion or runny nose? Nausea or vomiting? Diarrhea Notify Nurse with any positive response or elevated temperature. every evening shift for COVID screening."

The April and May 2022 Medication Record (MAR) indicated Resident N was

monitored once a day for COVID-19.

2r. The clinical record for Resident O was reviewed on 5/4/22 at 12:00 p.m. The diagnosis included, but was not limited to, chronic lymphocytic leukemia. Resident O was positive for COVID on 4/27/22.

A physician order dated 2/24/22 indicated, "Monitor Resident for Signs and Symptoms of COVID-19. Monitor and record temperature and POsat % [oxygen saturations percentages]. Ask resident if they are having any of the following signs and symptoms: ? [question] fever or chills? Cough? Shortness of breath or difficulty breathing? fatigue? Muscle or body aches? headache? New loss of taste or smell? sore throat? congestion or runny nose? Nausea or vomiting? Diarrhea Notify Nurse with any positive response or elevated temperature. every day shift for COVID screening."

The April and May 2022 Medication Record (MAR) indicated Resident O was monitored once a day for COVID-19.

2s. The clinical record for Resident P was reviewed on 5/4/22 at 12:03 p.m. The diagnosis included, but was not limited to, stroke. Resident P

was positive for COVID on 4/27/22.

A physician order dated 2/14/22 indicated, "Monitor Resident for Signs and Symptoms of COVID-19. Monitor and record temperature and POsat % [oxygen saturations percentages]. Ask resident if they are having any of the following signs and symptoms: ? [question] fever or chills? Cough? Shortness of breath or difficulty breathing? fatigue? Muscle or body aches? headache? New loss of taste or smell? sore throat? congestion or runny nose? Nausea or vomiting? Diarrhea Notify Nurse with any positive response or elevated temperature. every evening shift for COVID screening."

The April and May 2022 Medication Record (MAR) indicated Resident P was monitored once a day for COVID-19.

2t. The clinical record for Resident Q was reviewed on 5/4/22 at 12:06 p.m. The diagnosis included, but was not limited to, kidney failure. Resident Q was positive for COVID on 4/26/22.

A physician order dated 9/11/22 indicated, "Monitor Resident for Signs and Symptoms of COVID-19. Monitor and record

temperature and POsat % [oxygen saturations percentages]. Ask resident if they are having any of the following signs and symptoms: ? [question] fever or chills? Cough? Shortness of breath or difficulty breathing? fatigue? Muscle or body aches? headache? New loss of taste or smell? sore throat? congestion or runny nose? Nausea or vomiting? Diarrhea Notify Nurse with any positive response or elevated temperature. at bedtime."

The April and May 2022 Medication Record (MAR) indicated Resident Q was monitored once a day for COVID-19.

2u. The clinical record for Resident R was reviewed on 5/4/22 at 12:05 p.m. The diagnosis included, but was not limited to, emphysema [damage of air sacs of the lungs]. Resident B was positive for COVID on 4/27/22.

A physician order dated 1/3/22 indicated, "Monitor Resident for Signs and Symptoms of COVID-19. Monitor and record temperature and POsat % [oxygen saturations percentages]. Ask resident if they are having any of the following signs and symptoms: ? [question] fever or chills? Cough? Shortness of breath or

difficulty breathing? fatigue? Muscle or body aches? headache? New loss of taste or smell? sore throat? congestion or runny nose? Nausea or vomiting? Diarrhea Notify Nurse with any positive response or elevated temperature. every evening shift for COVID screening."

The April and May 2022 Medication Record (MAR) indicated Resident R was monitored once a day for COVID-19.

2v. The clinical record for Resident S was reviewed on 5/4/22 at 12:10 p.m. The diagnosis included, but was not limited to, asthma. Resident S was positive for COVID on 4/26/22.

A physician order dated 3/31/22 indicated, "Monitor Resident for Signs and Symptoms of COVID-19. Monitor and record temperature and POsat % [oxygen saturations percentages]. Ask resident if they are having any of the following signs and symptoms: ? [question] fever or chills? Cough? Shortness of breath or difficulty breathing? fatigue? Muscle or body aches? headache? New loss of taste or smell? sore throat? congestion or runny nose? Nausea or vomiting? Diarrhea Notify Nurse with any positive response or

elevated temperature. every day shift for COVID screening."

The April and May 2022 Medication Record (MAR) indicated Resident S was monitored once a day for COVID-19.

2w. The clinical record for Resident T was reviewed on 5/4/22 at 12:17 p.m. The diagnosis included, but was not limited to, dementia. Resident T was positive for COVID on 4/26/22.

A physician order dated 1/3/22 indicated, "Monitor Resident for Signs and Symptoms of COVID-19. Monitor and record temperature and POsat % [oxygen saturations percentages]. Ask resident if they are having any of the following signs and symptoms: ? [question] fever or chills? Cough? Shortness of breath or difficulty breathing? fatigue? Muscle or body aches? headache? New loss of taste or smell? sore throat? congestion or runny nose? Nausea or vomiting? Diarrhea Notify Nurse with any positive response or elevated temperature. every evening shift for COVID screening."

The April and May 2022 Medication Record (MAR) indicated Resident T was monitored once a day for

COVID-19.

2x. The clinical record for Resident U was reviewed on 5/4/22 at 12:20 p.m. The diagnosis included, but was not limited to, dementia. Resident U was positive for COVID on 4/27/22.

A physician order dated 4/5/22 indicated, "Monitor Resident for Signs and Symptoms of COVID-19. Monitor and record temperature and POsat % [oxygen saturations percentages]. Ask resident if they are having any of the following signs and symptoms: ? [question] fever or chills? Cough? Shortness of breath or difficulty breathing? fatigue? Muscle or body aches? headache? New loss of taste or smell? sore throat? congestion or runny nose? Nausea or vomiting? Diarrhea Notify Nurse with any positive response or elevated temperature. every evening shift for COVID screening."

The April and May 2022 Medication Record (MAR) indicated Resident U was monitored once a day for COVID-19.

An interview was conducted with License Practical Nurse (LPN) 4 on 5/4/22 at 12:05 p.m. She indicated during an outbreak with COVID-19, the

residents are assessed and monitored every shift, and it would be documented in the medical chart. If the facility was not in outbreak the residents would be assessed and monitored once a day for COVID-19.

The clinical records for Resident B,C, D, E, F, G, H, J, K,L, M, N, O, P, Q, R, S, T, U, V, W, X and Y did not include increase monitoring.

An interview was conducted with the Director of Nursing on 5/4/22 3:52 p.m. She indicated she was unaware residents that had tested positive for COVID-19 was needing increase monitoring.

A "Best Practice Guideline: Infection Control Guidelines for Infectious Respiratory Disease Outbreak" policy was provided by the Executive Director on 5/5/22 at 11:00 a.m. It indicated "...Purpose: To promote a safe environment for staff, residents and visitors to work and visit during a severe outbreak of infectious respiratory disease. Guidance: It is the intention of Priority Life Care to provide a safe environment for all staff to work, residents to live in, and guests to visit...Guidelines: 1. The Community Executive Director (ED) or designee will monitor the CDC [Centers of Disease Control and Prevention]

website daily for updated information during a severe respiratory infectious disease outbreak. The Community will follow recommendations from the CDC and local and state health departments...4. The Community will take proactive measures to minimize the spread of respiratory germs within the community:..c. Monitor residents and employees for fever or respiratory symptoms:...c. The Community will report any new or suspected of COVID-19 or other infectious respiratory disease involving residents or employees to the local health department, including the state Healthcare Acquired Infection/Antimicrobial Resistance Coordinator..."

The COVID-19 IP [Infection Prevention] Toolkit dated 3/23/22, referenced a referred link to, "The Long Term Care COVID-19 Clinical Guidance" dated 2/8/22. It indicated "...Assessment of residents...Screen all residents daily for fever and for COVID-19 symptoms. Ideally, include an assessment of oxygen saturation via pulse oximetry. Because some of the symptoms are similar, it may be difficult to tell the difference between influenza, COVID-19, and other acute respiratory infections, based on symptoms alone. Consider testing for pathogens

	other than COVID-19 and initiating appropriate infection prevention precautions for symptomatic older adults...Increase monitoring of residents with suspected or confirmed COVID-19, including assessment of symptoms, vital signs, oxygen saturation via pulse oximetry, and respiratory exam, to at least three times daily to identify and quickly manage serious infection..." On 5/4/2022 at 1:30 p.m., "The Interim Infection Prevention and Control Recommendations to Prevent SARS-COV-2 [COVID-19] in the Nursing Homes", updated 2/2/2022, was retrieved from the CDC website, indicated, "...Evaluate Residents at least Daily...Manage Residents with Suspected or Confirmed SARS-CoV-2 Infection:...Increase monitoring of residents with suspected or confirmed SARS-CoV-2 infection, including assessment of symptoms, vital signs, oxygen saturation via pulse oximetry, and respiratory exam, to identify and quickly manage serious infection..." This State Tag relates to complaint IN00379192.				

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	TITLE	(X6) DATE

SIGNATURE		