

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENTIFICATION NUMBER <b>145070</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED <b>08/31/2020</b>
NAME OF PROVIDER OF SUPPLIER <b>GROVE OF BERWYN, THE</b>		STREET ADDRESS, CITY, STATE, ZIP <b>3601 SOUTH HARLEM AVENUE BERWYN, IL 60402</b>	
For information on the nursing home's plan to correct this deficiency, please contact the nursing home or the state survey agency.			
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)		
F 0684  <b>Level of harm - Minimal harm or potential for actual harm</b>  <b>Residents Affected - Some</b>	<p><b>Provide appropriate treatment and care according to orders, resident's preferences and goals.</b></p> <p><b>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY**</b></p> <p>Based on interviews and record reviews, the facility failed to follow general nursing standard of practice in Medication Administration by missing nurses' signature in Medication Administration Record (MAR) and medication not administered as scheduled. This deficient practice affects 8 of 8 residents (R1, R2, R13, R14, R15, R16, R17 and R18) reviewed for medication administration. Findings Include: On 8/26/20 at 10am, R1 reported not getting his 6am medications at least 2 or 3 times in the month of May 2020. On 8/26/20 at 10:30am, R14 stated I did not get my 6am medication, quite a few time during the outbreak of [MEDICAL CONDITION]. I had to ask the nurse one time for my 6am medication, I don't remember the date but it is around 7am, and the nurse said to go back in my room and she will give it. I did not get my medication that day because she did not come and I had to go out at 730 am for an appointment. Medication Administration Record (MAR) of R1 and R14 for the Month of May 2020 were reviewed and noted that the scheduled 6am medication were not signed and not administered on 5/9/20, 5/10/20, and 5/12/20. Conducted additional record reviews for first floor, north side residents for the month of May 2020. Additional residents (R2, R13, R15, R16, R17 and R18) also did not have signed MAR for scheduled 6am medications and medication not administered on 5/9/20, 5/10/20, and 5/12/20. R1 has two 6am medications scheduled daily, not signed and not administered on 5/9/20, 5/10/20 and 5/12/20. Medication route were By Mouth (PO). R2 has one 6am medication scheduled for Tuesday, Thursday and Saturday, not signed and not administered on 5/9/20. Medication route: Subcutaneous and by mouth R13 has two 6am medications scheduled one is weekly (5/9/20) and one is daily (5/9/20, 5/10/20 and 5/12/20), not signed and not administered. Medication route: By mouth and ophthalmic. R14 has three 6am medications scheduled daily, not signed and not administered on 5/9/20 and 5/10/20. Medication route: Subcutaneous, inhaler and by mouth. R15 has one 6am medications scheduled daily, not signed and not administered on 5/9/20 and 5/10/20. R16 has two 6am medications scheduled daily, not signed and not administered on 5/9/20 and 5/10/20. Medication route: By mouth. R17 has two 6am medications scheduled daily, not signed and not administered on 5/9/20 and 5/10/20. Medication route: Subcutaneous and by mouth. R18 has one 6am medication scheduled daily, not signed and not administered on 5/9/20 and 5/10/20. Medication route: by mouth. On 8/27/20 at 11am, Interviewed V12 (nurse) scheduled on 5/8/20 and 5/9/20 for 11-7 (in which the expected nurse to sign the MAR on 5/9 and 5/10 for 6am medication) It was a long time ago, if I am on schedule then most likely I worked that day. I don't do call-ins. I always shows up to work when I am scheduled. Our practice is to sign the MAR after we administered the medication to residents. I don't recall why it was not signed. On 8/27/20 at 2pm, Interviewed V13 (nurse scheduled for 5/11/20, in which the nurse expected to sign the MAR on 5/12/20 for 6am medication), I always sign the MAR after medication administration. I don't know why there is no signature on the MAR. On 8/27/20 at 1pm, V2 DON stated Nurses must sign the MAR to record that the medication was administered. My expectation is for the nurses to sign the MAR. Requested for Medication Administration policy and facility unable to provide such policy. Per V1 (Administrator) on 8/31/20 at 1pm, the facility does not have any policy for medication administration.</p>		
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE		TITLE	(X6) DATE

Any deficiency statement ending with an asterisk (\*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.