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	ASL510199	A. BUILDING: _____ B. WING _____	09/11/2024

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HERITAGE WOODS OF HUNTLEY, LLC	12450 REGENCY PARKWAY HUNTLEY, IL 60142

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A 000	Initial Comment Annual Licensure Survey	A 000		
A2000	Section 295.2000 Residency Requirements This Regulation is not met as evidenced by: Type 3 Violation: Section 295.2000 Residency Requirements a) No individual shall be accepted for residency or remain in residence if the establishment cannot provide or secure appropriate services, if the individual requires a level of service or type of service for which the establishment is not licensed or which the establishment does not provide, or if the establishment does not have the staff appropriate in numbers and with appropriate skill to provide such services. (Section 75(a) of the Act) b) Only adults may be accepted for residency. (Section 75(b) of the Act) c) A person shall not be accepted for residency if: 1) The person poses a serious threat to himself or herself or to others; 2) The person is not able to communicate his or her needs in any manner and no resident representative residing in the establishment, and with a prior relationship to the person, has been appointed to direct the provision of services; 3) The person requires total assistance with	A2000		

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A2000	Continued From page 1 2 or more activities of daily living; 4) The person requires the assistance of more than one paid caregiver at any given time with an activity of daily living; 5) The person requires more than minimal assistance in moving to a safe area in an emergency. For the purpose of this Section, minimal assistance means that the resident is able to respond, with or without assistance, in an emergency to protect himself/herself, given the staffing and construction of the building; 6) The person has a severe mental illness, which for the purposes of this Section means a condition that is characterized by the presence of a major mental disorder as classified in the Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition (DSM-IV), where the individual is substantially disabled due to mental illness in the areas of self-maintenance, social functioning, activities of community living and work skills, and the disability specified is expected to be present for a period of not less than one year, but does not mean Alzheimer's disease and other forms of dementia based on organic or physical disorders. Nothing in this Section is meant to prohibit an individual with a diagnosis of depression from living in an establishment so long as the resident is not substantially disabled in the areas of self-maintenance, social functioning, activities of community living, and work skills; 7) The person requires intravenous therapy or intravenous feedings unless self-administered or administered by a qualified, licensed health care professional;	A2000		

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A2000	Continued From page 2 8) The person requires gastrostomy feedings unless self-administered or administered by a licensed health care professional; 9) The person requires insertion, sterile irrigation, and replacement of catheter, except for routine maintenance of urinary catheters, unless the catheter care is self-administered or administered by a licensed health care professional; 10) The person requires sterile wound care unless care is self-administered or administered by a licensed health care professional; 11) The person requires sliding scale insulin administration unless self-performed or administered by a licensed health care professional; 12) The person is a diabetic requiring routine insulin injections unless the injections are self-administered or administered by a licensed health care professional; 13) The person requires treatment of stage 3 or stage 4 decubitus ulcers or exfoliative dermatitis; or 14) The person requires 5 or more skilled nursing visits per week for conditions other than those listed in subsection (c)(13) for a period of 3 consecutive weeks or more except when the course of treatment is expected to extend beyond a 3 week period for rehabilitative purposes and is certified as temporary by a physician. (Section 75(c) of the Act) d) A resident with a condition listed in subsection (c) shall have his or her residency	A2000		

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A2000	Continued From page 3 terminated in accordance with Section 295.2010. (Section 75(d) of the Act) e) Residency shall be terminated in accordance with Section 295.2010 of this Part when services available to the resident in the establishment are no longer adequate to meet the needs of the resident. This provision shall not be interpreted as limiting the authority of the Department to require the residency termination of individuals. (Section 75(e) of the Act) f) Subsection (d) of this Section shall not apply to terminally ill residents who receive or would qualify for hospice care and such care is coordinated by a hospice licensed under the Hospice Program Licensing Act or other licensed health care professional employed by a licensed home health agency and the establishment and all parties agree to the continued residency. (Section 75(f) of the Act) g) Subsections (c)(3), (4), (5) and (9) shall not apply to individuals who are quadriplegic or paraplegic, or individuals with neuro-muscular diseases, such as muscular dystrophy and multiple sclerosis, or other chronic diseases and conditions if the individual is able to communicate his or her needs and does not require assistance with complex medical problems, and the establishment is able to accommodate the individual's needs. (Section 75(g) of the Act) h) For the purposes of subsections (c)(7) through (11), a licensed health care professional may not be employed by the owner or operator of the establishment, its parent entity, or any other entity with ownership common to either the owner or operator of the establishment or parent entity, including but not limited to an affiliate of the	A2000		

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A2000	Continued From page 4	A2000		

owner or operator of the establishment. Nothing in this Section is meant to limit a resident's right to choose his or her health care provider. (Section 75(h) of the Act)

i) Before a prospective resident's admission to an assisted living establishment or a shared housing establishment, the establishment shall advise the prospective resident to consult a physician to determine whether the prospective resident should obtain a vaccination against pneumococcal pneumonia. (Section 76 of the Act)

(Source: Amended at 28 Ill. Reg. 14593, effective October 21, 2004)

These requirements are not met as evidenced by:

Based on interview and record review, the establishment failed to ensure residency requirements are met for one (R6) resident receiving hospice care at move in.

Findings include:

Per R6's face sheet, R6 is 98 years old, with diagnoses which include but not limited to Unspecified severe protein calorie malnutrition, Essential Hypertension, Chronic Diastolic Heart Failure and Chronic Obstructive Pulmonary Disease with acute exacerbation. R6 moved to the establishment on 8/19/24.

Hospice admission form indicated, R6 was admitted under hospice care on 7/14/24 with a terminal diagnosis of Cerebral Atherosclerosis.

R6's MMSE (Mini-Mental State Examination) score dated 8/11/24 is 10 which indicate severe

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A2000	Continued From page 5	A2000		

cognitive impairment. Likely to require 24-hour supervision and assistance.

On 9/9/24 at 12:37pm, R6 was observed being assisted to the bathroom by staff. R6 was on supplemental oxygen via nasal cannula, the meter on the concentrator read at 5L. Review of documents provided, it was unclear what was the oxygen setting. Review of R6's Standardized Interview/ Initial Assessment indicate R6 use continuous oxygen at 4LPM. R6's. Hospice Brief narrative dated 7/16/24 indicate 2LPM oxygen. R6's Service plan dated 8/19/24 indicated oxygen at 2-3L continuously via nasal cannula.

On 9/10/24 at 3:16pm. R6 was observed feeding self with mechanically soft diet (diced carrot, rice with mixed brown food particle) a slice of blue berry cake was also on the tray. E2 (Assistant Director of Nursing) verified that what was on R6's tray was mechanically soft diet and not puree. Per R6 diet order, R6 was on puree diet. R6's service plan also indicate R6 is on Puree diet, thin liquids.

Review of R6's notes indicated, R6 had three falls since move in:
9/1/24 at 8pm, CNA reports resident fell, family called 911. CNA arrived at apartment and the paramedics already arrived and assisted resident back to bed.
9/2/24 at 2:18am, Resident was restless and calling out, fell, CNA assisted resident back to bed.
9/3/24 at 9:35pm, found by CNA on the floor.
R6's service plan indicated fall interventions include but not limited to DME (Durable Medical Equipment) used: w/c (wheelchair), floor mats, half bed rail, hospital bed. (R6) will use w/c for all locomotion in and outside of apartment ...will

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A2000	Continued From page 6	A2000		

wear shoes when ambulating outside the apartment ...will ask assistance when feeling weak ....
Added to the intervention were:
9/1/24: resident and family educated to call/notify Hospice for all emergencies.
9/2/24: Frequent checks initiated. It did not indicate how often safety checks are conducted.
9/3/24: Family provided camera.

R6's Service plan dated 8/19/24 documented, R6 needs moderate assistance with dressing, mobility, toileting, and transferring and total assist for evacuation.

Service plan also indicate R6 was deemed able to self- administer for medication with assistance from non-licensed staff (Certified Nursing Assistant) despite failing the criteria for self-administration of medication (8/21/24). R6 was deemed able to self-medicate at the following level: Verbal Reminders with assistance. The verbal reminders and assistance were by a non-licensed staff.
Review of R6's notes also indicate issue of back pain requiring injection of Morphine as needed. The Morphine per notes (9/5/24) was provided by a nurse.

R6's notes dated 9/4/24 it stated in part; " Son understands that facility has implemented all interventions to reduce risk for falls for this resident. Resident continues to have falls and helps herself in transferring out of wheelchair or falls from bed ....A companionship/sitter was recommended for this resident at this time to help reduce amount of falls and for safety. Hospice care manager also agreed. Per POA they already decided she needs more assistance and decided skilled nursing home is the route to go.

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A4000	Section 295.4000 Physician/s Assessment This Regulation is not met as evidenced by: Type 3 Violation Section 295.4000 Physician's Assessment a) No more than 120 days prior to admission of a resident to any establishment, a comprehensive assessment that includes an evaluation of the prospective resident's physical, cognitive, and psychosocial condition shall be completed by a physician. The physician's assessment shall include documentation of the presence or the absence of tuberculosis infection in accordance with the Control of Tuberculosis Code. At the time of admission, the physician's assessment must reflect the resident's current condition. b) At least annually, once a resident has moved into the establishment, a comprehensive assessment shall be completed by a physician. c) A physician's assessment shall be completed by a physician upon identification of a significant change in the resident's condition. d) When a physician's assessment is conducted pursuant to this Part, all current negotiated risk agreements shall be renegotiated as necessary. e) More frequent assessments of skin integrity and nutritional status shall be required (Section 15 of the Act) as ordered by the resident's physician and as arranged for by the resident.	A4000		

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A4000	Continued From page 8 f) It is the responsibility of the resident or his/her representative to have physician's assessments and reassessments completed. g) Establishments may develop their own tools for evaluating their residents; however, the establishment evaluation does not replace the requirement for a physician's assessment. Documentation of evaluations and re-evaluations may be in any form that is accurate, that addresses the resident's condition, and that incorporates the physician's assessment. h) The establishment shall monitor and have a reporting procedure in place for notifying a relative or other individual in an emergency situation, significant change in resident's condition, or termination of residency. i) The establishment shall have policies in place to respond to the gradual deterioration of a resident's ability to carry out the activities of daily living that may accompany the aging process. (Source: Amended at 28 Ill. Reg. 14593, effective October 21, 2004) These requirements are not met as evidenced by: Based on interview and record review, the establishment failed to ensure Physician Certification was completed by a Physician for six (R1, R2, R3, R4, R6, R9) residents and prior to move in for one resident (R6). This affected six of ten residents reviewed for resident assessment. Findings include: An onsite visit was conducted on 9/9/24 and	A4000		

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A4000	Continued From page 9 9/10/24. Selected resident files were reviewed. Document titled" Physician Certification" for R1 (dated 5/17/24), R2 (8/8/24), R3 (7/5/24), R4 (5/17/24), R6 (8/23/24), R9 (4/24/24) were all completed by Nurse Practitioner. Per R6's face sheet, R6 moved to the community on 8/19/24. R6's Physician Certification was completed 4 days after move-in (8/23/24). On 9/10/24 at 3:56pm, E1 (Executive Director) was notified of the requirement.	A4000		
A4010	Section 295.4010 Service Plan This Regulation is not met as evidenced by: Type 3 Violation Section 295.4010 Service Plan a) Based on the physician's assessment and establishment evaluation (see Section 295.4000), a written service plan shall be developed and mutually agreed upon by the establishment and the resident. (Section 15 of the Act) The establishment shall respect and accept the resident's choices regarding the service plan. b) The service plan shall be developed by: 1) The resident, resident's representative or any individual requested by the resident; 2) The manager or manager's designee; and	A4010		

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A4010	Continued From page 10 3) A registered nurse, if the resident is receiving nursing services or medication administration, or is unable to direct self-care. c) The service plan shall be signed and dated by all individuals involved in its development. d) The service plan, which shall be reviewed annually, or more often as the resident's condition, preferences, or service needs change, shall serve as a basis for the service delivery contract between the provider and the resident (see Section 295.2030). (Section 15 of the Act) e) The service plan shall be reviewed and revised if necessary immediately after a significant change in the resident's physical, cognitive, or functional condition (see Section 295.4000). f) Based on the physician's assessment, the service plan may provide for the disconnection or removal of any kitchen appliance. (Section 15 of the Act) g) Service plans shall address: 1) The level of service the resident is receiving, including: A) assistance with activities of daily living; B) dietary needs, if the establishment provides therapeutic diets; and C) special accommodations for the resident; 2) The amount, type, and frequency of health-related services needed by the resident;	A4010		

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A4010	Continued From page 11 3) Staff responsible for the provisions of the service plan; 4) Any risk being negotiated; and 5) Whether the resident requires medication reminders, supervision of self-administered medication, or medication administration. h) The service plan shall include all support services provided or arranged for by the establishment. i) Nothing in this Part limits a resident's ability to direct his or her own care and negotiate the terms of his or her own care. Residents have the right to refuse certain services or approaches that would otherwise be recommended based on the physician's assessment if the resident has received clear information regarding the risks and benefits of such a choice and the choice does not put other residents or staff at risk. Disclosure of the risks of refusing services or approaches must be documented in the service plan. These requirements are not met as evidenced by: Based on interview and record review, the establishment failed to ensure preventative measures to prevent skin breakdown and outside services arranged for wound treatment were integrated in the service plan for one (R2) resident. Establishment also failed to update service plan to include individualized and measurable interventions for fall for two residents (R2, R6) and failed to ensure service plan was updated and followed for supplemental oxygen and diet requirement for one (R6) resident.	A4010		

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A4010	Continued From page 12 Findings include: An onsite visit was conducted on 9/9/24 and 9/10/24. Selected residents' documents were reviewed. R2 moved to the Memory Care on 10/2/23. Per R2's face sheet, R2's diagnoses include but not limited to Dementia. R2's MMSE (Mini-Mental State Examination) score dated 8/18/23 is 9/30 which indicate severe cognitive impairment. Likely to require 24-hour supervision and assistance. Per R2's notes, an open pressure sore to R2's left hip with slight yellow drainage was identified on 7/28/24. R2's Home Health notes dated 9/5/24 indicated a stage 3 pressure ulcer wound to the left hip measuring 3.0cmx0.3cmx0.1cm. Treatment: cleanse with wound cleanser, patted dry the applied Santyl ointment to wound bed and covered with bordered foam dressing. Review of R2's Service plan dated 8/27/24 did not include interventions to promote skin integrity/wound healing. On 9/10/24 at 3:29pm, E4 (Memory Care Director) verified the interventions for wound were not included on the service plan. R2's service pan indicated, R2 had multiple falls in the past, some resulted to injury; 10/3/23 (subarachnoid hemorrhage), 2/3/24 (Right hip fracture), 3/20/24, 4/20/24,5/17/24, 8/27/24. R2's service plan indicate the following: (R3) will walk with assistive device when ambulating in and outside of apartment, will wear shoes when ambulating ....will ask assistance when feeling weak ... will place portable call light within reach	A4010		

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A4010	Continued From page 13 .... E4 said R2 cannot use call buttons to call for help. E4 also said, there is no call buttons in the residents' room, only in the bathroom. E4 indicated R2 has a private caregiver in the morning till evening seven days a week to sit with R2 "because sometimes she wants to get up, and it is not safe for her to get up, she falls, she has poor balance." R2's service plan did not reflect appropriate interventions to help with fall prevention. Per R6's face sheet, R6 is 98 years old, with diagnoses which include but not limited to Unspecified severe protein calorie malnutrition, Essential Hypertension, Chronic Diastolic Heart Failure and Chronic Obstructive Pulmonary Disease with acute exacerbation. R6 moved to the establishment on 8/19/24. R6 is under hospice care since 7/14/24 with a terminal diagnosis of Cerebral Atherosclerosis. R6's MMSE (Mini-Mental State Examination) score dated 8/11/24 is 10 which indicate severe cognitive impairment. Likely to require 24-hour supervision and assistance. On 9/9/24 at 12:37pm, R6 was observed being assisted to toilet by staff. R6 was on supplemental oxygen via nasal cannula, the concentrator indicator read at 5L. On 9/9/24 at 3:16pm, surveyor and E2 (Assistant Director of Nursing) went to R6's apartment. R6 was feeding self independently. On R6's tray was a slice of blue berry cake about 5cm x 5cm in size, diced carrot and mixture of rice and a brown particle. E2 verified that it was not a puree diet but a mechanically soft diet. R6 was not wearing	A4010		

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HERITAGE WOODS OF HUNTLEY, LLC	12450 REGENCY PARKWAY HUNTLEY, IL 60142

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
A4010	Continued From page 14 the nasal cannula for the oxygen, but the concentrator was on and set to 5L. Review of R6's Standardized Interview/ Initial Assessment indicate R6 use continuous oxygen at 4LPM. R6's. Hospice Brief narrative dated 7/16/24 indicate 2LPM oxygen. R6's Service plan dated 8/19/24 indicated oxygen at 2-3L continuously via nasal cannula. Unclear what was the actual setting of oxygen per documents available for review. R6's service plan also indicate R6 is on Puree diet, thin liquids. R6's Diet order dated 8/19/24 was Puree, thin liquids, and not mechanically soft diet as observed. On 9/11/23 at 11:57am, E1 (Executive Director) verified this diet order was current. R6 had three documented falls per R6's notes: 9/1/24 at 8pm, CNA reports resident fell, family called 911. CNA arrived at apartment and the paramedics already arrived and assisted resident back to bed. 9/2/24 at 2:18am, Resident was restless and calling out, fell, CNA assisted resident back to bed. 9/3/24 at 9:35pm, found by CNA on the floor. R6's service plan indicated fall interventions include but not limited to DME (Durable Medical Equipment) used: w/c (wheelchair), floor mats, half bed rail, hospital bed. (R6) will use w/c for all locomotion in and outside of apartment ...will wear shoes when ambulating outside the apartment ...will ask assistance when feeling weak .... Added to the intervention were: 9/1/24: resident and family educated to call/notify	A4010		

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A4010	Continued From page 15 Hospice for all emergencies. 9/2/24: Frequent checks initiated. It did not indicate how often safety checks are conducted. 9/3/24: Family provided camera.	A4010		
A5000	Section 295.5000 Medication Reminders, Supervision of Self Med This Regulation is not met as evidenced by: Type 3 Violation Section 295.5000 Medication Reminders, Supervision of Self-Medication, Medication Administration and Storage a) An establishment may provide medication reminders, supervision of self-administered medication, and medication administration as an optional service. b) Medication reminders include: 1) Reminding residents to take pre-dispensed, self-administered medication; 2) Observing the resident; and 3) Documenting whether the resident took the medication. c) Supervision of self-administered medication means assisting the resident with self-administered medication using any combination of the following. Supervision of self-administered medication by unlicensed personnel shall be under the direction of a licensed health care professional.	A5000		

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A5000	Continued From page 16 1) Reminding residents to take medication; 2) Confirming that residents have obtained and are taking the dosage as prescribed; 3) Reading the medication label to residents; 4) Checking the self-administered medication dosage against the label of the medication; 5) Opening the medication container for a resident who is physically unable to do so; 6) Confirming that residents have obtained and are taking the dosage as prescribed; and 7) Documenting in writing that the resident has taken (or refused to take) the medication. d) Medication administration refers to a licensed health care professional employed by an establishment engaging in administering routine insulin and vitamin B-12 injections, oral medications, topical treatments, eye and ear drops, or nitroglycerin patches. Non-licensed staff may not administer any medication. (Section 70 of the Act) e) Medication stored by a resident in the resident's unit shall be stored and controlled as stated in the resident's service plan and shall be inaccessible to other residents. f) If an establishment provides medication administration or supervision of self-administered medication, the establishment's medication policies and procedures shall be approved by a physician, pharmacist, or registered nurse and shall address:	A5000		

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A5000	Continued From page 17 1) Obtaining and refilling medication; 2) Storing and controlling medication; 3) Disposing of medication; 4) Assisting in the self-administration of medication and medication administration, as applicable; and 5) Recording of medication assistance provided to residents and maintenance of medication records. g) If an establishment provides medication administration or supervision of self-administered medication, a drug reference guide, no older than 2 years from the copyright date, shall be available and accessible for use by employees. h) Any medication stored by the establishment shall meet the following requirements: 1) Medication shall be stored in a locked container, cabinet, or area that is inaccessible to residents; 2) Medication shall not be left unattended by an employee; 3) Medication shall be stored in the original labeled container, except for medication organizers, and according to instructions on the medication label; 4) A bathroom or laundry room shall not be used for medication storage; and	A5000		

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A5000	Continued From page 18 5) Any expired or discontinued medication, including those of deceased residents, shall be disposed of according to the establishment's medication policies and procedures. i) Except for medication organizers, resident medication shall not be pre-poured. Medication organizers may be prepared up to one month in advance by the following individuals: 1) A resident or the representative; 2) A resident's relatives; 3) A nurse; or 4) As otherwise provided by law. j) A separate medication record shall be maintained for each resident receiving medication administration and shall include: 1) Name of resident; 2) Name of medication, dosage, directions, and route of administration; 3) Date and time medication is scheduled to be administered; 4) Date and time of actual medication administration; and 5) Signature or initials of the employee administering medication. These requirements are not met as evidenced by: Based on observation, interview and record review, the establishment failed to conduct an	A5000		

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A5000	Continued From page 19	A5000		

accurate assessment to ensure medications are safely administered for one (R6) of ten residents reviewed for medication administration .

Findings include:

Per R6's face sheet, R6 is 98 years old, with diagnoses which include but not limited to Unspecified severe protein calorie malnutrition, Essential Hypertension, Chronic Diastolic Heart Failure and Chronic Obstructive Pulmonary Disease with acute exacerbation. R6 moved to the establishment on 8/19/24. R6 is under hospice care since 7/14/24 with a terminal diagnosis of Cerebral Atherosclerosis.
R6's MMSE (Mini-Mental State Examination) score dated 8/11/24 is 10 which indicate severe cognitive impairment. Likely to require 24-hour supervision and assistance.

On 9/10/24 at 3:16pm, R6 was observed in the apartment. Surveyor was with E2 (Assistant Director of Nursing). Observed on top of a chest was R6's pill organizer. The unlabeled pills were organized according to days of the week, day, noon evening. E2 said, "I do not think she (R6) knows what each medication is for."

On 9/10/24 at 1:31pm, E2 said R6 is assisted by CNA (Certified Nursing Assistant) for medication. E2 indicated CNA will pour out the pills from the pill organizer and resident will then take the pills.

R6's form titled; "Self-Administration Medication Assessment" dated 8/21/24. This form indicated; the resident must be able to perform each step indicated below prior to beginning self-administration of medications. For R6, the answer to the following questions were "No".
1.Can correctly state what each medication is

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A5000	Continued From page 20 for? 2.Can correctly state what time medications are to be taken? 3.Can demonstrate ability to open medication containers correctly? 4.Can correctly measure the appropriate amount of medication from the container? 13. Can correctly read aloud instructions for use on medication container? 14. Can correctly state common side effects of each medication? 15.Can correctly state dosage of each medication? Regardless of R6 not meeting these criteria, R6 was deemed able to self-medicate at the following level: Verbal Reminders with assistance. Per R6's Physician orders, R6 takes Lorazepam 0.5 mg every night and every 4 hours as needed and Morphine .25ml every 2 hours as needed for pain. Review of R6's notes also indicate issue of back pain requiring injection of Morphine as needed. The Morphine per notes (9/5/24) was provided by a nurse.	A5000		