Citation Number: 6820					Date: 7/3/18	
Facility Name: Accura Healthcare of Knoxville, LLC			Survey [Dates:		
Facility Addre	ss/City/State/Zip		5/23/18 8	§ 5/24/18	8	
606 North Seventh St. Knoxville, IA 50138		JKM				
Rule or Code Section	Natur	e of Violation	Class	Fine A	mount	Correction date
58.19(2)a	481—58.19(135C) Required nursing services for residents. The resident shall receive and the facility shall provide, as appropriate, the following required nursing services under the 24-hour direction of qualified nurses with ancillary coverage as set forth in these rules: 58.19(2) Medication and treatment. a. Administration of all medications as ordered by the physician including oral, instillations, topical, injectable (to be injected by a registered nurse or licensed practical nurse only); (I, II) DESCRIPTION: Based on record review and staff interview, the facility failed to ensure staff administered all medications as ordered by the physician (Resident #1). The facility reported census of 43 residents. Findings include: According to the Minimum Data Set (MDS) assessment tool date 4/7/18, Resident #1 had a Brief Interview for Mental Status (BIMS) score of 6 which indicated a severely impaired cognitive status. Resident #1 required extensive assistance with transfers, ambulation (walking), dressing, toilet use			\$3,8 (held i suspe		Upon Receipt

Facility Administrator Date

Page 1 of 5

If, within thirty (30) days of the receipt of the citation, you (1) do not request a formal hearing or; (2) withdraw your request for formal hearing, and (3) pay the penalty; the assessed penalty will be reduced by thirty–five percent (35%) pursuant to Iowa Code section 135C.43A (2013).

		_				
Citation Number: 6820					Date: 7/3/18	
Facility Name: Accura Healthcare of Knoxville, LLC			Survey [Dates:		
Facility Addres	ss/City/State/Zip		5/23/18 8	§ 5/24/18	3	
606 North Seventh St. Knoxville, IA 50138		JKM				
Rule or Code Section	Natur	e of Violation	Class	Fine A	mount	Correction date
	I		1		1	
	schizophrenia.	ny, seizure disorder, and				
	Progress Notes dated 5/20/18 at 1:25 a.m. written by Staff A, Licensed Practical Nurse (LPN) documented at approximately midnight a certified nursing assistant (CNA) summoned her to Resident #1's room because the resident was "breathing funny." Staff A noted Blood pressure 74/37, pulse 89 beats per minute, respirations 24 per minute and shallow, with cool, clammy, gray-colored skin. Oxygen saturation level was 62% on room air and climbed to 71% with 2 liters per minute of supplement oxygen. Resident #1 was unresponsive and eyes rolled back into head upon sternal rub. Staff A received orders to transfer Resident #1 to emergency room for evaluation and treatment. Ambulance arrived at 12:15 a.m. to transport.					
	department printed 5/24 found unresponsive and time Resident #1 awoke	final report from the emergency 4/18 revealed Resident #1 d was given Narcan at which e immediately. Preliminary urine Oxycodone, which patient				
		ort dated 5/24/18 noted sample collected on 5/21/18 sence of morphine (MS Contin)				
	In an interview on 5/24/	18 at 12:01 p.m. Staff B,				

______ Facility Administrator Date

If, within thirty (30) days of the receipt of the citation, you (1) do not request a formal hearing or; (2) withdraw your request for formal hearing, and (3) pay the penalty; the assessed penalty will be reduced by thirty–five percent (35%) pursuant to lowa Code section 135C.43A (2013).

Page 2 of 5

		_				
Citation Numb	er:				Date: 7/3/18	
Facility Name: Accura Healthcare of Knoxville, LLC			Survey D	Dates:		
Facility Addres	ss/City/State/Zip		5/23/18 8	5/24/18	3	
606 North Seventh St. Knoxville, IA 50138		JKM				
Rule or Code Section	Nature of Violation			Fine A	mount	Correction date
	licensed practical nurse, stated she worked the 2:00 p.m. to 10:00 p.m. shift on 5/19/18 and noted they were very busy that evening. Staff B recalls Resident #1 was her normal self. Resident #1 went to supper and at around 8:45 p.m. to 9:00 p.m. Staff B assisted Resident #1 into bed. Resident #1 was alert at that time, talking normally. Staff B stated Resident #2 is roommates with Resident #1 and Resident #2 takes both MS Contin 60 milligrams (morphine) and Oxycodone 10 milligrams at evening meal. That evening Staff B set up Resident #2's MS Contin and Oxycodone at 4:00 p.m. and when she went to give it Resident #2 was in the bathroom. Staff B stated she returned to the cart, placed tape over the cup, labeled it and placed it back into the medication cart. Staff B stated she forgot about the pills until 6:00 p.m. at which time she delivered the medications to Resident #2. Staff B stated Resident #2 was upset about the delay, but took the pills in her presence. Staff B stated she gave Resident #2's bedtime pills (including Oxycodone) around 9:00 p.m. and remained with her until the medications were ingested. Staff B admitted if Resident #1 had Oxycodone in her system, it was most likely due to her making an error involving Resident #1's roommate's medications. Staff B stated she believes the medications were passed correctly. In an interview on 5/24/18 at 5:03 p.m. the Pharmacist stated MS Contin (morphine) is a slow release medication which enters the system within 30 minutes and has peak effect in 3 to 4 hours. Oxycodone enters the body within 10 minutes and peaks in 30 to 60					

Facility Administrator Date

If, within thirty (30) days of the receipt of the citation, you (1) do not request a formal hearing or; (2) withdraw your request for formal hearing, and (3) pay the penalty; the assessed penalty will be reduced by thirty–five percent (35%) pursuant to lowa Code section 135C.43A (2013).

Page 3 of 5

Citation Number: 6820					Date: 7/3/18	
Facility Name: Accura Healthcare of Knoxville, LLC			Survey I	Dates:		
-	ss/City/State/Zip		5/23/18 8	§ 5/24/18	8	
606 North Seventh St. Knoxville, IA 50138		JKM				
Rule or Code Section	Natur	e of Violation	Class	Fine A	Amount	Correction date
	minutes. The Pharmaci someone not routinely or reaction, but noted it van According to the Minimulassessment tool with as 3/25/18, Resident #2 has Status (BIMS) score of impaired cognitive statu with mobility, dressing, needs. Resident #2's diabetes mellitus, chronidisease and hypertension. Resident #2's May 2018 record (MAR) indicated milligrams three times a meal and Oxycodone 10 including at the evening MAR indicated these may B on 5/19/18 as ordered. The Controlled Medicati Resident #2's MS Contidose at HS (bedtime), with emedication was to be extra doses of Resident removed by Staff B that					

Date

Page **4** of **5**

Facility Administrator

If, within thirty (30) days of the receipt of the citation, you (1) do not request a formal hearing or; (2) withdraw your request for formal hearing, and (3) pay the penalty; the assessed penalty will be reduced by thirty–five percent (35%) pursuant to Iowa Code section 135C.43A (2013).

Citation Number: 6820				Date: 7/3/18			
Facility Name: Accura Healthcare of Knoxville, LLC			Survey	Survey Dates:			
Facility Address/City/State/Zip 606 North Seventh St.			5/23/18	5/23/18 & 5/24/18			
Knoxville, IA 50138		JKM					
Rule or Code Section	Natur	e of Violation	Class	Fine Amount	Correction date		

Facility Administrator	Date

Page **5** of **5**