STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENNTIFICATION NUMBER	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	676439	A. BUILDING _____ B. WING _____	**03/19/2020**

NAME OF PROVIDER OF SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP
TRINITY REHABILITATION & HEALTHCARE CENTER	**314 E CAROLINE ST TRINITY, TX 75862**

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 **Level of harm -** Actual harm **Residents Affected -** Few	**Provide appropriate treatment and care according to orders, resident's preferences and goals.** **NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on interview and record review the facility failed to ensure treatment and care in accordance with standards of practice was provided for 1 of 7 residents reviewed for insulin administration. (Resident #1) The facility did not: *clarify physician orders for checking Resident #1's blood sugars; *obtain parameters of when to notify the physician for high or low blood sugars; *obtain orders and parameters for the administration of [MEDICATION NAME] (a medication used to treat low blood sugar); *monitor and record blood sugar results in the residents clinical record; and *include blood sugar checks, administration of insulin and diabetic care in the resident's care plan. The resident was sent to the emergency room 2 times for low blood sugar. This failure could place residents receiving insulin at risk for emergency room visits, hospitalization and death. Findings included: Physician orders dated March 2020 indicated Resident #1 admitted [DATE], was [AGE] years old, and had [DIAGNOSES REDACTED]. The physician orders did not indicate the resident had a [DIAGNOSES REDACTED]. The orders indicated Resident #1 was to receive the following to treat diabetes: *Humalog Solution 100 Unit/ML, 9 units subcutaneously before meals for diabetes and to hold if blood sugar was below 100; and *Insulin [MEDICATION NAME] solution ([MEDICATION NAME])100 Unit/ML 25 units subcutaneously (below the skin) at bedtime for diabetes. A physician order dated [DATE] indicated Humalog Solution 100 Unit/ml, 9 units before meals was discontinued. The MDS dated [DATE] indicated Resident #1's cognition was severely impaired. The resident was totally dependent for dressing, toilet use, and personal hygiene. The MDS did not indicate the resident was diabetic. The MDS indicated Resident #1 received insulin injections 5 of 7 days since admission/entry to the facility. The care plan 03/09/20 did not indicate Resident #1 received blood sugar checks or administration of insulin and did not address diabetic care. A MAR dated March 2020 indicated Resident #1 received [MEDICATION NAME] (a long-acting insulin medication used to treat diabetes) 100 Unit/ML, 25 units subcutaneously at bedtime for diabetes and blood sugar checks as follows: [DATE] at 7:00 PM: Dosage given with blood sugar of 142. 03/09/20 at 7:00 PM: Dosage given with blood sugar of 222. 0[DATE] at 7:00 PM: Dosage given with blood sugar of 207. 03/11/20 at 7:00 PM: No indication of dosage given with no recorded blood sugar. 03/12/20 at 7:00 PM: Dosage given with blood sugar of 258. A MAR dated March 2020 indicated Resident #1 was to receive Humalog (a fast-acting insulin used to treat diabetes) 100 Unit/ML, 9 units subcutaneously before meals for diabetes at 7:00 AM, 11:00 AM, and 4:00 PM. The MAR indicated to hold the Humalog for a blood sugar below 100. The MAR did not have blood sugar results recorded related to Humalog administration. The MAR indicated the following: 03/07/20 at 7:00 AM: 9 with nurse's initials 03/07/20 at 11:00 AM: 9 with nurse's initials 03/07/20 at 4:00 PM: 9 with nurse's initials [DATE] at 7:00 AM: 9 with nurse's initials [DATE] at 11:00 AM: 9 with nurse's initials [DATE] at 4:00 PM: no documentation 03/09//20 at 7:00 AM: 9 with nurse's initials 03/09/20 at 11:00 AM: 14 with nurse's initials 03/09/20 at 4:00 PM: 14 with nurse's initials 0[DATE] at 7:00 AM: 3 with nurse's initials 0[DATE] at 11:00 AM: 3 with nurse's initials 0[DATE] at 4:00 PM: indicated Humalog was discontinued During an interview on 03/19/20 at 5:00 PM, the ADON said 9 on the MAR meant see progress/nurse's notes, a 14 on the MAR meant dosage held and a 3 on the MAR meant resident not in the facility. Nursing notes related to Humalog administration for Resident #1 indicated the following: 03/07/20 at 7:00 AM: No note related to Humalog dosage and no recorded blood sugar 03/07/20 at 11:00 AM: No note related to Humalog dosage and no recorded blood sugar. 03/07/20 at 4:00 PM: Indicated Humalog Solution 100 Unit/ML inject 9 unit subcutaneously before meals for diabetes. Hold if blood sugar is below 100. There was no documentation of blood sugar or if dosage was given. [DATE] at 7:00 AM: No note related to Humalog dosage and no recorded blood sugar. [DATE] at 10:10 AM: Indicated Humalog Solution 100 Unit/ML inject 9 unit subcutaneously before meals for diabetes. Hold if blood sugar is below 100. There was no documentation of blood sugar or if dosage was given. [DATE] at 4:00 PM: No note related to Humalog dosage and no recorded blood sugar. 03/09/20 at 7:00 AM: No note related to Humalog dosage and no recorded blood sugar. 03/09/20 at 12:01 PM: Indicated Humalog dosage held for blood sugar of 83. 03/09/20 at 6:39 PM: Indicated Humalog dosage held for blood sugar of 92. 0[DATE] at 7:00 AM: No note related to Humalog dosage and no recorded blood sugar. (The MAR indicated the resident was not at the facility for the 7:00 AM dosage). A nursing note dated 0[DATE] at 8:01 AM indicated Resident #1 was limp, cold, non-responsive to verbal stimuli and sternum chest rub. The noted indicated the resident's blood sugar was 29 and she appeared to possibly be having [MEDICAL CONDITION] because her eyes exhibited [DIAGNOSES REDACTED] (eyes make repetitive, uncontrolled movements). The note indicted the resident's pupils were dilated and fixed and a [MEDICATION NAME] injection (used to treat very low blood sugar) was administered to the resident. The note indicated 911 was notified and Resident #1's blood sugar was 130 at 8:29 AM. Resident #1 was transported to the hospital via EMS. During an interview on 03/19/20 at 4:50 PM, CNA A said on the morning of 0[DATE] she entered Resident #1's room just before 8:00 AM to assist her to clean up and get dressed. CNA A said she spoke to Resident #1 calling her name and touched her on the arm to awaken her. Resident #1 did not respond. She yelled to another CNA to get the nurse right away. During an interview on 03/19/20 at 5:40 PM, LVN B he was Resident #1's primary nurse and he was alerted by a CNA A on 0[DATE] at approximately 8:00 AM that Resident #1 was unresponsive. He said he observed the resident's pupils were fixed and dilated. He said her blood sugar was 29 and he administered [MEDICATION NAME] and called 911. LVN B said he had last checked on the resident around 5:30 AM and had not yet checked her blood sugar or administered her insulin. He said he normally worked nights and did not normally administer Resident #1's Humalog. A nursing note dated 0[DATE] at 2:23 PM indicated Resident #1 arrived back to the facility with the [DIAGNOSES REDACTED]. A nursing note dated 0[DATE] at 2:32 PM indicated the physician assistant gave orders to discontinue Humalog and keep the [MEDICATION NAME] dosage the same. A nursing note dated 03/13/20 at 9:05 AM indicated Resident #1 was found unresponsive with foam coming from her mouth. The note indicated the nurse did multiple sternal rubs with no success and the resident's blood sugar was 45 at 8:25 AM. The note indicated the resident was given [MEDICATION NAME] and 15 minutes later her blood sugar was 49. The note indicated upon EMS arrival the resident's blood sugar was checked again and was 40. Resident #1 was transported to the hospital by EMS. Nursing notes included no assessment or record of Resident #1 returning to the facility on ,[DATE]//20. During a phone interview on 03/19/20 at 8:20 PM, LVN C said she was Resident #1's primary nurse when she returned from the hospital on [DATE]. She said she forgot to document an assessment of the resident when she returned from the hospital after 6:00 PM. LVN C said she did assess Resident #1 and checked her blood sugar several times during the night. LVN C said she recorded the blood sugars on her nursing report sheet. A nursing report sheet dated 03/13/20 indicated Resident #1 returned to the facility and blood sugar checks were 276, 184, and 151. There were no times recorded for Resident #1's return or the blood sugar checks. A nursing note dated 03/14/20 at 1:20 PM indicated Resident #1 transported via EMS to the hospital at 4:13 PM due to chest pain. During a phone interview on 03/19/20 at 4:20 PM, Resident #1's spouse said she had been diabetic for many years and was managed by taking pills. He said she had to start taking insulin while she was still at home and he took care of her. He said he managed her blood sugars at home by checking and recording the blood sugars. He said he had nurses

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.

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENNTIFICATION NUMBER	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	676439	A. BUILDING _____ B. WING _____	**03/19/2020**

NAME OF PROVIDER OF SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP
TRINITY REHABILITATION & HEALTHCARE CENTER	**314 E CAROLINE ST TRINITY, TX 75862**

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 **Level of harm -** Actual harm **Residents Affected -** Few	(continued... from page 1) who came to his home and reviewed the blood sugars and her insulin dosages. He said Resident #1 had never had an episode of low blood sugar with unresponsiveness at home. During an interview on 03/19/20 at 6:05 PM, LVN A said she recorded Resident #1's blood sugar in the nursing notes when she held the insulin dosage. LVN A said there was no place to record blood sugars on the MAR for Resident #1. During an interview on 03/19/20 at 5:30 PM, the ADON said Resident #1's blood sugar was checked before each meal and at bedtime. He said he could not prove the blood sugar checks were done because they were not documented on the MAR or in nursing notes. The ADON stated the facility did not obtain a physician's order for blood sugar checks for Resident #1. The ADON said blood sugars are normally recorded on the MAR at the time insulin dosage was given and he did not know why Resident #1's blood sugars were not recorded at the time on Humalog dosages. During an interview on 03/19/20 at 6:30 PM, the director of operations said he expected residents blood sugars to be monitored and documented with insulin administration. He said the facility had not accomplished that with Resident #1. He said the facility should have obtained an order for [REDACTED]. The Insulin Administration policy revised 09/14 indicated in part documentation would include The resident's blood glucose result, as ordered . The website https://www.diabetes.org/diabetes/medication-management/blood-glucose-testing-and-control/[DIAGNOSES REDACTED] accessed on 3/31/20 indicated Low blood sugar ([DIAGNOSES REDACTED]) is when your blood sugar levels have fallen low enough that you need to take action to bring them back up. This is usually when you blood sugar is less than 70.