

Department of Health & Human Services  
Centers for Medicare & Medicaid Services

Printed: 06/25/2025  
Form Approved OMB  
No. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  155401	(X2) MULTIPLE CONSTRUCTION  A. Building B. Wing	(X3) DATE SURVEY COMPLETED  12/04/2023
NAME OF PROVIDER OR SUPPLIER  Ben Hur Health and Rehabilitation		STREET ADDRESS, CITY, STATE, ZIP CODE  1375 S Grant Ave Crawfordsville, IN 47933	
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 0695  Level of Harm - Minimal harm or potential for actual harm  Residents Affected - Few	<p>Provide safe and appropriate respiratory care for a resident when needed.</p> <p>48226</p> <p>Based on observation, record review, and interview, the facility failed to obtain an order for oxygen delivery to a resident upon the resident's admission to the facility until 6 days later and failed to ensure a resident received the correct oxygen flow for 1 of 1 resident reviewed for respiratory care (Resident 245).</p> <p>Findings include:</p> <p>On 11/27/23 at 2:15 p.m., during observation of Resident 245, oxygen delivered by a concentrator (a medical device that separates nitrogen from the air around you so you can breathe up to 95% pure oxygen), at 3 liters (L) continually by nasal cannula (NC) (a medical device to provide supplemental oxygen therapy to people who have lower oxygen levels). The Resident indicated he had been on 4 to 5 liters and was to have 6 liters when he was up walking. He indicated it should be at least 5 L. Resident had some shortness of breath during the observation and interview.</p> <p>On 11/30/23 at 8:54 a.m., Resident tested positive for COVID-19 and was placed in droplet precautions (isolation requiring personal protective equipment). The resident was pale and shaky. Oxygen was being administered by a concentrator at 6 L per NC continually.</p> <p>During interview on 11/30/23 at 10:01 a.m., Licensed Practical Nurse (LPN) 4 indicated the liter flow should be set at 3 to 5 L, and the resident was receiving 5 L. She indicated she checked on the resident and verified it was set at 5 liters. LPN 4 indicated Certified Nurse Aides (CNA) were to tell the nurse to adjust liter flow since the CNA did not adjust the liter flow.</p> <p>During an interview on 12/1/23 at 12:57 p.m., Licensed Practical Nurse (LPN) 7 indicated she would call the physician at the time of admission and obtain an order for oxygen if a resident needed it and was aware the resident was on oxygen after being admitted . LPN 7 indicated Resident 245 did not have an order for oxygen at the time of admission. LPN 7 indicated the resident currently had an order for 3 to 5 liters to keep oxygen SATs (saturation level) (a percentage of how much oxygen your blood is carrying compared to the maximum it is capable of carrying), above 90%.</p> <p>(continued on next page)</p>		

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.

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER  
REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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<p>F 0695</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>On 12/1/23 at 1:15 p.m., a medical record review indicated Resident 245 had diagnoses of Atherosclerotic heart disease of native coronary artery (refers to heart weakening caused by reduced blood flow to your heart) without angina pectoris (chest pain), essential (primary) hypertension (high blood pressure), COPD (chronic obstructive pulmonary disease) (a group of diseases that cause airflow blockage and breathing-related problems), pneumonia (respiratory infection which affects the lungs), and respiratory failure with hypoxia (low levels of oxygen in your body tissues).</p> <p>Hospital discharge, dated 11/21/23, indicated an order of O2 (oxygen): at rest: 5L with activity: 6L with Oxymerizer (an oxygen-conserving device that is designed to function optimally at lower flow rates, typically up to about 6 liters per minute). It was advised to continue use at ECF (extended care facility). Resident 245 had acute hypoxic respiratory failure secondary to left upper lobe pneumonia and sepsis and the treatment plan was to continue antibiotics, steroids, and the O2 order above.</p> <p>Oxygen order, dated 11/27/23 at 6:59 p.m., indicated Oxygen at 3 to 5 L per nasal cannula to keep O2 sats above 90%, every shift for diagnosis of chronic obstructive pulmonary disease. Staff were to monitor Oxygen sats every shift, dated 11/27/2023.</p> <p>A care plan, dated 11/28/23, indicated resident has a potential for impaired gas exchange related to COPD. Intervention dated, 11/28/23, administer oxygen as ordered, 3 to 5 Liters per nasal cannula.</p> <p>The medication administration record indicated an order for Oxygen at 3 to 5 L per nasal cannula to keep O2 sats above 90%. The record indicated the order was administered beginning 11/28/23.</p> <p>Nurse progress note dated, 11/21/23 at 5:02 pm indicated, Resident receives O2 at 5L at rest.</p> <p>Nurse progress note dated, 11/22/23 at 4:32 p.m., indicated Respiratory Assessment: Uses oxygen (device/LPM) 5L/NC, Bi-pap/C-pap, SOB on exertion.</p> <p>On 11/30/23the Executive Director (ED) provided an undated document, titled, Oxygen Therapy and Devices and indicated it was the policy currently being used by the facility. The policy indicated, .Purpose, Oxygen is a basic human need. Without it, we would not survive. The air that we breathe contains approximately 21% oxygen. For most people with healthy lungs, this is sufficient, but for some people with certain health conditions whose lung function is impaired, the amount of oxygen that is obtained through normal breathing is not enough. Therefore, they require supplemental amounts to maintain normal body function .Indications for oxygen use 1. Obstructive pulmonary disease, 2. Shortness of breath .Definition of Oxygen .1. Oxygen is a drug which must be ordered by the physician .Initiation of Oxygen .1. Verify physician order .7. Apply device to patient with appropriate liter flow .,</p> <p>3.1-47(a)(6)</p>		

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<p>F 0812</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Procure food from sources approved or considered satisfactory and store, prepare, distribute and serve food in accordance with professional standards.</p> <p>49068</p> <p>Based on observation, interview, and record review, the facility failed to ensure food thermometers were cleaned according to policy which had the potential to effect 9 of 9 residents who received a modified meal from the kitchen.</p> <p>Findings included:</p> <p>During a random kitchen observation on 11/30/23 at 11:40 a.m., food temperatures were checked by Dietary [NAME] 9. [NAME] 9 removed a packet from the box, removed the wipe from the packet, cleaned the thermometer, and plunged it into a full container of the soft and bite pizza (modified meal for residents requiring soft and bite size food). The box she retrieved the packet from was observed to be Sureprep Skin Protectant Wipes (a liquid film-forming dressing applied to skin to form a protective barrier to reduce friction). When asked what she cleaned the thermometer with, she indicated she had just cleaned the thermometer and showed the opened wipe package that she had placed in a bowl. The packet indicated it was a Sureprep skin protectant wipe. [NAME] 9 indicated probe wipes (thermometer sanitizing wipes). When asked to read the packaging, she picked up the box of Sureprep skin protectant wipes and indicated it said probe wipes. When asked to re-read it, she again indicated it to be probe wipe cleaner while she pointed at the words. When informed that the wipes she used to clean the thermometer were not probe cleaning wipes, the box did not indicate they were probe cleaning wipes, and the wipes used were a medical skin treatment, [NAME] 9 called for the Dietary Manager (DM) and asked him if the wipes she just used were the correct wipes. The DM indicated they were probe wipe cleaners and pulled packets out of his shirt pocket to compare. The packets he pulled from his pocket were observed to be Wipes Plus probe wipes. The DM was notified that the wipes [NAME] 9 had were not probe wipes but were a medical skin treatment. [NAME] 9 indicated she could not serve the soft and bite pizza after putting the thermometer in it without being cleaned with probe wipe cleaners. She notified the DM that the container of food needed to be thrown away.</p> <p>In an interview on 11/30/23 at 11:47 a.m., the DM indicated that the box of skin protectant wipes had been in the kitchen since the last dietary manager was there before him, and since he started. The wipes were stored in a drawer located at the cook's station. The DM checked the drawer and only Wipes Plus probe wipe cleaners were found to be in the drawer. The DM indicated that he gave the skin protectant wipes to the Executive Director (ED) to get rid of.</p> <p>On 11/30/23 at 2:45 p.m., the ED provided and identified a document as a current facility policy, titled, American Senior Communities Food Temperatures with a revised date of 6/23. The policy indicated, .5. Temperatures should be taken with a sanitized and calibrated thermometer</p> <p>On 11/30/23 at 2:57 p.m., the ED provided and identified a document as the current product description for the skin protectant wipes that had been used to clean the thermometer in the kitchen. The description included a picture of the box that indicated, Medline; skin protectant . Sureprep protective wipe . effective protection between adhesive and skin . helps tape and film adhesion; non-irritating</p> <p>(continued on next page)</p>		

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F 0812  Level of Harm - Minimal harm or potential for actual harm  Residents Affected - Some	On 11/30/23 at 3:00 p.m., the ED provided and identified a document as current facility material safety data sheet (SDS), titled, Safety Data Sheet Sureprep Skin Protectant Wipe with a revised date of 8/10/23. The SDS indicated, .Section 4. First-Aid Measures .ingestion: if swallowed, call a physician immediately. Rinse mouth and throat thoroughly with water  3.1-21(i)(3)		