

DEPARTMENT OF HEALTH AND HUMAN SERVICES  
CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 01/24/2013  
FORM APPROVED  
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  345494	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED  01/10/2013
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NAME OF PROVIDER OR SUPPLIER  PEAK RESOURCES - GASTONIA	STREET ADDRESS, CITY, STATE, ZIP CODE 2780 X-RAY DR GASTONIA, NC 28054
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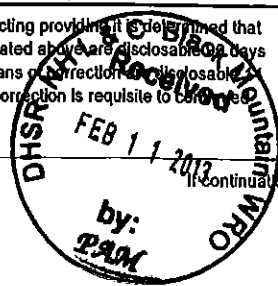
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F 441 SS=E	<p><b>483.65 INFECTION CONTROL, PREVENT SPREAD, LINENS</b></p> <p>The facility must establish and maintain an Infection Control Program designed to provide a safe, sanitary and comfortable environment and to help prevent the development and transmission of disease and infection.</p> <p>(a) Infection Control Program The facility must establish an Infection Control Program under which it - (1) Investigates, controls, and prevents infections in the facility; (2) Decides what procedures, such as isolation, should be applied to an individual resident; and (3) Maintains a record of incidents and corrective actions related to infections.</p> <p>(b) Preventing Spread of Infection (1) When the Infection Control Program determines that a resident needs isolation to prevent the spread of infection, the facility must isolate the resident. (2) The facility must prohibit employees with a communicable disease or infected skin lesions from direct contact with residents or their food, if direct contact will transmit the disease. (3) The facility must require staff to wash their hands after each direct resident contact for which hand washing is indicated by accepted professional practice.</p> <p>(c) Linens Personnel must handle, store, process and transport linens so as to prevent the spread of infection.</p>	F 441	<p>Filing of the Plan of Correction does not constitute an admission that the deficiencies alleged did, in fact, exist. This Plan of Correction is filed as evidence of the facility's desire to comply with the requirements and to continue to provide high quality of care.</p> <p><u>Affected Residents</u> : Resident #9, #38, #56, #70, #78, #108 and #153 were noted with no adverse reactions related to glucometer use. Resident #9, #38, #56, #70, #78, #108 and #153 were provided with individual glucometers as were other residents who require finger stick blood sugars.</p> <p><u>Potentially Affected Residents</u>: DON completed audit for 100% of residents regarding diabetic status. All other residents requiring finger stick blood sugars have the potential to be affected. Residents who require finger stick blood sugars were provided with individual glucometers.</p>	1/28/13  1/28/13
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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE *Gydia Ray* TITLE Administrator (X6) DATE 2/7/13

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 disclosures 30 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 disclosures 30 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to care of the program participant.

Original Signature Date: 1/31/13



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F 441	<p>Continued From page 1</p> <p>This REQUIREMENT is not met as evidenced by: 3 of 3 observations for glucometer use</p> <p>Based on observations, staff interviews and record reviews, the facility failed to properly disinfect blood glucose monitors (glucometers) prior to use for 7 of 7 residents observed for blood sugar monitoring. (Residents #9, #38, #56, #70, #78, #108 and #153).</p> <p>Findings included:</p> <p>A facility policy entitled Cleaning and Disinfection of Medical Equipment dated 03/2010 specified the effectiveness of the disinfection process depended, in part, on the exposure time to the germicide.</p> <p>A review of the Instructions provided by the manufacturer of the germicidal disposable wipe utilized by the facility was conducted. The directions specified to accomplish disinfection of a hard surface, unfold a wipe and thoroughly wet the surface. Treated surface must remain visibly wet for a full 2 minutes. Use additional wipe(s) if needed to assure continuous 2 minute wet contact time. Let air dry.</p> <p>1. On 01/08/13 at 3:49 PM, Nurse #2 was observed removing 2 glucometers from the 400 hall medication cart and placing them in clear plastic cups on top of the cart. Removing a glucometer from its cup, Nurse #2 wiped the glucometer with a germicidal wipe and gathered other supplies necessary for blood glucose</p>	F 441	<p><u>Systems Changes:</u>Policy revised to reflect specific instructions regarding individual and shared glucometer disinfecting.</p> <p>Revisions include:</p> <p>To disinfect "shared" glucometer:</p> <ol style="list-style-type: none"> <li>1)Arrange the supplies so they can be easily reached</li> <li>2)Use an approved disinfectant or germicide wipe</li> <li>3)Use wipe as directed by the manufacturer and follow the label instructions on the meter</li> <li>4)Use extreme care to not get the disinfectant liquid in the test strip port</li> <li>5)Clean the meter thoroughly with the wipe for several seconds, then wrap the glucometer in the wipe and leave for the number of minutes the manufacturer recommended</li> <li>6)The glucometer must remain "wet" with the solution to establish proper disinfecting of the glucometer</li> <li>7)Remove wipe and allow glucometer to dry then put away</li> <li>8)Wash and dry your hands thoroughly</li> </ol>	1/14/13

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F 441	<p>Continued From page 2</p> <p>monitoring on a resident. In less than 2 minutes of wiping down the glucometer it was dry and Nurse #2 collected a finger stick blood sample for blood glucose monitoring from Resident #56. Upon completion of blood glucose monitoring, Nurse #2 removed her gloves and washed her hands, returned to the medication cart, wiped the glucometer with a new germicidal wipe and placed the glucometer back into its plastic cup. Nurse #2 removed the second glucometer from the other plastic cup, wiped it with a germicidal wipe and gathered other supplies necessary for blood glucose monitoring on another resident. In less than 2 minutes of wiping down the glucometer it was dry and Nurse #2 collected a finger stick blood sample for blood glucose monitoring from Resident #70. Upon completion of blood glucose monitoring, Nurse #2 removed her gloves and washed her hands, returned to the medication cart, wiped the glucometer with a new germicidal wipe and placed the glucometer back into its plastic cup.</p> <p>On 01/08/13 at 4:06 PM, Nurse #2 was observed removing a glucometer from a plastic cup, wiping it with a germicidal wipe and gathering other supplies necessary for blood glucose monitoring on another resident. In less than 2 minutes of wiping down the glucometer it was dry and Nurse #2 collected a finger stick blood sample for blood glucose monitoring from Resident #78. Upon completion of blood glucose monitoring, Nurse #2 removed her gloves and washed her hands, returned to the medication cart, wiped the glucometer with a new germicidal wipe and placed the glucometer back into its plastic cup.</p> <p>On 01/08/13 at 4:30 PM Nurse #2 was</p>	F 441	<p>If the glucometer is the individual residents:</p> <p>1)The glucometer will be cleaned as needed or when visibly soiled.</p> <p>SDC provided education to all nurses regarding care and placement of individual glucometer and use of shared glucometer when necessary.</p> <p><u>Monitoring:</u> An audit tool was developed to monitor appropriate procedure of disinfecting glucometers. SDC, or designee, will conduct an audit that will include 5 nurses per week to complete return demonstration of disinfecting meters and will be conducted for 4 weeks. Audit initiated week of 1/28/13.</p> <p>Ongoing audits will be determined based on results of prior audits. Audit tool will be reviewed during routine QA meeting.</p>	<p>1/21/13</p> <p>1/14/13</p>	

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F 441	<p>Continued From page 3</p> <p>interviewed. Nurse #2 stated facility policy required having 2 glucometers available on the medication cart so while one was air drying after wiping with a germicidal wipe, the other glucometer could be used without delay for resident blood glucose monitoring. Nurse #2 stated that after wiping a glucometer a minimum of 2 minutes was required for air drying. Asked to read the manufacturer's instructions on the pre-packaged, single use germicidal wipe, Nurse #2 stated surfaces were to remain wet for 2 minutes. Nurse #2 demonstrated disinfection by removing a germicidal wipe from the package, wiping all surfaces of a glucometer wet and placing it in a clear plastic cup. At the 2 minute mark, Nurse #2 stated that only a small dime sized area on the glucometer remained wet.</p> <p>On 01/09/13 at 10:30 AM a representative from the manufacturer of the germicidal wipe was interviewed by telephone. The representative stated disinfection with the germicidal wipe required the glucometer to remain wet with germicidal solution for a minimum of 2 minutes.</p> <p>On 01/10/13 at 9:34 AM the Staff Development Coordinator (SDC) was interviewed. She stated she was responsible for Infection Control monitoring in this facility. The SDC stated nurses were instructed to clean glucometers after each use. She added 2 glucometers were provided on each medication cart so while one was drying after cleaning the other may be used for resident blood glucose monitoring. She further stated after the glucometer was wiped it was left to air dry for 2 minutes before use. The SDC was unaware the glucometer had to remain wet for 2 minutes to accomplish disinfection.</p>	F 441		
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F 441	<p>Continued From page 4</p> <p>Continued interview with the SDC on 01/10/13 at 3:05 PM revealed the facilities' present method of cleaning glucometers did not allow the glucometer to remain wet with disinfectant for 2 minutes.</p> <p>2. A facility policy entitled Cleaning and Disinfection of Medical Equipment dated 03/20/10 specified the effectiveness of the disinfection process depended, in part, on the exposure time to the germicide.</p> <p>A review of the Instructions provided by the manufacturer of the germicidal disposable wipe utilized by the facility was conducted. The directions specified to accomplish disinfection of a hard surface, unfold a wipe and thoroughly wet the surface. Treated surface must remain visibly wet for a full 2 minutes. Use additional wipe(s) if needed to assure continuous 2 minute wet contact time. Let air dry.</p> <p>An observation was conducted on 01/08/13 at 3:38 PM of Nurse #1 obtaining finger stick blood sugar (FSBS) readings. Nurse #1 was observed entering Resident #38's room and following proper procedure for obtaining a FSBS reading. Upon completion, Nurse #1 returned to the medication cart. She wiped the glucose meter (glucometer) with a germicidal wipe, tossed the wipe into the trash bin, and left the glucometer sitting on the medication cart. She did not ensure</p>	F 441		
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F 441	<p>Continued From page 5</p> <p>the glucometer remained wet with germicidal solution for a full 2 minutes. Nurse #1 removed another glucometer from a medication cart drawer and proceeded to Resident #108's room. She obtained a FSBS from this resident and returned the glucometer to the medication cart. Nurse #1 followed the same procedure of wiping the glucometer with a germicidal wipe, tossing the wipe into the trash bin, and leaving the glucometer on the medication cart. She did not ensure the glucometer remained wet with germicidal solution for a full 2 minutes. Nurse #1 picked up the first glucometer that had been drying on the medication cart and proceeded to Resident #9's room to obtain a FSBS. Afterwards, she returned to the medication cart and followed the procedure as described and did not ensure the glucometer remained wet with germicidal solution for a full 2 minutes.</p> <p>An interview with Nurse #1 on 01/08/13 at 3:53 PM revealed it was facility procedure to have 2 glucometers on each medication cart. She explained after utilizing a glucometer, it was wiped down with a germicidal wipe. She stated the glucometer was allowed to dry for 2 minutes or more before it was utilized again. Nurse #1 was unaware of ensuring the glucometer remained wet with germicidal solution for 2 minutes to complete the disinfecting process.</p> <p>On 01/09/13 at 10:30 AM a representative from the manufacturer of the germicidal wipe was interviewed by telephone. The representative stated disinfection with the germicidal wipe required the glucometer to remain wet with germicidal solution for a minimum of 2 minutes.</p>	F 441		
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F 441	<p>Continued From page 6</p> <p>On 01/10/13 at 9:34 AM the Staff Development Coordinator (SDC) was interviewed. She stated she was responsible for Infection Control monitoring in this facility. The SDC stated nurses were instructed to clean glucometers after each use. She added two glucometers were provided on each medication cart so while one was drying after cleaning the other may be used for resident blood glucose monitoring. She further stated after the glucometer was wiped it was left to air dry for 2 minutes before use. The SDC was unaware the glucometer had to remain wet for 2 minutes to accomplish disinfection.</p> <p>Continued interview with the SDC on 01/10/13 revealed the facilities' present method of cleaning glucometers did not allow the glucometer to remain wet with the germicidal disinfectant for 2 minutes.</p> <p>3. A facility policy entitled Cleaning and Disinfection of Medical Equipment dated 03/2010 specified the effectiveness of the disinfection process depended, in part, on the exposure time to the germicide.</p> <p>A review of the Instructions provided by the manufacturer of the germicidal disposable wipe utilized by the facility was conducted. The directions specified to accomplish disinfection of a hard surface, unfold a wipe and thoroughly wet the surface. Treated surface must remain visibly wet for a full 2 minutes. Use additional wipe(s) if needed to assure continuous 2 minute wet contact time. Let air dry.</p> <p>An observation was conducted on 01/09/13 at</p>	F 441		
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F 441	<p>Continued From page 7</p> <p>11:09 AM with Nurse #4 obtaining finger stick blood sugar (FSBS) readings. Nurse #4 was observed entering Resident #153's room and following proper procedure for obtaining a FSBS reading. Upon completion, Nurse #4 returned to the medication cart. She wiped the glucose meter (glucometer) with a germicidal wipe, tossed the wipe into the trash bin, and left the glucometer sitting on a paper towel on the medication cart. Nurse #4 did not ensure the glucometer remained wet with germicidal solution for a full 2 minutes. An interview at this time with Nurse #4 revealed it was her understanding the glucometer had to be wet with the germicidal solution and left to air dry for 2 minutes.</p> <p>On 01/09/13 at 10:30 AM a representative from the manufacturer of the germicidal wipe was interviewed by telephone. The representative stated disinfection with the germicidal wipe required the glucometer to remain wet with germicidal solution for a minimum of 2 minutes.</p> <p>On 01/10/13 at 9:34 AM the Staff Development Coordinator (SDC) was interviewed. She stated she was responsible for Infection Control monitoring in this facility. The SDC stated nurses were instructed to clean glucometers after each use. She added two glucometers were provided on each medication cart so while one was drying after cleaning the other may be used for resident blood glucose monitoring. She further stated after the glucometer was wiped it was left to air dry for 2 minutes before use. The SDC was unaware the glucometer had to remain wet for 2 minutes to accomplish disinfection.</p> <p>Continued interview with the SDC on 01/10/13</p>	F 441		
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F 441	Continued From page 8 revealed the facilities' present method of cleaning glucometers did not allow the glucometer to remain wet with the germicidal disinfectant for 2 minutes.	F 441			