

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

PRINTED: 05/15/2013  
FORM APPROVED  
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  345322	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____  B. WING _____	(X3) DATE SURVEY COMPLETED  05/02/2013
NAME OF PROVIDER OR SUPPLIER  THE LAURELS OF HENDERSONVILLE			STREET ADDRESS, CITY, STATE, ZIP CODE 290 CLEAR CREEK ROAD HENDERSONVILLE, NC 28792	
(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) COMPLETION DATE
F 309 SS=D	<p>483.25 PROVIDE CARE/SERVICES FOR HIGHEST WELL BEING</p> <p>Each resident must receive and the facility must provide the necessary care and services to attain or maintain the highest practicable physical, mental, and psychosocial well-being, in accordance with the comprehensive assessment and plan of care.</p> <p>This REQUIREMENT is not met as evidenced by: Based on medical record review and staff interviews the facility failed to follow physician orders concerning the administration of Levaquin (an antibiotic) for 1 of 10 sampled residents reviewed for unnecessary medications. (Resident #176).</p> <p>The findings included:</p> <p>Resident # 176 was admitted to the facility on 04/19/13. Resident #176's diagnoses included pneumonia, congestive heart failure, hypoxia, anemia and hypertension.</p> <p>A review of Resident #176's medical record revealed admission physician orders dated 04/19/13. The admission orders included and specified to administer Levaquin 500 milligrams (mg) tablet by mouth daily for seven days for diagnosis of pneumonia. A review of the Medication Administration Record (MAR) revealed, the medication was scheduled at 9:00 AM every day.</p> <p>Further review of the MAR for the month of April</p>	F 309	<p>The Laurels of Hendersonville wishes to have this submitted plan of correction stand as its allegation of compliance. Our date of alleged compliance is 05/25/2013.</p> <p>Preparation and/or execution of this plan of correction does not constitute admission or agreement by the provider of the truth of the facts alleged or conclusions set forth in the statement of deficiencies. The plan of correction is prepared and/or executed solely because it is required by the provisions of Federal and State law.</p> <p>F 309</p> <p>1. Resident #176's physician was notified of the omission. No negative outcome resulted.</p> <p>2. The Medication Administration Records for all other residents with physician orders for antibiotic medication were reviewed to ensure the identified residents received their medications as ordered. No other variances were identified.</p> <p>The identified nurse was provided additional education relating to medication administration and documentation of administration.</p>	

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

TITLE

(X6) DATE

*[Signature]*

Administrator

5-23-13

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 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.



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F 309	<p>Continued From page 1</p> <p>2013 reflected, the initials of the nurse administering the antibiotic for five days instead of seven days, from 04/22/13 thru 04/26/13.</p> <p>An interview was conducted with the Unit Manager (UM) at 11:16 AM on 05/01/13. He stated all new admission orders were reviewed by the admitting nurse. Then the nurse would fax and/or notify the provider Pharmacy for any same day, same night, or immediate medications. If the medications were not available, the 24 hours on call pharmacist would make arrangements with the backup pharmacy for the needed medication. The UM also stated that the facility's emergency medication supply was accessible by all the nurses. During this interview the emergency medication supply summary reflected an inventory of twelve Levaquin 250 mg tablets in stock and none had been recorded to have been removed for Resident #176 since the admission date.</p> <p>The nurse who had not administered the dose was not available for interview.</p> <p>An interview was conducted with the Director of Nursing (DON) at 2:00 PM on 05/01/2013. The DON stated that a pharmacist was on call 24 hours and any medication un-available could be delivered timely. The DON stated her expectation was if a medication was administered the nurse's initials should be on the MAR and if there was no initials, the medication was not administered and there should have been an explanation for lack of administration. The DON was unable to provide any other proof that Resident #176 received seven ordered doses of Levaquin.</p>	F 309	<p>3. All licensed nursing staff will be in-serviced regarding the policy on documentation and administration of antibiotic medication by the Staff Development Coordinator or designee.</p> <p>4. A monitoring tool for antibiotic medications will be completed for all guests with physician orders for antibiotics. The monitoring tool will be completed (3) three times a week x (2) two weeks then weekly x 4 weeks, then monthly until resolved by the QA Committee. Monitoring results will be reported to the DON weekly times (6) six weeks and concerns will be reported to the quality assurance committee during the monthly meeting.</p> <p>Continued compliance will be monitored through review of new orders during the morning clinical meeting, record reviews and through the facility's quality assurance program. Additional education and monitoring will be initiated for any identified concerns.</p>	05/25/2013	