

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

PRINTED: 09/21/2015
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 345429	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED C 08/28/2015
NAME OF PROVIDER OR SUPPLIER PEAK RESOURCES - PINELAKE			STREET ADDRESS, CITY, STATE, ZIP CODE 801 PINEHURST AVENUE CARTHAGE, NC 28327		
(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 000	INITIAL COMMENTS	F 000			
F 431 SS=D	<p>No deficiencies were cited as a result of the compliant survey Event ID MRP011. Intakes NC000108175, NC000108282, NC000109267.</p> <p>483.60(b), (d), (e) DRUG RECORDS, LABEL/STORE DRUGS & BIOLOGICALS</p> <p>The facility must employ or obtain the services of a licensed pharmacist who establishes a system of records of receipt and disposition of all controlled drugs in sufficient detail to enable an accurate reconciliation; and determines that drug records are in order and that an account of all controlled drugs is maintained and periodically reconciled.</p> <p>Drugs and biologicals used in the facility must be labeled in accordance with currently accepted professional principles, and include the appropriate accessory and cautionary instructions, and the expiration date when applicable.</p> <p>In accordance with State and Federal laws, the facility must store all drugs and biologicals in locked compartments under proper temperature controls, and permit only authorized personnel to have access to the keys.</p> <p>The facility must provide separately locked, permanently affixed compartments for storage of controlled drugs listed in Schedule II of the Comprehensive Drug Abuse Prevention and Control Act of 1976 and other drugs subject to abuse, except when the facility uses single unit package drug distribution systems in which the quantity stored is minimal and a missing dose can be readily detected.</p>	F 431		9/15/15	

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

TITLE

(X6) DATE

Electronically Signed

09/11/2015

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 431	Continued From page 1 This REQUIREMENT is not met as evidenced by: Based on observations and staff interviews the facility failed to discard medications with no expiration date, in 3 of 4 medication carts (the 100 hall cart, the 200 hall cart, and the front 300 hall cart) examined for medication storage. The findings included: #1. On 8/26/2015 at 9:03 AM, the stock drugs in the medication cart, called the 200 hall cart, were inspected. The top drawer contained 5 tablet of Omeprazole DR 20 milligrams (mg), in a peel pack, with no expiration date visible. On 8/26/2015 at 9:07 AM, an interview was conducted with the nurse (nurse #1), who stated the carts were supposed to be checked nightly by the 3rd shift nurse, or at least once per week minimum. She indicated the pharmacist checked the carts once per month. She stated she disposed of expired medications when she saw them. On 8/27/2015 at 2:11 PM, an interview was conducted with the Director of Nursing (DON). The DON stated she expected nurses to check the expiration date before medications were given, and not to give the medication if no expiration date could be found. #2. On 8/26/2015 at 10:04 AM, the stock drugs in the medication cart, called the front 300 hall cart, were inspected. The top drawer contained 5 tablets of Omeprazole DR 20mg and 4 tablets of cetirizine HCL 10mg, in peel packs with no expiration date visible. An interview was conducted with the nurse (nurse #2) on 8/26/2015 at 10:14 AM. The nurse stated	F 431	PEAKRESOURCES -PINELAKE POC-AUGUST 2015 F431 Disclaimer: Peak Resources acknowledges receipt of the statement of deficiencies and proposes this plan of correction to the extent that the summary of findings is factually correct and in order to maintain compliance with applicable rules and provisions, the Plan of Correction is submitted as a written allegation of compliance. Preparation and submission of this plan of correction is in response to the 2567 from the August 25 & 28, 2015 recertification survey. Peak Resources response to the statement of deficiencies and plan does not denote agreement with the deficiency nor does it constitute an admission that the deficiency is accurate. Further, Peak Resources Pinelake reserves the right to refute any deficiency through informal dispute resolution, formal appeal, and/or other administrative or legal procedures. 1. No residents were found to have received medication without an expiration date. 2. Those with potential: A) All medication carts were audited for medications without expiration dates. B) All medications without expiration dates		

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F 431	<p>Continued From page 2</p> <p>the expiration date had been torn off and she would have to throw them away. She indicated the night shift nurse checked the carts, and she checked the medication before it was given. On 8/27/2015 at 2:11 PM, an interview was conducted with the Director of Nursing (DON). The DON stated she expected nurses to check the expiration date before medications were given, and not to give the medication if no expiration date could be found.</p> <p>#3. On 8/26/2015 at 4:21 PM, the stock drugs in the medication cart, called the 100 hall cart, were inspected. The top drawer contained 18 tablets of Omeprazole DR 20mg, and 9 tables of Cetirizine HCl 10mg, in peel packs with no expiration date visible.</p> <p>An interview was conducted with the nurse (nurse #3), on 8/26/2015 at 4:28 PM. The nurse stated she looked at the date every time she gave a medication, and disposed of the medication if no expiration date could be found.</p> <p>On 8/27/2015 at 2:11 PM, an interview was conducted with the Director of Nursing (DON). The DON stated she expected nurses to check the expiration date before medications were given, and not to give the medication if no expiration date could be found.</p>	F 431	<p>were discarded on 8/26/2015.</p> <p>3. Systemic changes:</p> <p>A) Developed a lesson plan regarding medications with no expiration dates.</p> <p>B) All medication carts and medication storage areas were audited for medications without visible expiration dates.</p> <p>C) In-service education was provided to all nursing staff by the SDC to keep medication in original packaging with expiration date visible, those staff who are on LOA or otherwise not available will receive the in-service education prior to returning to an assignment.</p> <p>4. Monitoring:</p> <p>A) The DON developed a monitoring tool to assess whether medication carts had any medications without expiration dates.</p> <p>B) All medication carts will be audited weekly for 8 weeks, then every 2 weeks for 1 month, then monthly for 3 months. Continued audits will be performed based on the prior 6 months of auditing, these audits will be done by Administrative nurses/Charge Nurses.</p> <p>5. QA:</p> <p>A) Results of these audits will be reviewed monthly at the QAPI meeting for no less</p>		

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F 431	Continued From page 3	F 431	than 6 months.		