STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	345383	A. BUILDING _____ B. WING _____	C 10/24/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
SCOTTISH PINES REHABILITATION AND NURSING CENTER	620 JOHNS ROAD LAURINBURG, NC 28352

(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
E 000	Initial Comments An unannounced recertification and complaint investigation survey was conducted on 10/21/24 through 10/24/24. The facility was found in compliance with the requirement CFR 483.73, Emergency Preparedness. Event ID # 1HP411.	E 000		
F 000	INITIAL COMMENTS A recertification and complaint investigation survey was conducted from 10/21/24 through 10/24/24. Event ID# 1HP411. The following intakes were investigated: NC00211384, NC00208923, NC00221475, NC00215421, and NC00221716. 10 of the 10 complaint allegations did not result in deficiency.	F 000		
F 757 SS=E	Drug Regimen is Free from Unnecessary Drugs CFR(s): 483.45(d)(1)-(6) §483.45(d) Unnecessary Drugs-General. Each resident's drug regimen must be free from unnecessary drugs. An unnecessary drug is any drug when used- §483.45(d)(1) In excessive dose (including duplicate drug therapy); or §483.45(d)(2) For excessive duration; or §483.45(d)(3) Without adequate monitoring; or §483.45(d)(4) Without adequate indications for its use; or §483.45(d)(5) In the presence of adverse consequences which indicate the dose should be reduced or discontinued; or	F 757		11/8/24

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE | (X6) DATE

Electronically Signed | 11/08/2024

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F 757	Continued From page 1 §483.45(d)(6) Any combinations of the reasons stated in paragraphs (d)(1) through (5) of this section. This REQUIREMENT is not met as evidenced by: Based on record review, staff, the Medical Director, and the Consultant Pharmacist interviews the facility failed to hold two antihypertensive medications (Amlodipine Besylate and Carvedilol) that included parameters to hold the medication if the systolic blood pressure was less than 120 mm/hg (millimeters of mercury). This resulted in a resident receiving 5 additional doses of Amlodipine Besylate 5 milligram (mg) tablets and 4 additional doses of Carvedilol 6.25 milligram tablets. There was no outcome from receiving the medications. This occurred for 1 of 5 residents (Resident #99) reviewed for medication administration. Findings included. Resident #99 was admitted to the facility on 07/29/24 with diagnoses that included Hypertension. The Minimum Data Set (MDS) admission assessment dated 08/04/24 revealed Resident #99 had mildly impaired cognition. He received limited assistance with activities of daily living (ADLs.). He had no rejection of care. A physicians order dated 09/11/24 for Resident #99 revealed Amlodipine Besylate 5 milligram (mg) tablets. Give 1 tablet orally one time a day related to Essential hypertension. Hold for systolic blood pressure less than 120 mm/hg (millimeters of mercury).	F 757	F757 Scottish Pines Rehabilitation and Nursing acknowledges receipt of the Statement of Deficiency and proposes the plan of correction to the extent that the summary of findings is factually correct and to maintain compliance with applicable rules and the provision of quality care to residents. Address how corrective action will be accomplished for those residents found to have been affected by the deficient practice. 1) On 10/23/2024, medication aide #1 who administered the following medications that were to be held due to blood pressure parameters: Amlodipine Besylate 5 milligram (mg) tablets were administered on: 10/2/24,10/3/24, 10/4/24, 10/7/24 and 10/16/24 and Carvedilol 6.25 milligram tablets were administered on 10/2/24, 10/3/24, 10/7/24 and 10/16/24 was re-in-serviced by the facility director of nursing services and medication error report was completed. There were no negative outcomes as a result of the administration of the medications. 2) On 10/23/2024, the facility charge nurse notified the physician and an order	

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F 757	Continued From page 2 Review of the Medication Administration Record (MAR) for Resident #99 dated October 2024 revealed Amlodipine Besylate 5 milligram (mg) tablets were administered on the following dates/times: 10/02/24 at 9:00 AM. The recorded blood pressure at 9:00 AM was 118/62 (systolic/diastolic). 10/03/24 at 9:00 AM. The recorded blood pressure at 9:00 AM was 112/62. 10/04/24 at 9:00 AM. The recorded blood pressure at 9:00 AM was 103/52. 10/07/24 at 9:00 AM. The recorded blood pressure at 9:00 AM was 114/60. 10/16/24 at 9:00 AM. The recorded blood pressure at 9:00 AM was 118/62. A physicians order dated 09/11/24 for Resident #99 revealed Carvedilol 6.25 milligram tablets. Give 1 tablet by mouth two times a day related to Essential hypertension. Hold for systolic blood pressure less than 120 mm/hg (millimeters of mercury). Review of the Medication Administration Record (MAR) for Resident #99 dated October 2024 revealed Carvedilol 6.25 milligram tablets were administered on the following dates/times: 10/02/24 at 9:00 AM. The recorded blood pressure at 9:00 AM was 118/62 (systolic/diastolic). 10/03/24 at 9:00 AM. The recorded blood pressure at 9:00 AM was 112/62. 10/07/24 at 9:00 AM. The recorded blood	F 757	was received to discontinue parameter orders for Amlodipine Besylate and Carvedilol and physician determined that parameters were no longer needed. Address how the facility will identify other residents having the potential to be affected by the same deficient practice. 1) On 10/24/2024, the facility director of nursing and clinical care coordinator audited 100% of the medication administration records for all other residents with orders that contain parameters for blood pressure to validate that parameter orders were followed. No negative findings were identified. 2) The facility director of nursing provided all facility licensed nurses and medication aides with re-education regarding documentation of blood pressure medication with parameters. Staff provided with re-education that when a blood pressure falls outside of the administered parameter range, the nurse/medication aide will hold the medication and document the blood pressure appropriately. 3) All facility active staff not in-serviced by 11/8/2024, will receive re-education prior to their next scheduled shift; and all facility newly hired licensed nurses and medication aides will be provided with re-education regarding blood pressure medication with parameters upon hire during new hire education by the facility director of nursing or designee (11/8/2024 and thereafter).	

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F 757	Continued From page 3	F 757		

pressure at 9:00 AM was 114/60.
10/16/24 at 9:00 AM. The recorded blood pressure at 9:00 AM was 118/62.

Review of the progress notes for Resident #99 from 09/11/24 through 10/16/24 revealed no documentation that the Amlodipine Besylate 5 milligram (mg) tablets or the Carvedilol 6.25 milligram tablets were held.

An interview was conducted on 10/23/24 at 3:00 PM with Medication Aide #1 who signed off on the Amlodipine Besylate 5 milligram (mg) tablets and the Carvedilol 6.25 milligram tablets on 10/02, 10/03, 10/04, 10/07, and 10/16/24. She stated if the medications were checked off on the Medication Administration Record (MAR) as administered then she did give the medications. She stated she didn't realize the Amlodipine had hold parameters but knew the Carvedilol did have hold parameters. She stated the medications were administered in error.

During an interview on 10/23/24 at 03:41 PM the Medical Director stated Resident #99 was on long term antihypertensive medications. He stated if Resident #99 was administered the medications with the systolic blood pressure less than 120 mm/hg then it would have no effect on this resident due to chronic use. He indicated staff should follow the medication orders and administer medications according to the physician orders.

During an interview on 10/24/24 at 3:00 PM the Consultant Pharmacist stated there would be no harm in Resident #99 receiving the antihypertensive medications due to long term

Address what measures will be put into place or systemic changes made to ensure that the deficient practice will not recur.

1) Any residents with physicians' orders that contain parameters will be reviewed daily in the morning clinical meeting to ensure compliance with physicians' orders and monitor accurate documentation. This will be completed by the facility director of nursing or designee. Findings and follow-up actions will be documented on the "Morning Clinical Meeting" form.
Indicate how the facility plans to monitor its performance to make sure that solutions are sustained; and
3) Beginning 11/1/2024, weekly audits will be conducted by the facility director of nursing and/or designee of all residents with blood pressure parameter orders will be conducted weekly x four (4) weeks and then monthly x two (2) months to validate parameter orders are followed. Findings will be documented on the designated "Blood Pressure Parameter Audit" tool by the facility director of nursing or designee. Findings with be corrected immediately and audit tools will be brought to the facility executive director weekly for review.
4) Results of the audit will be taken to the monthly quality assurance meeting x three (3) and the quarterly x three (3) thereafter. The quality assurance committee will make recommendations and changes to the said plan as deemed necessary.

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F 757	Continued From page 4 use. She stated it would be more concerning if he had consistently low pulse rate, but his pulse rate consistently remained 60-80 beats per minute. She indicated staff should be following the physician orders and administering medications as ordered and holding medications according to the order. During an interview on 10/24/24 at 3:29 PM the Director of Nursing (DON) stated Medication Aide #1 should have followed the physicians order and held both antihypertensive medications according to the parameters. She stated education would be provided.	F 757	The facility alleges compliance as of 11/8/2024.	