STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	FCL061008	A. BUILDING: _____ B. WING _____	R 02/03/2016

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
B & L FAMILY CARE HOME	842 CANE CREEK ROAD BAKERSVILLE, NC 28705

(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) COMPLETE DATE
{C 000}	Initial Comments The Adult Care Licensure Section and the Mitchell County Department of Social Services conducted a follow-up survey on February 03, 2016.	{C 000}		
{C 375}	10A NCAC 13G .1009(a)(1) Pharmaceutical Care 10A NCAC 13G .1009 Pharmaceutical Care (a) The facility shall obtain the services of a licensed pharmacist, prescribing practitioner or registered nurse for the provision of pharmaceutical care at least quarterly for residents or more frequently as determined by the Department, based on the documentation of significant medication problems identified during monitoring visits or other investigations in which the safety of the residents may be at risk. Pharmaceutical care involves the identification, prevention and resolution of medication related problems which includes at least the following: (1) an on-site medication review for each resident which includes at least the following: (A) the review of information in the resident's record such as diagnoses, history and physical, discharge summary, vital signs, physician's orders, progress notes, laboratory values and medication administration records, including current medication administration records, to determine that medications are administered as prescribed and ensure that any undesired side effects, potential and actual medication reactions or interactions, and medication errors are identified and reported to the appropriate prescribing practitioner; and, (B) making recommendations for change, if necessary, based on desired medication outcomes and ensuring that the appropriate prescribing practitioner is so informed; and, (C) documenting the results of the medication	{C 375}		

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{C 375}	Continued From page 1 review in the resident's record; This Rule is not met as evidenced by: Based on record reviews and interviews, the facility failed to assure drug regimen reviews were completed at least quarterly for 4 of 4 residents.(Resident #1, #2, #3, and #4). The findings are: A. Review of Resident #1's current FL2 dated 03/15/15 revealed: -Diagnoses included depression and rhinitis. -Orders for 9 routine oral medications that included: Citalopram (for depression), Levothyroxine (thyroid product), and Loratadine (for allergies). Review of the resident register revealed Resident #1 was admitted to the facility on 12/29/11. Review of Resident #1's record revealed the most recent drug regimen review was dated 01/24/15 (completed by a Registered Nurse) with no recommendations. Record review revealed Resident #1 had seen the Primary Care Provider (PCP) on 12/09/15 and medications had been reviewed with no changes. Observations on 02/03/16 at 10:15am revealed Resident #1's medications were available and matched the MAR. Refer to interview with facility Administrator on 02/03/16 at 10:30am. B. Review of Resident #2's current FL2 dated 11/23/15 revealed:	{C 375}		

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{C 375}	Continued From page 2 -Diagnoses included diabetes, high blood pressure, hyperlipidemia, and mental retardation. -Orders for 4 routine oral medications that included: Metformin (for diabetes), Simvastin (for high cholesterol), Aspirin (for stroke prevention), and Lisinopril (for high blood pressure). Review of the resident register revealed Resident #2 was admitted to the facility on 11/09/13. Review of Resident #2's record revealed the most recent drug regimen review was dated 01/24/15 (completed by a Registered Nurse) with no recommendations. Record review revealed Resident #2 had been seen by the PCP on 01/26/16 and medications had been reviewed with no changes. Observations on 02/03/16 at 10:20am revealed Resident #2's medications were available and matched the MAR. Refer to interview with facility Administrator on 02/03/16 at 10:30am. C. Review of Resident #3's current FL2 dated 11/17/15 revealed: -Diagnoses included bipolar disorder and traumatic brain injury. -Orders for 3 routine oral medications: Depakote (for bipolar), Citalopram (an antidepressant), and Zyprexa (an antipsychotic). Review of the resident register revealed Resident #3 was admitted to the facility on 03/05/11. Review of Resident #3's record revealed the most recent drug regimen review was dated 01/24/15 (completed by a Registered Nurse) with no	{C 375}		

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{C 375}	Continued From page 3 recommendations. Record review revealed Resident #3 had seen the PCP on 01/26/16 and medications had been reviewed with no changes. Observations on 02/03/16 at 10:00am revealed Resident #3's medications were available and matched the Medication Administration Record (MAR). Refer to interview with facility Administrator on 02/03/16 at 10:30am. D. Review of Resident #4's current FL2 dated 11/17/15 revealed: -Diagnoses included schizophrenia, rhinitis, obesity, depression and hyperlipidemia. -Orders for 6 routine oral medications that included: Geodon (an antipsychotic), Depakote (for behaviors), and Levothyroxine (thyroid product). Review of the resident register revealed Resident #4 was admitted to the facility on 07/16/08. Review of Resident #4's record revealed the most recent drug regimen review was dated 01/24/15 (completed by a Registered Nurse) with no recommendations. Record review revealed Resident #4 had seen the PCP on 10/01/15 and medications had been reviewed with no changes. Record review revealed Resident #4 had seen the Mental Health Provider on 01/07/16 and medications had been reviewed with no changes. Observations on 02/03/16 at 10:15am revealed	{C 375}		

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{C 375}	Continued From page 4 Resident #4's medications were available and matched the MAR. Refer to interview with facility Administrator on 02/03/16 at 10:30am. _____ Interview with the facility Administrator on 02/03/16 10:30am revealed: -She was aware quarterly drug reviews were required for all residents but thought because each resident saw their Primary Care Provider every 90 days and had their medications reviewed at that time, this would suffice for quarterly drug reviews. -She had hired a nurse to do the reviews but the nurse lived several counties away and had not been able to get up to the facility at this time to complete the drug reviews. -The local pharmacy provider would not perform onsite drug reviews because the Administrator would not agree to be responsible for any unpaid pharmacy bills.	{C 375}		