

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL045001	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED R-C 11/18/2016
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NAME OF PROVIDER OR SUPPLIER CARDINAL CARE CENTER-HENDERSONVILLE	STREET ADDRESS, CITY, STATE, ZIP CODE 1000 WEST ALLEN STREET HENDERSONVILLE, NC 28739
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(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
D 000	Initial Comments The Adult Care Licensure Section and the Henderson County Department of Social Services conducted an annual and follow-up survey on November 16-18, 2016.	D 000		
D 074	10A NCAC 13F .0306(a)(1) Housekeeping And Furnishings 10A NCAC 13F .0306 Housekeeping And Furnishings (a) Adult care homes shall: (1) have walls, ceilings, and floors or floor coverings kept clean and in good repair; This Rule is not met as evidenced by: Based on observations, interviews, and record review, the facility failed to have floor coverings kept clean in the common entrance area, living room, 100 hallway, 200 hallway, connecting hallway towards the 300 hallway, outside the main dining room, and in 2 of 2 common shower rooms. The findings are: Observations during the initial facility tour on 11/16/16 from 8:40am to 11:29am revealed: -The carpeting on the entire length of the 100 hallway was worn thin and had multiple areas of discolored gray areas of dirt. -The carpeting on the entire length of the 200 hallway was worn thin and had multiple areas of stain. -The carpeting in the main entrance area outside the business office, medication rooms, and activity room was worn thin, had multiple areas of stain, and had multiple discolored gray areas of dirt.	D 074	Submission of this response and Plan of Corrections is not a legal admission that the deficiency was correctly cited. It is not to be construed as an admission of interest against the facility, the Administrator, Director of Nursing or any employee, agent or other individuals who draft or may be discussed in the Plan of Correction. In addition, preparations and submission of this Plan of Correction does not constitute any admission or agreement by the facility of the truth of any facts alleged or correction of any conclusions set forth in this allegation by the survey agency. For the deficiencies cited during this survey, this facility has developed a Plan of Correction with the regulations. We would like you to accept this POC as our credible Allegation of compliance.	

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

TITLE

(X6) DATE

STATE FORM

6899

44B211

If continuation sheet 1 of 17

Chris Drake - Executive Director

12-27-2016

Reviewed and Accepted
Date: 1/3/17 *CS*



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D 074	Continued From page 1 -The carpeting in the facility living room was worn thin with multiple areas of gray dirt and stains, especially around the perimeter of the activity table and in front of the chairs positioned around the room. -The hallway leading to the main dining room was worn thin and was discolored gray due to dirt. -At the entrance to the main dining room the carpeting was heavily soiled with dirt and discolored brown. -On the right side of the line of chairs sitting on the outside entrance to the dining room, there was a 2 ft. long by 1 ft. wide brown stain on the carpeting beside one chair. -At the entrance to the kitchen door, the carpeting was heavily soiled with dirt and discolored gray. -The carpeting on the connecting hallway towards 300 hall where the smoke doors were located was heavily soiled with dirt. -The first common shower room on the left coming from the entrance towards the main dining room had a gray, sticky film on the white ceramic tiles of the bathroom floor. -The second common shower room on the left from the entrance towards the main dining room had a gray, sticky film on the white ceramic tiles of the bathroom floor. Interview with the resident residing in room #209 on 11/18/16 at 9:45am revealed she had no concerns related to physical environment or her room. Interview with the resident residing in room #306 on 11/18/16 at 9:52am revealed he had no concerns related to his room and that staff had just cleaned his floor. Review of the facility Sanitation Report dated 8/4/16 revealed:	D 074	D 074 We have 3 quotes received and sent to HUD to have the carpets on 100, 200, 300 as well as the common areas, hall to the dining room, business office and activity room replaced. We have placed a heavier emphasis on extracting existing carpets to eliminate spots, discoloration and odor until these are replaced. We have monthly scheduled pressure wash cleaning of the shower rooms. We will replace floor mats and we will have a professional company seal the tile.	12-19-16 11-21-16 12-06-2016

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D 074	Continued From page 3 -Pressure washing the common shower room floors was done monthly. -A couple years ago they had contracted a company to put a coating over the white tiled floors in the common shower room floors, and "its not holding up to the bleach we are using to clean it."	D 074		
D 273	10A NCAC 13F .0902(b) Health Care 10A NCAC 13F .0902 Health Care (b) The facility shall assure referral and follow-up to meet the routine and acute health care needs of residents. This Rule is not met as evidenced by: Based on observation, interviews, and record reviews, the facility failed to notify the physician of elevated fingerstick blood sugar (FSBS) readings for 1 of 5 sampled residents (Resident #1). The findings are: Review of Resident #1's current FL2 dated 3/31/16 revealed: -The resident's diagnoses included diabetes mellitus, liver cirrhosis, cognitive disorder, and hypertension. -An order for Levemir insulin (long acting medication used to control blood sugar) 35 units daily at bedtime. -An order for Levemir insulin 38 units daily in the morning. -An order for Humalog (a fast acting medication used to control blood sugar) 10 units with meals. Review of Resident #1's Nurse Practitioner's	D 273	Education was conducted 11-21-16 concerning using the new Telephone Verbal Order Form, correctly writing orders and transferring to the MAR correctly, reading the entire order BEFORE giving Medications. Education was begun 12-6-16 (individually) by the RN for Med Aides concerning notification to the physician for Blood Sugar results that Hover around 300 for more than 3 consecutive days. The RCC will review all orders within 48 hours of receipt of the order. The RN will monitor this by reviewing all new orders	11-21-16

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D 273	<p>Continued From page 4</p> <p>order dated 4/5/16 revealed FSBS three times a day.</p> <p>Review of Resident #1's Nurse Practitioner's order dated 5/8/16 revealed FSBS before meals and at bedtime.</p> <p>Review of Resident #1's Nurse Practitioner's order dated 5/17/16 revealed: -An order for Humalog insulin per sliding scale four times a day and to notify the physician for a FSBS greater than 450. -An order for Glipizide (medication used to control blood sugar) 5mg every morning.</p> <p>Review of Resident #1's Nurse Practitioner's order dated 8/16/16 revealed: -An order to increase Glipizide 10mg every day. -An order to increase Levemir 70 units every morning and 52 units at bedtime.</p> <p>Review of Resident #1's Endocrinologist's order dated 8/23/16 revealed: -The resident's Hemoglobin A1C (a blood test which indicates the average blood sugar for the past two to three months) was 10.2% (Target is 6.5% or less). -An order to test blood sugar four times per day (before breakfast, lunch, supper, and at bedtime.) There was no parameter as to when the physician would want to be notified of elevated FSBS. -An order for Levemir 60 units daily at breakfast. -An order for Novolog (a fast acting medication used to control blood sugar) 20 units daily at breakfast. -An order for Novolog 20 units daily at lunch. -An order for Novolog 16 units daily at supper. -An order for Novolog 10 units with snack. Limit 1 snack per day. Avoid concentrated/high sugar</p>	D 273	<p>during the three days she in on duty, (weekly) and insuring they have been correctly entered and followed by Med Aides. The RN will review all CBGs weekly. Re-education will occur if any error is detected. New MAs will receive this training upon hire.</p>	11-21-16

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D 273	Continued From page 5 food. -An order for Levemir 80 units daily at bedtime. -An order for Bydureon (medication used to improve blood sugar) 2mg injection weekly. -An order for Novolog insulin sliding scale before meals as follows: Under 70= 1/2 (scheduled premeal) Novolog dose 70-150=0 units 151-200=2 units 201-250=4 units 251-300=6 units 301-350=8 units 351-400=10 units >= 400, 12 units Review of Resident #1's Nurse Practitioner's order dated 11/2/16 revealed Novolog per sliding scale at meals and at bedtime. Observation of Staff D, Medication Aide (MA), during the noon medication pass on 11/17/16 from 11:28am to 11:35am revealed: -At 11:30am, Staff D correctly performed fingerstick blood sugar (FSBS) testing for Resident #1. -Resident #1's FSBS was 192. -At 11:35am, Staff D was observed to administer Novolog 22 units to Resident #1 in her left abdomen. Review of Resident #1's blood sugar readings for 8/24/16 to 8/31/16 revealed: -FSBS ranged from 209-486. -On 8/24/16 at 9pm, FSBS 486 -On 8/25/16 at 6:30am, FSBS 354 -On 8/27/16 at 11:30am, FSBS 372 -On 8/28/16 at 4:30pm, FSBS 388 -On 8/29/16 at 4:30pm, FSBS 347 -On 8/31/16 at 11:30am, FSBS 344	D 273		

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D 273	<p>Continued From page 8</p> <p>Review of Resident #1's blood sugar readings for September 2016 revealed: -FSBS ranged from 81-502. -On 9/1/16 at 11:30am, FSBS 420 -On 9/6/16 at 4:30pm, FSBS 348 -On 9/13/16 at 9pm, FSBS 502 -On 9/18/16 at 11:30am, FSBS 445 -On 9/22/16 at 11:30am, FSBS 433 -On 9/27/16 at 6:30am, FSBS 347</p> <p>Review of Resident #1's blood sugar readings for October 2016 revealed: -FSBS ranged from 72-385. -On 10/1/16 at 9pm, FSBS 359 -On 10/4/16 at 11:30am, FSBS 363 -On 10/15/16 at 11:30am, FSBS 346 -On 10/23/16 at 4:30pm, FSBS 317 -On 10/25/16 at 4:30pm, FSBS 385 -On 10/28/16 at 4:30pm, FSBS 316 -On 10/30/16 at 11:30am, FSBS 328</p> <p>Review of Resident #1's blood sugar readings for 11/1/16 to 11/15/16 revealed: -FSBS ranged from 127-499. -On 11/9/16 at 9pm, FSBS 319 -On 11/10/16 at 4:30pm, FSBS 327 -On 11/11/16 at 4:30pm, FSBS 499 -On 11/11/16 at 9pm, FSBS 450 -On 11/14/16 4:30pm, FSBS 362 -On 11/15/16 9pm, FSBS 364</p> <p>Interview with Resident #1 on 11/17/16 at 8:45am and 1:05pm revealed: - "My blood sugars are up and down." - "The Nurse Practitioner is here "once a week." - "She keeps adjusting my medicines."</p> <p>Review of Resident #1's Nurse Practitioner Progress Note dated 8/16/16 revealed: - Resident #1 was seen for elevated FSBS</p>	D 273		

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D 273	<p>Continued From page 7</p> <p>readings.</p> <ul style="list-style-type: none"> -Diabetes "uncontrolled" and "patient noncompliant with meals and snacks." -The resident's Levemir and oral medication dosages were increased. -The elevated blood sugars were "discussed" with Resident #1, but the resident "appears complacent." <p>Review of Resident #1's Nurse Practitioner Progress Note dated 8/30/16 revealed:</p> <ul style="list-style-type: none"> -Resident #1 was seen for "meds and medical problems." -The resident has a follow up with "endocrine, however remains noncompliant" with "daily restrictions." <p>Telephone interview with Resident #1's Endocrinologist office nurse on 11/18/16 at 9:10am revealed:</p> <ul style="list-style-type: none"> -The physician should have been notified concerning Resident #1 when blood sugar readings were in "pattern" in the "300" range and higher because the "meds need tweaking." -When staff noticed a pattern of elevated blood sugars, if the resident's appointment was "a few months away," the physician would want the resident to make an appointment and not wait to see him. -"They should have reached out to [Endocrinologist's name], so he could have made medication adjustments and contact the primary care provider." <p>Telephone interview with Resident #1's Nurse Practitioner on 11/18/16 at 9:25am revealed:</p> <ul style="list-style-type: none"> -Resident #1 was "non-compliant" with her diet. -"Her blood sugars are all over the place." -She had initiated the consultation with the Endocrinologist for Resident #1 for his 	D 273		

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D 273	<p>Continued From page 8</p> <p>suggestions as to how to better manage Resident #1's blood sugars.</p> <p>-She had given facility staff a verbal order on 11/2/16 to add Novolog insulin sliding scale daily at bedtime.</p> <p>Interview with Staff E, MA, on 11/18/16 at 9:55am revealed:</p> <p>-"I would tell the Supervisor if I take a blood sugar and it's greater than 450."</p> <p>-The Supervisor was responsible for notifying the resident's physician with elevated blood sugar results.</p> <p>-Staff E worked on 11/11/16 and when Resident #1's FSBS was 499 at 4:30pm, she asked the resident "What did you eat?" The resident replied "Oh, I ate a cake."</p> <p>-At the 9pm check, the resident's FSBS was 450.</p> <p>-"I gave her 12 units of sliding scale insulin both times" including her scheduled dose of pre-meal Novolog and scheduled 9pm dose of Levemir.</p> <p>-Staff E notified the Supervisor and "I wrote a note in the 24 hour notebook" (written notes about what has happened with residents throughout their shift).</p> <p>-Staff E did not know if the Supervisor had notified the physician of the elevated blood sugars.</p> <p>Interview with Staff A, Supervisor/MA, on 11/18/16 at 10:10am revealed:</p> <p>-She routinely worked first shift, but also worked second shift when needed.</p> <p>-If she checked a FSBS and it was greater than 400 she would give the ordered sliding scale insulin.</p> <p>-She would recheck the FSBS in 30 minutes.</p> <p>-If the FSBS was "going down" I would report it to the next shift, so they could continue to monitor the resident.</p>	D 273		

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D 273	Continued From page 9 -If the FSBS was "still high I would notify, the on call doctor for further instruction." Interview with the Resident Care Coordinator on 11/18/16 at 11:05am revealed: -The Endocrinologist's sliding scale orders dated 8/23/16 did not have a parameter on it as to when the physician wanted to be notified of elevated FSBS results. -"If there's not a parameter their staff probably wouldn't call the doctor." Interview with the Executive Director on 11/18/16 at 12:45pm revealed: -There was not a current parameter to guide staff in absence of a specific physician's order on when to notify the physician if a resident had an elevated FSBS. -Physicians often provided a parameter in their sliding scale orders for staff guidance. -"We will get the house physician to help develop a parameter for blood sugars."	D 273		
D 358	10A NCAC 13F .1004(a) Medication Administration 10A NCAC 13F .1004 Medication Administration (a) An adult care home shall assure that the preparation and administration of medications, prescription and non-prescription, and treatments by staff are in accordance with: (1) orders by a licensed prescribing practitioner which are maintained in the resident's record; and (2) rules in this Section and the facility's policies and procedures. This Rule is not met as evidenced by: This rule area is still out of compliance, see State 2567 at Event ID #95BJ11, dated February 20,	D 358	Education was conducted 11-21-16 concerning using the new Telephone Verbal Order Form, correctly writing orders and transferring to the MAR correctly, reading the entire order BEFORE giving Medications. Education was begun 12-6-16	11-21-16

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D 358	<p>Continued From page 10</p> <p>2015.</p> <p>TYPE B VIOLATION</p> <p>Based on observations, interviews, and record reviews, the facility failed to assure 1 of 5 sampled residents (Resident #1) was administered Novolog sliding scale insulin as ordered.</p> <p>The findings are:</p> <p>Review of Resident #1's current FL2 dated 3/31/16 revealed:</p> <ul style="list-style-type: none"> -The resident's diagnoses included diabetes mellitus, liver cirrhosis, cognitive disorder, and hypertension. -An order for Levemir insulin (long acting medication used to control blood sugar) 35 units daily at bedtime. -An order for Levemir insulin 38 units daily in the morning. -An order for Humalog (a fast acting medication used to control blood sugar) 10 units with meals. <p>Review of Resident #1's Nurse Practitioner's order dated 4/5/16 revealed finger stick blood sugar (FSBS) three times a day.</p> <p>Review of Resident #1's Nurse Practitioner's order dated 5/8/16 revealed FSBS before meals and at bedtime.</p> <p>Review of Resident #1's Nurse Practitioner's order dated 5/17/16 revealed:</p> <ul style="list-style-type: none"> -An order for Humalog insulin per sliding scale four times a day and to notify the physician for a FSBS greater than 450. -An order for Glipizide (medication used to control blood sugar) 5mg every morning. 	D 358	<p>(individually) by the RN for Med Aides concerning notification to the physician for Blood Sugar results that Hover around 300 for more than 3 consecutive days. The RCC will review all orders within 48 hours of receipt of the order. The RN will monitor this by reviewing all new orders during the three days she in on duty, (weekly) and insuring they have been correctly entered and followed by Med Aides. The RN will review all CBGs weekly. Re-education will occur if any error is detected. New MAs will receive this training upon hire.</p>	11-21-16

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D 358	<p>Continued From page 11</p> <p>Review of Resident #1's Nurse Practitioner's order dated 8/16/16 revealed: -An order to increase Glipizide 10mg every day. -An order to increase Levemir 70 units every morning and 52 units at bedtime.</p> <p>Review of Resident #1's Endocrinologist's order dated 8/23/16 revealed: -The resident's Hemoglobin A1C (a blood test which indicates the average blood sugar for the past two to three months) was 10.2% (Target is 6.5% or less). -An order to test blood sugar four times per day (before breakfast, lunch, supper, and at bedtime.) -An order for Levemir 60 units daily at breakfast. -An order for Novolog (a fast acting medication used to control blood sugar) 20 units daily at breakfast. -An order for Novolog 20 units daily at lunch. -An order for Novolog 16 units daily at supper. -An order for Novolog 10 units with snack. Limit 1 snack per day. Avoid concentrated/high sugar food. -An order for Levemir 60 units daily at bedtime. -An order for Bydureon (medication used to improve blood sugar) 2mg injection weekly. -An order for Novolog insulin sliding scale before meals as follows: Under 70=1/2 (scheduled premeal) Novolog dose 70-150=0 units 151-200=2 units 201-250=4 units 251-300=6 units 301-350=8 units 351-400=10 units >= 400, 12 units</p> <p>Review of Resident #1's Nurse Practitioner's order dated 11/2/16 revealed Novolog per sliding</p>	D 358		

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(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
D 358	<p>Continued From page 12</p> <p>scale at meals and at bedtime.</p> <p>Interview with Resident #1 on 11/17/16 at 8:46am and 1:05pm revealed: - "My blood sugars are up and down." - The Nurse Practitioner is here "once a week." - "She keeps adjusting my medicines."</p> <p>Observation of Staff D, Medication Aide (MA), during the noon medication pass on 11/17/16 from 11:28am to 11:35am revealed: - At 11:30am, Staff D correctly performed fingerstick blood sugar (FSBS) testing for Resident #1. - Resident #1's FSBS was 192. - At 11:35am, Staff D was observed to administer Novolog 22 units to Resident #1 in her left abdomen.</p> <p>Review of Resident #1's Medication Administration Record (MAR) and blood sugar readings for 8/24/16 to 8/31/16 revealed: - There was a handwritten entry for sliding scale on the MAR which coincided with the physician's orders. - FSBS range from 209-486. - Novolog insulin sliding scale was documented administered correctly for 28 out of 29 opportunities.</p> <p>Review of Resident #1's MAR and blood sugar readings for September 2016 revealed: - There was a handwritten entry for sliding scale on the MAR which coincided with the physician's orders. - FSBS range from 81-502. - Novolog insulin sliding scale was documented as administered correctly for 78 out of 95 opportunities.</p>	D 358		

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STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL045001	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED R-C 11/18/2016
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D 358	<p>Continued From page 13</p> <p>Review of Resident #1's MAR and blood sugar readings for October 2016 revealed: -There was a computer generated entry for sliding scale on the MAR which coincided with the physician's orders. -FSBS range from 72-385. -Novolog insulin sliding scale was documented as administered correctly for 64 out of 91 opportunities.</p> <p>Review of Resident #1's MAR and blood sugar readings for 11/1/16 to 11/15/16 revealed: -There was a computer generated entry for sliding scale on the MAR which coincided with the physician's orders. -FSBS range from 127-499. -Novolog insulin sliding scale was documented as administered correctly for 38 out of 57 opportunities.</p> <p>Telephone interview with Resident #1's Endocrinologist office nurse on 11/18/16 at 9:10am revealed: -Resident #1's Endocrinologist "usually" only wrote sliding scale insulin to be administered before meals. -When staff incorrectly administered Novolog insulin sliding scale at bedtime "it could raise her sugar or lower it. She would be getting a little too much insulin." -"On high basal doses of insulin we don't want to give her too much insulin." -The physician should have been notified concerning Resident #1's when blood sugar readings were in "pattern" in the "300" range and higher because the "meds need tweaking." -When staff noticed a pattern of elevated blood sugars, if the resident's appointment was "a few months away," the physician would want the resident to make an appointment and not wait to</p>	D 358		

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D 358	<p>Continued From page 14</p> <p>see him. -"They should have reached out to [Endocrinologist's name], so he could have made medication adjustments and contact the primary care provider."</p> <p>Telephone interview with Resident #1's Nurse Practitioner on 11/18/16 at 9:25am revealed: -Resident #1 was "non-compliant" with her diet. -"Her blood sugars are all over the place." -She had initiated the consultation with the Endocrinologist for Resident #1 for his suggestions as to how to better manage Resident #1's blood sugars. -She had given facility staff a verbal order on 11/2/16 to add Novolog insulin sliding scale daily at bedtime.</p> <p>Interview with Staff E, MA, on 11/18/16 at 9:55am revealed: -She routinely worked second shift and administered medications for Resident #1. -"I always thought I was supposed to give her the sliding scale at bedtime." -"At first, I wasn't sure because the way the order was written, but then I asked the Supervisors and they both said to give it."</p> <p>Interview with Staff A, Supervisor/MA, on 11/18/16 at 10:10am revealed: -She routinely worked first shift, but also worked second shift when needed. -She had questioned Resident #1's order from the Endocrinologist dated 8/23/16 when she had seen the order. -She had questioned other staff "If we are not doing sliding scale at bedtime then why are we doing a fingerstick blood sugar at bedtime?" -"Later we got clarification and we were supposed to give sliding scale insulin at bedtime."</p>	D 358		

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D 358	<p>Continued From page 15</p> <p>Interview with the Resident Care Coordinator on 11/18/16 at 8:15am revealed: -Resident #1's Novolog insulin sliding scale entry on the MAR for August, September, and October were correct. -Staff had incorrectly administered Novolog insulin sliding scale at bedtime for numerous occurrences before the clarification order had been obtained from the Nurse Practioner on 11/2/16.</p> <p>Interview with the Executive Director on 11/18/16 at 12:45pm revealed: -It was the policy of the facility to follow the physician's order for all medications administered in the facility. -"If those orders are unclear, they are without question to have a clarification from the physician." -"Our process here is to take care of these residents." -"We are to follow what the physicians tell us to do."</p> <p>_____</p> <p>A plan of protection was obtained on 11/18/16 as follows: -The Resident Care Coordinator or Shift Supervisor are to review doctor's orders within 48 hours of receipt of the order. -All medications will be administered as prescribed. -Mandatory Medication Aide training to be held Monday, November 21, at 7:30am to go over procedure for processing doctor's orders. -RN Nurse Consultant to be on staff a minimum of 3 days per week to review orders and speak to physician's as needed.</p>	D 358		

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D 358	Continued From page 16	D 358		
	CORRECTION DATE FOR THE TYPE B VIOLATION SHALL NOT EXCEED JANUARY 2, 2017.			
D912	G.S. 131D-21(2) Declaration of Residents' Rights G.S. 131D-21 Declaration of Residents' Rights Every resident shall have the following rights: 2. To receive care and services which are adequate, appropriate, and in compliance with relevant federal and state laws and rules and regulations. This Rule is not met as evidenced by: Based on observation, interview and record review, the facility failed to assure residents received care and services that are adequate, appropriate and in compliance with federal and state laws and rules and regulations related to medication administration. The findings are: Based on observations, interviews, and record reviews, the facility failed to assure 1 of 5 sampled residents (Resident #1) was administered Novolog sliding scale insulin as ordered. [Refer to Tag 0358, 10A NCAC 13F .1004(a) Medication Administration (Type B Violation)].	D912	Education was conducted 11-21-16 concerning using the new Telephone Verbal Order Form, correctly writing orders and transferring to the MAR correctly, reading the entire order BEFORE giving Medications. Education was begun 12-6-16 (individually) by the RN for Med Aides concerning notification to the physician for Blood Sugar results that Hover around 300 for more than 3 consecutive days. The RCC will review all orders within 48 hours of receipt of the order. The RN will monitor this by reviewing all new orders during the three days she in on duty, (weekly) and insuring they have been correctly entered and followed by Med Aides. The RN will review all CBGs weekly. Re-education will occur if any error is detected. New MAs will receive this training upon hire.	11-21-16