

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  HAL034035	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING: _____	(X3) DATE SURVEY COMPLETED  05/24/2017
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NAME OF PROVIDER OR SUPPLIER  BROOKDALE REYNOLDA ROAD	STREET ADDRESS, CITY, STATE, ZIP CODE 2980 REYNOLDA ROAD WINSTON SALEM, NC 27106
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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 conducted an annual survey on May 23-24, 2017.	D 000		
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: Based on observations, interviews, and record reviews, the facility failed to assure staff administered Humalog (Humalog is rapid-acting insulin used to lower elevated blood sugar levels) as ordered by a licensed prescribing practitioner for 1 of 3 sampled residents (#1).  The findings are:  Review of Resident #1's current FL-2 dated 11/17/16 revealed: -Diagnoses included orthostatic hypotension, dizziness and giddiness, other abnormalities of gait and mobility, other lack of coordination, and type II diabetes with other neurological complication.  Review of Resident #1's record revealed an order dated 12/01/16 for Humalog 8 units subcutaneously as needed for blood sugar greater than 250.	D 358		

Division of Health Service Regulation

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

TITLE

(X6) DATE

*Deborah Ramsey, Executive Director* 06-26-17

STATE FORM

6899

HYHF11

If continuation sheet 1 of 7

*Reviewed and accepted. AJS 7/3/17*

Division of Health Service Regulation

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NAME OF PROVIDER OR SUPPLIER  <b>BROOKDALE REYNOLDA ROAD</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>2980 REYNOLDA ROAD WINSTON SALEM, NC 27106</b>
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D 358	<p>Continued From page 1</p> <p>Review of Resident #1's March 2017 electronic Medication Administration Record (eMAR) revealed:</p> <ul style="list-style-type: none"> <li>-There was an entry for FSBS (fingerstick blood sugar) at 7:00 am and 5:00 pm.</li> <li>-There was an entry for Humalog insulin, inject 8 units as needed (prn) if blood sugar is greater than 250.</li> <li>-The resident's blood sugar ranged from 76-342 for March 2017.</li> <li>-There were 6 of 6 opportunities where Humalog 8 units should have been administered as follows:</li> <li>-On 03/12/17 at 5:00 pm FSBS result was 251. No documentation of administration of Humalog 8 units.</li> <li>-On 03/16/17 at 5:00 pm FSBS result was 256. No documentation of administration of Humalog 8 units.</li> <li>-On 03/18/17 at 5:00 pm FSBS result was 342. No documentation of administration of Humalog 8 units.</li> <li>-On 03/19/17 at 5:00 pm FSBS result was 264. No documentation of administration of Humalog 8 units.</li> <li>-On 03/20/17 at 5:00 pm FSBS result was 258. No documentation of administration of Humalog 8 units.</li> <li>-On 03/24/17 at 5:00 pm FSBS result was 260. No documentation of administration of Humalog 8 units.</li> </ul> <p>Review of Resident #1's April 2017 eMAR revealed:</p> <ul style="list-style-type: none"> <li>-There was an entry for FSBS (fingerstick blood sugar) at 7:00 am and 5:00 pm.</li> <li>-There was an entry for Humalog insulin, inject 8 units as needed if blood sugar is greater than 250.</li> <li>-The resident's blood sugar ranged from 107-371</li> </ul>	D 358		

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NAME OF PROVIDER OR SUPPLIER  <b>BROOKDALE REYNOLDA ROAD</b>		STREET ADDRESS, CITY, STATE, ZIP CODE <b>2980 REYNOLDA ROAD WINSTON SALEM, NC 27106</b>		
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D 358	Continued From page 2  for April 2017. -There were 14 of 15 opportunities where Humalog 8 units should have been administered as follows: -On 04/01/17 at 5:00 pm FSBS result was 268. No documentation of administration of Humalog 8 units. -On 04/04/17 at 5:00 pm FSBS result was 290. No documentation of administration of Humalog 8 units. -On 04/05/17 at 5:00 pm FSBS result was 268. No documentation of administration of Humalog 8 units. -On 04/06/17 at 5:00 pm FSBS result was 278. No documentation of administration of Humalog 8 units. -On 04/10/17 at 5:00 pm FSBS result was 262. No documentation of administration of Humalog 8 units. -On 04/11/17 at 5:00 pm FSBS result was 283. No documentation of administration of Humalog 8 units. -On 04/12/17 at 5:00 pm FSBS result was 292. No documentation of administration of Humalog 8 units. -On 04/13/17 at 5:00 pm FSBS result was 371. Documentation of administration of Humalog 8 units. -On 04/15/17 at 5:00 pm FSBS result was 325. No documentation of administration of Humalog 8 units. -On 04/17/17 at 5:00 pm FSBS result was 280. No documentation of administration of Humalog 8 units. -On 04/18/17 at 5:00 pm FSBS result was 257. No documentation of administration of Humalog 8 units. -On 04/20/17 at 5:00 pm FSBS result was 291. No documentation of administration of Humalog 8 units.	D 358		

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D 358	<p>Continued From page 3</p> <ul style="list-style-type: none"> <li>-On 04/24/17 at 5:00 pm FSBS result was 274. No documentation of administration of Humalog 8 units.</li> <li>-On 04/28/17 at 5:00 pm FSBS result was 280. No documentation of administration of Humalog 8 units.</li> <li>-On 04/29/17 at 5:00 pm FSBS result was 314. No documentation of administration of Humalog 8 units.</li> </ul> <p>Review of Resident #1's May 2017 eMAR revealed:</p> <ul style="list-style-type: none"> <li>-There was an entry for FSBS (fingerstick blood sugar) at 7:00 am and 5:00 pm.</li> <li>-There was an entry for Humalog insulin, inject 8 units as needed if blood sugar is greater than 250.</li> <li>-The resident's blood sugar ranged from 103-381 for May 2017.</li> <li>-There were 9 opportunities where Humalog 8 units should have been administered as follows:</li> <li>-On 05/01/17 at 5:00 pm FSBS result was 381. No documentation of administration of Humalog 8 units.</li> <li>-On 05/02/17 at 5:00 pm FSBS result was 257. No documentation of administration of Humalog 8 units.</li> <li>-On 05/07/17 at 5:00 pm FSBS result was 283. No documentation of administration of Humalog 8 units.</li> <li>-On 05/09/17 at 5:00 pm FSBS result was 294. No documentation of administration of Humalog 8 units.</li> <li>-On 05/13/17 at 5:00 pm FSBS result was 255. No documentation of administration of Humalog 8 units.</li> <li>-On 05/14/17 at 5:00 pm FSBS result was 253. No documentation of administration of Humalog 8 units.</li> <li>-On 05/18/17 at 5:00 pm FSBS result was 285.</li> </ul>	D 358		

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D 358	<p>Continued From page 4</p> <p>No documentation of administration of Humalog 8 units. -On 05/20/17 at 5:00 pm FSBS result was 285. No documentation of administration of Humalog 8 units. -On 05/22/17 at 5:00 pm FSBS result was 254. No documentation of administration of Humalog 8 units.</p> <p>Observation of medications on hand at 05/24/17 at 12:10 pm revealed Humalog was not available for administration.</p> <p>Interview with the first shift Medication Aide (MA) on 05/24/17 at 12:20 pm revealed: -She was not aware of the order for Humalog 8 units as needed for FSBS greater than 250. -The resident's FSBS had never been over 200 on first shift.</p> <p>Interview with the Health and Wellness Director (HWD) and Executive Director (ED) on 05/24/17 at 12:30 pm revealed: -The HWD and ED denied knowledge of the Humalog not being given as ordered. -The HWD and ED denied knowledge that the Humalog was not available for administration. -The HWD, ED, and MA's entered the medications into the eMAR system.</p> <p>Interview with the physician assistant (PA) on 05/24/17 at 12:50 pm revealed: -The PA was not aware Resident #1 had not been receiving the Humalog as needed for FSBS greater than 250. -The facility had not made her aware. -The facility notified her today that Resident #1 had not been receiving the Humalog as ordered. -The PA did not feel Resident #1 was in danger due to not receiving the Humalog as needed for</p>	D 358		

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D 358	<p>Continued From page 5</p> <p>FSBS greater than 250. -The PA was aware of Resident #1's blood sugar ranges.</p> <p>Interview with the facility's contracted pharmacy on 05/24/17 at 1:00 pm revealed: -The pharmacy received the order 12/03/16, but the facility had to request prn medications to be sent to the facility. -The facility called and faxed the contracted pharmacy on 05/24/17 to request Humalog to be sent immediately. -The pharmacy had no record of the Humalog ever being filled.</p> <p>Interview with the second shift MA on 05/24/17 at 2:45 pm revealed: -She was aware of the order for Humalog 8 units as needed for FSBS greater than 250. -She had administered the Humalog in the past for FSBS greater than 250. -There may have been days she administered the Humalog and forgot to document on the eMAR. -She was unable to recall the last time she administered Humalog to Resident #1.</p> <p>Interview with Resident #1 on 05/24/17 at 3:25 pm revealed: -Resident #1 was not aware of the different insulins the staff administered. -The resident was not aware of the amount of insulin he received on a daily basis or as needed. -The resident received 2-3 insulin injections every day.</p> <p>Interview with another second shift MA on 05/24/17 at 3:45 pm revealed: -Resident #1 had Humalog available for administration at one time, but the Humalog had not been available recently.</p>	D 358		

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NAME OF PROVIDER OR SUPPLIER  <b>BROOKDALE REYNOLDA ROAD</b>		STREET ADDRESS, CITY, STATE, ZIP CODE <b>2980 REYNOLDA ROAD WINSTON SALEM, NC 27105</b>		
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D 358	Continued From page 6  -She was unaware of how long the Humalog had been unavailable for administration. -She sent the contracted pharmacy a fax requesting Humalog, but was unable to produce the fax confirmation. -She was unable to confirm when the fax was sent to the contracted pharmacy. -She may have administered the Humalog and forgot to document on the eMAR.	D 358		

The following is a summary of the Plan of Correction for Brookdale Reynolda Road. This Plan of Correction is in regards to the Corrective Action Report dated June 9, 2017. This Plan of Correction is not to be construed as an admission of or agreement with the findings and conclusions in the Statement of Deficiencies, or any related sanction or fine. Rather, it is submitted as confirmation of our ongoing efforts to comply with statutory and regulatory requirements. In this document, we have outlined specific actions in response to identified issues. We have not provided a detailed response to each allegation or finding, nor have we identified mitigating factors.

#### **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 policies and procedures.**

- An audit was completed regarding orders compared to what is entered into eMAR by the Health and Wellness Director/Resident Care Coordinator/Designee.
- Any discrepancies that were found, at that time, were followed up on with correction in eMAR, the physician for clarification as indicated.
- Associates were retrained regarding the entry of orders into eMAR as written by the Health and Wellness Director/Resident Care Coordinator.
- Orders transcribed into the eMAR system will be reviewed by the Executive Director/Health and Wellness Director/Resident Care Coordinator/Designee daily for the next 30 days, when in the community, assuring that medications have been transcribed as ordered.
- There after a "New Order Tracking" form will be utilized as indicated, to include the transcription of the order into the eMAR system, by the Executive Director/Health and Wellness Director/Resident on at least on a weekly basis.
- Going forward, the District Director of Clinical Services will complete a Quality Survey; Clinical Site Visit, to include medication administration review. If the overall score is less than 90% a repeat survey will be conducted quarterly until the desired score is obtained.