

DHSR LIMITED USE STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	PROVIDER IDENTIFICATION NUMBER: HAL-049-021	MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	DATE SURVEY COMPLETED: 10/19/2022
NAME OF PROVIDER Brookdale Peachtree MC		STREET ADDRESS, CITY, STATE, ZIP CODE 2814 Peachtree Road, Statesville, North Carolina 28625	
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)
			COMPLETE DATE

D 000	Initial Comments  The Adult Care Licensure Section and the Iredell County DSS conducted an annual survey on October 18-19, 2022.			
D 344	<p>10A NCAC 13F .1002(a) Medication Orders</p> <p>An adult care home shall ensure contact with the resident's physician or prescribing practitioner for verification or clarification of orders for medications and treatments:</p> <p>(1) if orders for admission or readmission of the resident are not dated and signed within 24 hours of admission or readmission to the facility;</p> <p>(2) if orders are not clear or complete; or</p> <p>(3) if multiple admission forms are received upon admission or readmission and orders on the forms are not the same.</p> <p>The facility shall ensure that this verification or clarification is documented in the resident's record.</p> <p>This Rule is not met as evidenced by: Based on interviews and record review the facility failed to ensure clarification of a medication order for 1 of 3 sampled residents (Resident #1) related to an order for a diuretic that was placed on hold and was restarted without a physician's order.</p> <p>The findings are:</p> <p>Review of Resident #1's current FL2 dated 03/29/22 revealed: -The recommended level of care was the Special</p>		<p>The following is a summary of the Plan of Correction for Brookdale Peachtree Memory Care. This Plan of Correction is in regards to the annual survey dated 10/19/22. This Plan of Correction is not to be construed as an admission of agreement with the findings and conclusions in the state deficiencies, or any related sanctions or fine. Rather, it is submitted as a 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 detailed response to each allegation or finding, nor have we identified mitigating factors.</p> <p>10A NCAC 13F 1002 (a)</p> <p>(1). A Clarification order was obtained for resident #1. Furosemide 20 mg was discontinued by the Nurse Practitioner and removed from the electronic medical record, Point Click Care</p> <p>(2). Training will be completed by the District Director of Clinical Services to the Health and Wellness Director. The Health and Wellness Director will in turn train medication aides regarding the process for entering and discontinuing of orders.</p> <p>(3). An audit will be completed weekly times 4 weeks for new and discontinued orders by the Health and Wellness Director designee</p> <p>(4). To ensure ongoing compliance the Health and Wellness Director will complete random audits of new and discontinued orders for completion and accuracy for 2 additional months.</p>	AOC date 11/30/22

PROVIDER LICENSEE OR LICENSEE DESIGNEE'S SIGNATURE

*Brittney Bailey*

TITLE

*ED*

DATE

*11/14/22*

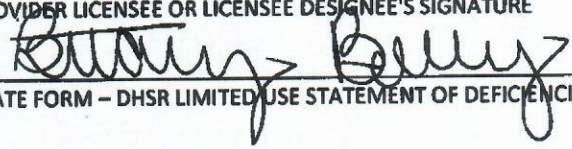
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Reviewed and Acknowledged 12/08/2022

*Sharon Duntun RN*

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D 344	<p>Care Unit (SCU). -Diagnoses included hypertension.</p> <p>Review of Resident #1's signed Physician orders dated 06/22/22 revealed an order for furosemide 20mg (a medication used to rid the body of extra water by increasing urine output) once daily.</p> <p>Review of Resident #1 signed Physician orders dated 10/03/22 revealed an order to hold furosemide 20mg until evaluated on scheduled day, (Thursday 10/06/22).</p> <p>Review of Resident #1's Primary Care Provider's (PCP) visit note for 10/06/22 revealed: -The note was signed by the PCP on 10/15/22. -Resident #1 was prescribed furosemide once daily to treat edema and hypertension but it was held due to noted lethargy with dehydration. -Furosemide 20mg was listed under current medications with the comment to continue furosemide as prescribed. -Stop furosemide 20mg was listed under recommendations/plan.</p> <p>Review of Resident #1's October 2022 electronic medication administration record (eMAR) revealed: -An entry for furosemide 20mg once daily, scheduled for 8:00am. -Furosemide 20mg was documented as administered from 10/01/22 to 10/03/22 and 10/07/22 to 10/18/22. -Furosemide 20mg was documented as held from 10/04/22 to 10/06/22.</p> <p>Interview with a medication aide (MA) on 10/19/22 at 11:01am revealed:</p>			
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D 344	<p>-She administered furosemide 20mg to Resident #1 this morning (10/19/22) since it was listed on the eMAR. -She remembered Resident #1's furosemide was held earlier in the month (October 2022) but the PCP sent an order to restart the medication.</p> <p>Interview with the facility's Registered Nurse (RN) on 10/19/22 at 12:20pm and 12:48pm revealed: -The PCP's visit notes were not available to the facility until the provider signed them. -The PCP was out sick recently so Resident #1's visit note dated 10/06/22 was not signed until 10/15/22. -She printed Resident #1's visit note on 10/16/22 and reviewed it on 10/17/22. -She did not read the entire visit note but read "continue furosemide as prescribed". -She did not read the last page of the visit note with the recommendation to stop furosemide. -Typically, she read the entire visit note and if there was conflicting information then she would clarify it with the PCP.</p> <p>Interview with the RN on 10/19/22 at 1:24pm revealed the PCP returned her call today (10/19/22) and wanted the furosemide discontinued.</p> <p>Interview with the Executive Director on 10/19/22 at 12:30pm revealed: -She expected the RN to read all of the PCP's visit notes on the day they were received. -If something required clarification, she expected the RN to contact the PCP that day to determine what order should be followed.</p> <p>Based on record reviews, interviews, and observations it was determined that Resident #1 was not</p>			
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*Brittany Bailey*

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D 344	interviewable.  Attempted telephone interview with Resident #1's PCP on 10/19/22 at 12:41pm was unsuccessful.			
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*Beverly Bailey*

TITLE

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DATE

11/4/22