STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL032073	A. BUILDING: _____ B. WING _____	12/15/2017

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
EDEN SPRING LIVING CENTER	3812 BOOKER STREET DURHAM, NC 27713

(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 12/15/17.	D 000		
D 234	10A NCAC 13F .0703(a) Tuberculosis Test, Medical Exam & Immunizatio 10A NCAC 13F .0703 Tuberculosis Test, Medical Examination & Immunizations (a) Upon admission to an adult care home, each resident shall be tested for tuberculosis disease in compliance with the control measures adopted by the Commission for Health Services as specified in 10A NCAC 41A .0205 including subsequent amendments and editions. Copies of the rule are available at no charge by contacting the Department of Health and Human Services, Tuberculosis Control Program, 1902 Mail Service Center, Raleigh, North Carolina 27699-1902. This Rule is not met as evidenced by: Based on interviews and record reviews, the facility failed to assure 2 of 3 sampled residents (#2 and #3) were tested upon admission for Tuberculosis (TB) disease in compliance with the control measures adopted by the Commission for Health Services. The findings are: 1. Review of the current FL-2 for Resident #2 dated 5/19/17 included diagnoses of Diabetes Mellitus II with partial bilateral foot amputations, hepatitis C, osteoarthritis, and muscle weakness. Review of the Resident Register for Resident #2 revealed an admission date of 11/19/15. Review of Resident #2's facility record revealed there was no documentation of TB skin testing	D 234		

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D 234	Continued From page 1	D 234		

upon admission.

Interview on 12/15/17 at 3:15 p.m. with the Supervisor and the Administrator revealed:
- No information was provided about why TB testing had not been completed upon admission.
- During resident record audits, some resident documentation had been removed from the records.
- There had been a TB skin test obtained recently for Resident #2 in the record that was positive.
- The resident had a chest x-ray and it was not back yet.
- They would look for the TB results.

Review of Resident #2's TB testing documentation provided revealed:
- There was documentation of a TB skin test dated 11/08/17 with a positive result.
- There was no number of millimeters of induration listed for the positive result.
- A chest x-ray dated 11/15/17 was obtained for a TB skin test of 13 millimeters, but no results of the chest x-ray were listed.

Interview on 12/17/17 at 3:45 p.m. with Resident #2 revealed:
- She had been in the facility for about two years.
- She did not recall a TB test upon admission.
- She had a positive TB test and a chest x-ray recently.
- She did not think she had any treatment for TB.

No further documentation related to the chest x-ray for positive TB skin testing results and/or treatment for positive TB were provided by the end of the survey.

After the survey, physician visit notes for Resident #2 provided by the facility included:

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D 234	Continued From page 2	D 234		

- A physician note dated 11/28/17 included an appointment was scheduled for 1/23/18 at 11 a.m. for a referral visit for evaluation and treatment for possible latent TB by the resident's personal care physician.
- A visit note dated 12/20/17 was from a resident physician visit revealed the resident's chest x-ray was negative and no treatment was ordered at that time.

2. Review of the current FL-2 dated 10/05/17 for Resident #3 included diagnoses of schizophrenia with paranoia, high cholesterol, coronary artery disease, congestive heart failure and osteoarthritis.

Review of the Resident Register for Resident #3 revealed no admission date was listed.

Review of Resident #3's facility contract listed an admission date of 12/15/10.

Review of Resident #3's TB documentation in the record revealed:
- A TB skin test dated placed on 11/12/07 and read on 11/15/07 as negative.
- Undated TB documentation revealed a positive TB skin test was listed on 6/2006.
- There was no documentation of a TB signs and symptoms questionnaire by a nurse.
- There was no other TB documentation in the resident's record.

Interview on 12/15/17 at 1:30 p.m. with the Administrator revealed:
- Resident #2 had a history of a positive TB test in the past.
- The resident had a negative TB test in 2007 prior to admission to the facility.
- Documentation had been removed from some

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D 234	Continued From page 3 of the resident records and they would look for the TB history forms for Resident #3. - The TB testing information had been misplaced and had not been able to be found. - The Administrator was not aware a TB signs and symptoms questionnaire was to be completed upon admission by the nurse for residents with a history of a positive TB test. - He would get records for Resident #3 of the chest x-ray and any treatment for TB for the positive TB testing in 2006 . Attempted interview on 12/15/17 at 2 p.m. with Resident #3 revealed the resident had a positive test but thought he did not have TB. The facility provided, after the survey, records from Resident #3's physician of a negative chest x-ray obtained in 2009 after a positive TB skin test was positive on 12/16/09.	D 234		
D 345	10A NCAC 13F .1002(b) Medication Orders 10A NCAC 13F .1002 Medication Orders (b) All orders for medications, prescription and non-prescription, and treatments shall be maintained in the resident's record in the facility This Rule is not met as evidenced by: Based on observations, interviews and record reviews, the facility failed to assure medication orders for cardiac, digestive, skin treatment ointment, hypertensive, electrolyte replacement, diuretic and mineral supplement for anemia medications for 1 of 3 sampled residents (#2) were maintained in the residents' records.	D 345		

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D 345	Continued From page 4 The findings are: 1. Review of the current FL-2 for Resident #2 dated 5/19/17 revealed: - Diagnoses included Diabetes Mellitus II with partial bilateral foot amputations, hepatitis C, osteoarthritis, and muscle weakness. - Medication orders included KlorCon 10meq one daily (Electrolyte supplement used when diuretics were used to treat edema and/or hypertension.), Metoprolol 50mg twice daily. (Used to treat hypertension, prevent chest pain and increase survival after heart attack.); Cozaar 100mg daily. (Used to treat hypertension and to prevent stroke.) Review of the November 2017 and December 2017 medication administration records (MAR) revealed KlorCon, Metoprolol, and Cozaar were not listed for administration. Record review of medication orders revealed there were no discontinuation orders for the medications. Review of the November 2017 and December 2017 MARs revealed Zantac 150mg twice daily as needed for heartburn and Triamcinolone ointment 0.1% to be applied to the affected area twice daily as needed for itch were listed for administration. Review of Resident #2's medication on hand revealed Triamcinolone ointment 0.1% and Zantac 150mg were available for administration. Review of medication orders for Resident #2 revealed there was no documentation of orders for Triamcinolone or Zantac.	D 345		

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D 345	Continued From page 5 Review of Resident #2's medication on hand revealed Hydralazine 10mg three times per day was available for administration. Review of medication orders for Resident #2 revealed there was no order for the Hydralazine to be administered. Interview on 12/15/17 at 2:45 p.m. with the supervisor/medication aide revealed: - The Metoprolol, Cozaar, and KlorCon were discontinued. - The medications had not been administered for some time. - She did not know where the orders were. - Some records had been removed from some of the facility records to thin them. - She would look for the discontinue orders. - The pharmacy had not taken them off of the printed MARS. - None of the medications had been filled. - The Triamcinolone 0.1% ointment and Zantac orders should be in the record. - The Hydralazine had a hold order on it from the physician. - She would look for the original Hydralazine order. - There was not a system in place to ensure orders were in the resident records. - The night shift supervisor was to ensure MARs were correct. No further orders for the medications were provided by the end of the survey.	D 345		