

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL011151	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____		(X3) DATE SURVEY COMPLETED R 03/07/2018
NAME OF PROVIDER OR SUPPLIER HEATHER GLEN AT ARDENWOODS		STREET ADDRESS, CITY, STATE, ZIP CODE 103 APPLACHIAN BLVD ARDEN, NC 28704			
(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 Buncombe County Department of Social Services conducted a follow up survey on March 6-7, 2018.	(D 000)			
D 375	10A NCAC 13F .1005(a) Self-Administration Of Medications 10A NCAC 13F .1005 Self -Administration Of Medications (a) An adult care home shall permit residents who are competent and physically able to self-administer their medications if the following requirements are met: (1) the self-administration is ordered by a physician or other person legally authorized to prescribe medications in North Carolina and documented in the resident's record; and (2) specific instructions for administration of prescription medications are printed on the medication label. This Rule is not met as evidenced by: Based on observations, interviews, and record reviews, the facility failed to assure 1 of 2 residents (Residents #2) who self administered medication had current physician orders to self administer medications for breathing difficulties and glaucoma. The findings are: Review of Resident #2's current FL2 dated 5/31/17 revealed: -Diagnoses included atrial fibrillation, coronary artery disease, bronchitis, and obstructive sleep	D 375	This rule will be met by new policy and procedure. Every 6 months an assessment carried out during the Care Plan Process. All measures will be put in place to assure compliance with Self-Administer of medications through: A. New Policy and Procedure B. Mandatory Training will be held April 4, 2018 at 2:00 pm for all Med Techs and taught by Director of Health Services Director of Health Services or Lead Med Tech will monitor policy being followed monthly for 3 months then quarterly for 3 quarters. Then ongoing every 6 months at Care Plan meetings.		

Division of Health Service Regulation

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

STATE FORM

Pamela S. Slater

TITLE

Administrator

(X6) DATE

3/27/18

Reviewed and accepted
3/28/18 RP

D59H12

If continuation sheet 1 of 7

Division of Health Service Regulation

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D 375	Continued From page 1 apnea. -An order for Advair (used to prevent wheezing and shortness of breath) 100-50 diskus inhale 1 puff twice daily. -An order for dorzolamide hcl (used to treat glaucoma) 2% eye drops instill 1 drop in both eyes three times a day. -An order for Symbicort (relaxes muscles in the airway to improve breathing) 80/4.5mcg inhaler inhale 2 puffs po daily. Observation in Resident #2's room on 3/6/18 at 9:40am revealed: -A Symbicort 80/4.5mcg inhaler was laying on the top of the chest at the entrance to the room. -A small white bottle with a red screw on cap was laying on the top of the chest at the entrance to the room. -A box with one Advair 100-50 diskus inside was also visible on the top of the chest. Interview with Resident #2 on 3/6/18 at 9:45am. revealed: -The resident self-administered some of his medications which included eye drops and an inhaler medication. -He stored his eyedrops and inhaler medication in his room. -The resident used the facility pharmacy for his medication supply. Review of Resident #2's Care Plan dated 12/19/17 revealed the resident was documented as "oriented in person, place and time." Review of Resident #2's a Registered Nurse's assessment of Resident #2's ability to self-administer medications dated 1/30/18 revealed the resident was "deemed able to safely self-administer medications."	D 375			

Division of Health Service Regulation

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D 375	Continued From page 2 A. Review of Resident #2's signed physician order sheet dated 1/16/18 revealed: -An order for dorzolamide hcl 2% eye drops instill 1 drop in both eyes three times a day. -The order did not indicate the resident could self-administer the medication. Review of Resident #2's January 2018 electronic Medication Administration Record (eMAR) revealed: -An entry for dorzolamide hcl 2% eye drops 1 drop into each eye three times daily scheduled at 8:00am, 12:00pm, and 7:00pm. -"Not given by the facility" was to the left of each of the scheduled times. Review of Resident #2's February and March 2018 eMARs revealed: -An entry for dorzolamide hcl 2% eye drops 1 drop into each eye three times daily scheduled at 8:00am, 12:00pm, and 7:30pm. -"Not given by the facility" was to the left of each of the scheduled times. Review of Resident #2's eye physician note dated 12/4/17 revealed: -"Glaucoma stable." -"Same meds." -Follow up appointment in 4 months. Telephone interview with the facility pharmacy on 3/6/18 at 3:07pm revealed: -The current prescription on file for Resident #2's dorzolamide hcl 2% eye drops 1 drop each eye three times a day was dated 6/1/17. -They had no physician's order to indicate this was a self-administration order. -They had dispensed 1 bottle of dorzolamide hcl 2% eye drops on 5/25/17, 6/7/17, 6/22/17, and	D 375			

Division of Health Service Regulation

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D 375	Continued From page 3 12/9/17. -One bottle of dorzolamide hcl 2% eye drops was a 33 day supply of medication for Resident #2. Refer to the interview with the Director of Health Services on 3/7/18 at 9:00am. Refer to the interview with the Administrator on 3/7/18 at 1:31pm. Refer to the facility's policy on self-administration of medications. Attempted telephone interview with Resident #2's physician on 3/7/18 at 11:38am was unsuccessful by exit. B. Review of Resident #2's signed physician order sheet dated 1/16/18 revealed: -An order for Symbicort 80/4.5mcg inhaler inhale 2 puffs daily. -The order did not indicate the resident could self-administer the medication. Review of Resident #2's January 2018 eMAR revealed: -An entry for Symbicort 80/4.5mcg inhaler inhale 2 puffs daily scheduled at 8:00am and 7:00pm. - "Not given by the facility" was to the left of each of the scheduled times. Review of Resident #2's February and March 2018 eMARs revealed: -An entry for Symbicort 80/4.5mcg inhaler inhale 2 puffs daily scheduled at 8:00am and 7:30pm. - "Not given by the facility" was to the left of each of the scheduled times. Interview with Resident #2 on 3/7/18 at 8:22am revealed he self-administered his Symbicort	D 375			

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D 375	Continued From page 4 inhaler two times a day. Telephone interview with the facility pharmacy on 3/7/18 at 10:05am revealed: -Resident #2's current order for Symbicort 80-4.5mcg 2 puffs daily was dated 7/27/17. -They did not have an order indicating this medication was a self administered medication. -They had last dispensed a Symbicort inhaler for Resident #2 on 2/25/18. -There had been no other dispenses of Symbicort from their pharmacy for Resident #2. -A Symbicort inhaler was a 30 day supply of medication for Resident #2. Refer to the interview with the Director of Health Services on 3/7/18 at 9:00am. Refer to the interview with the Administrator on 3/7/18 at 1:31pm. Refer to the facility's policy on self-administration of medications. Attempted telephone interview with Resident #2's physician on 3/7/18 at 11:38am was unsuccessful by exit. C. Review of Resident #2's signed physician order sheet dated 1/16/18 revealed there was no order for the Advair 100-50 diskus. Review of Resident #2's January through March 2018 eMARs revealed there were no entries for Advair 100-50 diskus. Telephone interview with the facility pharmacy on 3/7/18 at 10:05am revealed: -Resident #2's Advair 100-50 1 puff twice a day order had ended on 8/1/17.	D 375			

Division of Health Service Regulation

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NAME OF PROVIDER OR SUPPLIER

STREET ADDRESS, CITY, STATE, ZIP CODE

HEATHER GLEN AT ARDENWOODS

103 APPLACHIAN BLVD

ARDEN, NC 28704

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D 375	Continued From page 5 -They never had any record that the Advair had ever been a self administer order. Refer to the interview with the Director of Health Services on 3/7/18 at 9:00am. Refer to the interview with the Administrator on 3/7/18 at 1:31pm. Refer to the facility's policy on self-administration of medications. Attempted telephone interview with Resident #2's physician on 3/7/18 at 11:38am was unsuccessful by exit. Interview with the Director of Health Services on 3/7/18 at 9:00am revealed: -She and the medication aides were responsible for communication of medication order changes to the residents that self administered medications. -She and the medication aides were also responsible for removing medications that had been discontinued from the rooms of residents who self administered medications. Interview with the Administrator on 3/7/18 at 1:31pm revealed: -It was the facility's policy to have an order from a physician to allow resident's to self administer medications. -The physicians order "should be specific" and address each medication that could be self administered. Review of the facility's policy on self-administration of medications revealed: "The Resident's physician must provide a written	D 375		

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D 375	Continued From page 6 order for all medications that the Resident will self-administer." -"Physician's Orders will be sent to the pharmacy by the Wellness Director/Resident Care Coordinator or licensed nurse designee, if appropriate	D 375			