STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	FCL078097	A. BUILDING: _____ B. WING _____	12/31/2018

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
B & B ASSISTED LIVING # 6	2133 PRESTON ROAD MAXTON, NC 28364

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C 000	Initial Comments The Adult Care Licensure Section conducted any annual survey on December 28 and 31, 2018.	C 000		
C 105	10A NCAC 13G .0317(d) Building Service Equipment 10A NCAC 13G .0317 Building Service Equipment (d) The hot water tank shall be of such size to provide an adequate supply of hot water to the kitchen, bathrooms, and laundry. The hot water temperature at all fixtures used by residents shall be maintained at a minimum of 100 degrees F (38 degrees C) and shall not exceed 116 degrees F (46.7 degrees C). This Rule is not met as evidenced by: Based on observations and interviews the facility failed to assure that hot water temperatures were maintained between 100 to 116 degrees Fahrenheit at 4 of 4 fixtures sampled used by residents. The finding are: Observations during the facility tour on 12/28/18 revealed: -A "Caution Hot Water" sign was posted by the sink in the common bathroom. -The hot water temperature at the sink in the common bathroom was 126 degrees Fahrenheit at 10:02am. -The hot water temperature in the shower in the common bathroom was 125 degrees Fahrenheit at 10:04am. -The hot water temperature in the handicap accessible sink was 126 degrees Fahrenheit at 10:07am. -The hot water temperature in the handicap	C 105		

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C 105	Continued From page 1	C 105		

accessible sink was 125 degrees Fahrenheit at 10:12am.

Interview with a resident on 12/28/18 at 10:29am revealed he knew how to adjust the water temperature so that it was not too hot.

Interview with a second resident on 12/28/18 at 10:35am revealed he knew how to turn on the cold water tap to adjust the temperature of the hot water.

Interview with a third resident on 12/28/18 at 10:40am revealed that she did not have a problem adjusting the hot water.

Interview with a personal care aide (PCA) on 10:15am revealed:
-No one had complained about the hot water temperature.
-No one had been burned by the hot water.
-The Adult Home Specialist (AHS) from the local Department of Social Services instructed the PCA to post the "Caution Hot Water" sign "about one or two months ago" because of elevated water temperatures.
-The PCA did not know what was done to adjust the water temperature after the AHS visit.

Interview with the supervisor in charge (SIC) on 12/28/18 at 10:20am revealed:
-The AHS informed her two months ago the water temperature was too hot.
-The AHS suggested the hot water temperature be checked daily until it was between 100 and 116 degrees Fahrenheit.
-The hot water heater's thermostat was adjusted and the temperature returned to the required range.
-The SIC did not remember who adjusted the hot

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C 105	Continued From page 2 water heater's thermostat. -The hot water temperature was checked "for 2 or 3 days but not written down." -The SIC thought the problem had been resolved. -The SIC would have someone adjust the hot water heater's thermostat immediately. Interview with the Administrator on 12/28/18 on 12:20pm revealed: -She was not aware the temperature of the hot water was too high. -The AHS had checked the temperature of the hot water when she visited the facility about two months ago. -The hot water heater's thermostat had been adjusted and the water temperature dropped to an acceptable temperature. -The Administrator could not remember the date the hot water heater's thermostat was adjusted. -Water temperatures were not documented during the adjustment period. -The Administrator could not remember the temperature of the hot water before or after the thermostat was adjusted. -Hot water temperatures were not routinely checked. Observation on 12/31/18 at 9:00am revealed the temperature of the hot water in the common bathroom sink was 110 degrees Fahrenheit.	C 105		
C 330	10A NCAC 13G .1004(a) Medication Administration 10A NCAC 13G .1004 Medication Administration (a) A family care home shall assure that the preparation and administration of medications, prescription and non-prescription and treatments by staff are in accordance with:	C 330		

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C 330	Continued From page 3 (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, record reviews and interviews, the facility failed to assure medications were administered as ordered for 1 of 3 sampled residents (Resident #2) for sliding scale insulin. The findings are: Review of Resident #2's Residents Register revealed an admission date of 11/20/18. Review of Resident #2's current FL-2 dated 11/29/18 revealed: -Diagnoses included unspecified dementia without behaviors, diabetes mellitus type II with unspecified complications, unspecified kidney failure with required renal dialysis. -There was an order for fingerstick blood sugars (FSBS) four times a day with Humalog insulin sliding scale insulin (SSI) as follows: For FSBS of 151-200 administer 2 units; 201-250 administer 4 units; 251-300 administer 6 units; 301-350 administer 8 units; 351-400 administer 10 units; if greater than 400, call physician. Review of a Physician's Order Request for Resident #2 dated 12/07/18 revealed an order for FSBS four times a day with Humalog SSI coverage as follows: For FSBS of 151-200 administer 2 units; 201-250 administer 4 units; 251-300 administer 6 units; 301-350 administer 8 units; 351-400 administer 10 units; if greater than 400 administer 10 units and recheck FSBS in 30 minutes. Notify physician if FSBS is greater than	C 330		

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C 330	Continued From page 4 400 for 3 consecutive readings in a 24 hour period. Review of Resident #2's December 2018 Medication Administration Record (MAR) revealed: -There was a computer generated entry for Humalog SSI to be administered 4 times a day with administration times of 8:00am, 12:00pm, 5:00pm and 8:00pm according to the following scale: for FSBS result of 150 - 200 = 2 units; 201 - 250 = 4 units; 251 - 300 = 6 units; 301 - 350 = 8 units; 351 - 400 = 10 units. Greater than 400, call the physician. -Resident #2's FSBS was documented as 368 on 12/01/18 at 12:00pm and would have required 10 units of insulin; 8 units were documented as administered. -Resident #2's FSBS was documented as 216 on 12/05/18 at 4:00pm and would have required 4 units of insulin; 8 units were documented as administered. -Resident #2's FSBS was documented as 210 on 12/06/18 at 12:00pm and would have required 4 units of insulin; 2 units were documented as administered. -There was a second computer generated entry for FSBS four times a day with Humalog SSI as follows: For FSBS of 151-200 administer 2 units; 201-250 administer 4 units; 251-300 administer 6 units; 301-350 administer 8 units; 351-400 administer 10 units; if greater than 400 administer 10 units and recheck FSBS in 30 minutes. Notify physician if FSBS is greater than 400 for 3 consecutive readings in a 24 hour period. -Resident #2's FSBS was documented as 209 on 12/07/18 at 12:00pm and would have required 4 units of insulin; 2 units were documented as administered. -Resident #2's FSBS was documented as 275 on	C 330		

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C 330	Continued From page 5	C 330		

12/08/18 at 12:00pm and would have required 6 units of insulin; 4 units were documented as administered.
-Resident #2's FSBS was documented as 392 on 12/09/18 at 12:00pm and would have required 10 units of insulin; 8 units were documented as administered.
-Resident #2's FSBS was documented as 412 on 12/15/18 at 8:00am and would have required 10 units of insulin; 8 units were documented as administered.
-Resident #2's FSBS was documented as 315 on 12/19/18 at 12:00pm and would have required 8 units of insulin; 6 units were documented as administered.
-Resident #2's FSBS was documented as 368 at 8:00pm on 12/23/18 and would have required 10 units of insulin; 8 units were documented as given.
-Resident#2's FSBSs for 12/01-12-31, 2018 ranged from 189 to 538.
-One medication aide (MA) had documented seven of the nine SSI errors.

Interview with the Administrator on 12/31/18 at 4:10pm revealed:
-She did not routinely check Resident #2's sliding scale insulin.
-She felt she knew "what was going on with his (Resident #2) insulin because he was so new and there had been so many changes in his dosage."
-She would notify Resident #2's primary care provider (PCP) as soon as possible.
-She would retrain the MA on sliding scale coverage as soon as possible.
-The Administrator would now monitor sliding scale insulin coverage regularly.

Attempted telephone interview with Resident #2's PCP on 12/31/18 at 3:24pm was unsuccessful.

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C 330	Continued From page 6 Resident #2 was not available for interview on 12/31/18. The MA who documented the seven SSI errors on Resident #2's December 2018 was not available for interview on 12/31/18.	C 330		