Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL090025	A. BUILDING: _____ B. WING _____	07/27/2023

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
WOODRIDGE ASSISTED LIVING FACILITY	2515 FOWLER SECREST ROAD MONROE, NC 28110

(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 Union County Department of Social Services conducted an annual survey on July 26 - 27, 2023.	D 000	Responses to the cited deficiencies do not constitute an admission or agreement by the facility of the facts alleged or conclusions, set forth in the statement of deficiencies, the plan of correction is prepared solely as a matter of compliance with the law.	
D 276	10A NCAC 13F .0902(c)(3-4) Health Care 10A NCAC 13F .0902 Health Care (c) The facility shall assure documentation of the following in the resident's record: (3) written procedures, treatments or orders from a physician or other licensed health professional; and (4) implementation of procedures, treatments or orders specified in Subparagraph (c)(3) of this Rule. This Rule is not met as evidenced by: Based on interviews and record reviews, the facility failed to implement physician's orders for 1 of 5 sampled residents for daily weight checks prior to the administration of an as needed (PRN) medication for weight gain parameters set by the resident's provider (Resident #3). The findings are: Review of Resident #3's current FL2 dated 05/26/23 revealed diagnoses included Alzheimer's disease, anemia, chronic kidney disease, congestive heart failure, coronary arteriosclerosis, essential hypertension, mixed hyperlipidemia, and type 2 diabetes mellitus. Review of Resident #3's physician's orders revealed there was an order for torsemide (a medication used to treat fluid retention) dated 03/28/23 "Take torsemide daily; obtain daily weights in the morning. If greater than 2 pound weight gain overnight, give an additional 20mg of	D 276	The Adult Care Home agrees to provide care and services in accordance to the resident care plan. Appropriate medications and orders are verfied, correct, and readily available to meet patients needs with safety and security measures in place. To identify vulnerabilities to medication/order errors are minimized, and those that remain are identified, documented and modified. Staff members involved in the medication administration and order-processing are safety conscience and actively productive. Ensure any preliminary checks and observations have been carried out if necessary prior to administration (e.g. blood pressure monitoring, weight checks, prior to administration of anti-hypertensives and diuretic). Staff on 8/15/2023 participated in Proper Order Implementation training. All staff administering medication should follow the following: The "Seven Cs/Rs": • Correct/Right Resident • Correct/Right Medicine • Correct/Right Dose • Correct/Right Time • Correct/Right Route • Correct/Right Documentation • Correct/Right Order Initiation Medication Technician, Resident Care Coordinator, Memory Care Coordinator and Executive Director will monitor the situation to prevent medication/order discrepencies upon each and every medication/order received.	8/22/2023

Division of Health Service Regulation
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE TITLE Executive Director (X6) DATE 8/28/2023

REVIEWED AND ACKNOWLEDGED ON 08/29/23 BY Tina B Nielsen

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D 276	Continued From page 1 torsemide then resume regular dose of torsemide 20mg daily." Review of Resident #3's May 2023 electronic medication administration record (eMAR) revealed: -There was an entry for the resident's weight to be checked weekly. -There was no entry for the resident's weight to be checked daily. -There was documentation that the resident's weight was checked each Monday at 6:00am. -There was an entry for torsemide 20mg daily and a separate entry for torsemide 20mg every day as needed. Review of Resident #3's June 2023 eMAR revealed: -There was an entry for the resident's weight to be checked weekly. -There was no entry for the resident's weight to be checked daily. -There was documentation that the resident's weight was checked each Monday at 6:00am. -There was an entry for torsemide 20mg daily and a separate entry for torsemide 20mg every day as needed. Review of Resident's #3's July eMAR from 07/01/23-07/26/23 revealed: -There was an entry for the resident's weight to be checked weekly. -There was no entry for the resident's weight to be checked daily. -There was documentation that the resident's weight was checked each Monday at 6:00am. -There was an entry for torsemide 20mg daily and a separate entry for torsemide 20mg every day as needed.	D 276		

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D 276	Continued From page 2 Interview with the second shift medication aide (MA) on 07/26/23 at 3:30pm revealed: -When the MA received an order, the order was faxed to the pharmacy. -The pharmacy entered the new order on the eMAR and the Resident Care Coordinator (RCC), or Memory Care Coordinator (MCC) approved the orders. -The orders must be approved before the MA could see the medication order on the eMAR for administration. Interview with the RCC on 07/27/23 at 8:20am revealed: -The MAs faxed new orders to the pharmacy. -A member of the management team (RCC, MCC, or Administrator) approved new orders in the eMAR system. -Each month, the physician's orders from the eMAR were printed and a medication cart audit was performed to ensure that medications were available for administration. -If an order was not entered or entered incorrectly, it would be incorrect on the copies of the physician's order sheets used for the cart audits. -There was no system in place to ensure that orders were entered on the eMAR correctly at the end of the month. -There was no system in place to ensure all orders in the resident's record were entered into the eMAR at the end of the month. -If an order was not entered or entered incorrectly, the eMAR would continue to be incorrect the next month. Interview with the first shift MA on 07/27/23 at 9:50am revealed: -Resident #3 had a supply of PRN Torsemide available on the medication cart.	D 276		

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D 276	Continued From page 3 -When new medication orders were received, the MA faxed the order to the pharmacy and the pharmacy added the new order to the eMAR. -The RCC approved the new orders. -The RCC and MCC audited the medication carts monthly and the pharmacy audited them quarterly. Telephone interview with the pharmacist at the facility's contracted pharmacy on 07/27/23 at 8:50am revealed: -The process of entering orders began with a phone call or fax from the facility. -The pharmacist verified the order for accuracy after orders were entered. -After an order was entered into the system, the medication was filled and shipped to the facility. Interview with the Administrator 7/27/23 at 11:05am revealed: -When a new order was received, the MAs, RCC, or MCC faxed the order to the pharmacy. -Either the RCC or MCC approved the orders that the pharmacy entered in the eMAR system to ensure that the orders were correct on the eMAR. -There was no system currently other than the approval process by the RCC or MCC to ensure orders were entered correctly. -She was unsure how this order for Resident #3 was not added to the eMAR. -She understood that the resident would need to have daily weights to determine if medication was needed for weight gain. Interview with Resident #3 on 07/26/23 at 3:15pm revealed: -He did not have any shortness of breath when he walked or when he was sitting. -He had shortness of breath in the past, but not recently.	D 276		

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D 276	Continued From page 4 -He did not have any swelling in his lower extremities. Attempted interview with Resident #3's Primary Care Physician on 07/27/23 at 7:56am was unsuccessful.	D 276		

Woodridge Assisted Living
INSERVICE 8/15/2023
PROPER ORDER IMPLEMENTATION
[redacted] **RN**

New Order Process

It is our policy that all orders received are processed according to the Company's policies and procedures. An order should NEVER be filed in a resident's chart until it has been reviewed by the Care Manager.

eMAR:

Order Implementation System Process

1.All orders are reviewed by the Resident Care Coordinator or designee.
2.Orders must be complete. If incomplete, contact the prescriber immediately for clarification.
3.The Resident Care Coordinator will (Medication Aide if after hours/ weekends) fax the order to the pharmacy and scan the order into the electronic scan (Matrix Scan).
4.The Resident Care Manager or designee will wait for the order to be placed in the electronic medication system for approval and then approve the order for administration and follow the steps in the Order Process System.
5.Medication aides will review the Facility Activity Report at the beginning of each shift for order changes when a new order, or change order is received.
6.Whenever there is a medication change, the Resident Care Coordinator/designee discusses the change with the resident and responsible party or guardian as appropriate and documents.
Note: The Resident Care Coordinator/designee will follow up timely to receive any necessary clarifications for Physician's Orders.

Order Process System

Each Community should have a way to process orders to ensure that all orders are completed prior to filing in Resident Charts. Below if an example of effective tracking.

Yellow Folder

1.Order is received and faxed to the pharmacy
2.Waiting on approval in the electronic MAR (eMAR)- then placed in Orange Folder

Orange Folder

1.Waiting on the Delivery of Medication
2.Check Delivery Sheet- If completed/delivered place in Green Folder
3.If not delivered find out why, follow up and place in Red Folder

Red Folder

1.Order is incomplete an requires physician clarification, needs a hard copy/eScript (i.e., controlled medication); requires prior authorization by a physician/provider.
2.Follow Up Immediately

Blue Folder

1.Place all orders requiring DME, Labs, Oxygen, Therapy, Required Follow Up from Hospital Visit Continue to Follow Up on these Orders
2.Once Completed place in Green Folder

Green Folder

1.Ready to Scan to MatrixCare to be filed in Resident's Chart
2.Once scanned, this item will be stamped scanned and placed in the current month's scan bin.
3.Whenever there is a medication change, the Resident Care Coordinator/designee discusses the change with the resident and responsible party or guardian as appropriate and documents.