RI Department of Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	ALR01388	A. BUILDING: _____ B. WING _____	06/26/2023

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
DARLINGTON ASSISTED LIVING CENTER NO	56 MAYNARD STREET PAWTUCKET, RI 02860

(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
S 003	Initial Comments An unannounced biennial State Licensure survey was conducted at this residence. Deficiencies were identified relative to the State Licensure survey.	S 003		
S 230	Organization And Management 2.4.13.A Management Of Services 2.4.13 (A/B) Management of Services A. Each residence shall provide services with adequate professional and ancillary employees and in accordance with applicable state law. Further, the residence shall assure that all services are rendered in a safe and effective manner and consistent with the requirements herein. The residence shall provide all care and services to all residents in accordance with the prevailing community standard of care. This Requirement is not met as evidenced by: Based on surveyor observation, record review, and staff interview, it has been determined that the residence failed to provide care and services in accordance with prevailing community standards of care relative to following physician's orders for two of two sample residents reviewed for self-administration of insulin, ID #s 1 and 2. Findings are as follows: Mosby's 4th Edition, Fundamentals of Nursing, page 314 states, "The physician is responsible for directing medical treatment. Nurses are obligated to follow physician's orders unless they believe the orders are in error or would harm the clients." 1) During the medication cart review ID #1 was	S 230 S230 S230 7/24/23 S230	Resident – correction was made same day. Resident has physicians order in place Upon Admission DOW/ Admin will use checklist that Admin created, to ensure orders are in place Quarterly assessments will be done to ensure proper documentation.	6/26/23 7/14/23 7/5/23

Facilities Regulation

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE: Melissa Sanford — TITLE: administrator — (X6) DATE: 7-20-2023

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S 230	Continued From page 1 identified as a resident who self-administers his/her medications by Staff A, Medication Technician/Supervisor. Record review revealed ID #1 was admitted to the residence in April of 2022 with diagnoses including, but not limited to: diabetes and cognitive disability. Record review of a "Physician/Healthcare Provider Plan of Care" form dated 04/21/2022 indicates the resident requires "associate administer the medications, medications are stored in a central location and administered by associate only." Record review of the resident's medication administration record (MAR) revealed an order for "Lantus Solostar (Insulin) 100 units/ml inject 14 units subcutaneously (under the skin) at bedtime." Record review of ID #1's physician's orders failed to reveal an order was obtained for the resident to self-administer his/her insulin. During an interview on 06/26/2023 at approximately 12:00 PM, the Wellness Director acknowledged ID #1 does not have an active physician's order to self-administer insulin. 2) During the medication cart review ID #2 was identified as a resident who self-administers his/her medications by Staff A. Record review revealed ID #2 was admitted to the residence in December of 2016 with diagnoses including, but not limited to: Seizures, Alzheimer's disease, and diabetes.	S 230	S230 Admin will continue to audit charts randomly & will discuss in Quarterly Q. A. meetings. QS 7/24/23	6/30/23

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S 230	Continued From page 2 Record review of the resident's MAR revealed an order for "Levemir (Insulin) Flextouch 100 unit/ml Inject 22 units under skin once daily with breakfast." Record review of ID #2's physician's orders failed to reveal an order was obtained for the resident to self-administer his/her insulin. During an interview on 06/26/2023 at approximately 12:05 PM, the Wellness Director acknowledge ID #2 does not have a physician's order to self-administer insulin.	S 230		
S 545	Resident Care Services 2.4.24.A.1 Medication Services 2.4.24 (A) Medication Services 1. For M1 and M2 licensure levels, each resident shall have the right to: a. Retain the services of his/her own personal physician and dentist; b. Select the pharmacy or pharmacist of his/her choice provided that the pharmacy or pharmacist supplies medications suitably packaged for the residence's program; c. Refuse any or all medications; d. Retain possession and control of his/her medications, provided that such possession and control is deemed safe by the resident, the resident's guardian, if appropriate, and the administrator or his/her designee in consultation with the resident's physician(s).	S 545 S 545 QB 7/24/23	Dow corrected the following day. There is now assessment to self administer along with physician order to self administer.	6/27/23

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S 545	Continued From page 3 This Requirement is not met as evidenced by: Based on surveyor observation, record review, and staff interview, it has been determined the residence failed to assess a resident to ensure a resident with control of his/her medications was deemed safe by the resident, the resident's guardian, if appropriate, and the administrator or his/her designee in consultation with the resident's physician for one of two sample residents reviewed for self-administration of medication assessments, ID #1. Findings are as follows: During the medication cart review ID #1 was identified as a resident who self-administers his/her own medications by Staff A, Medication Technician/Supervisor. Record review revealed ID #1 was admitted to the residence in April of 2022 with diagnoses including, but not limited to: diabetes and cognitive disability. Record review of a "Physician/Healthcare Provider Plan of Care" form dated 04/21/2022 indicates the resident requires "associate administer the medications, medications are stored in a central location and administered by associate only." Record review of the resident's medication administration record (MAR) revealed an order for "Lantus Solostar (Insulin) 100 units/ml inject 14 units subcutaneously (under the skin) at bedtime." The record failed to reveal self-administration of medication assessments for this resident or	S 545		

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S 545	Continued From page 4 documentation the physician had been consulted and approved of the self-administration. During an interview on 06/26/2023 at approximately 12:00 PM, the Wellness Director was unable to provide evidence the resident had been assessed for self-administration of medications and acknowledged ID #1 does not have an active physician's order to self-administer insulin.	S 545	S545 Upon admission DOW/Admin will now use checklist created to prevent From occuring again. Admin also created a sticker system so outside of Binder you will see if Individual is a Self Administer.	7/14/23 8/2/23

ALR01388	B. WING	07/03/2023

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S 003	Initial Comments An unannounced complaint/incident investigation survey was conducted at this residence. No deficiencies were identified.	S 003	S545 - Admin will continue to audit files randomly. & oversee upon admission to ensure all residents have documentation prior. (cm 7/24/23	6/27/23
		S545	Management will review in Q.A. meetings.	6/30/23

Facilities Regulation

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE: Melessa Sanford, Admn. | TITLE: Administrator | (X6) DATE: 7/26/23