

DEPARTMENT OF HEALTH AND HUMAN SERVICES  
CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 07/27/2015  
FORM APPROVED  
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>345437</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>07/01/2015</b>
NAME OF PROVIDER OR SUPPLIER  <b>HIGHLANDS CASHIERS HOSPITAL IN</b>			STREET ADDRESS, CITY, STATE, ZIP CODE <b>190 HOSPITAL DRIVE HIGHLANDS, NC 28741</b>	
(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) COMPLETION DATE
F 431 SS=D	<p>483.60(b), (d), (e) DRUG RECORDS, LABEL/STORE DRUGS &amp; BIOLOGICALS</p> <p>The facility must employ or obtain the services of a licensed pharmacist who establishes a system of records of receipt and disposition of all controlled drugs in sufficient detail to enable an accurate reconciliation; and determines that drug records are in order and that an account of all controlled drugs is maintained and periodically reconciled.</p> <p>Drugs and biologicals used in the facility must be labeled in accordance with currently accepted professional principles, and include the appropriate accessory and cautionary instructions, and the expiration date when applicable.</p> <p>In accordance with State and Federal laws, the facility must store all drugs and biologicals in locked compartments under proper temperature controls, and permit only authorized personnel to have access to the keys.</p> <p>The facility must provide separately locked, permanently affixed compartments for storage of controlled drugs listed in Schedule II of the Comprehensive Drug Abuse Prevention and Control Act of 1976 and other drugs subject to abuse, except when the facility uses single unit package drug distribution systems in which the quantity stored is minimal and a missing dose can be readily detected.</p> <p>This REQUIREMENT is not met as evidenced by: Based on observations, record review and staff</p>	F 431	This Plan of Correction constitutes	7/24/15

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

TITLE

(X6) DATE

Electronically Signed

07/23/2015

Any deficiency statement ending with an asterisk (\*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

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F 431	<p>Continued From page 1</p> <p>interview, the facility failed to remove expired or out of date medications from 2 of 3 medication carts.</p> <p>Review of manufacturer recommendations for Xalatan eye drops revealed the ophthalmic solution should not be used more than 42 days after opening.</p> <p>1. A. Observation on 06/30/15 at 3:39 PM of the Cherry Trail Medication Cart revealed it contained 4 vials of Albuterol 0.83% 2.5 milligrams (mg)/3 milliliters (ml) which were labeled for a specific resident. 1 vial had an expiration date of March 2015.</p> <p>1. B. Also, in the medication cart was a bottle of Xalatan eye drops which were labeled for a specific resident with a date opened sticker of 02/26/15. The manufacturer expiration date was December 2016.</p> <p>An interview with Nurse #1 on 06/30/15 at 3:50 PM about the facility process for checking for expired medications revealed all nurses were responsible for checking for expired medications and the night shift nurses were also supposed to check each cart. Nurse #1 stated the expired Albuterol should have been returned to the pharmacy. Nurse #1 stated she thought the Xalatan eye drops were good for 28 - 30 days after opening and should have been discarded. Nurse #1 stated the resident for whom the Albuterol was ordered received the medication on an "as needed" basis and had not received a dose in June 2015. Nurse #1 stated the resident for whom the Xalatan was ordered received it every night and the last dose was given on 06/29/15.</p>	F 431	<p>Highlands-Cashiers Hospital's written allegation of compliance for the deficiencies cited. However, submission of this Plan of Correction is not an admission that a deficiency exists or that one was cited correctly. This Plan of Correction is submitted to meet requirements established by state and federal law.</p> <p>Highlands-Cashiers Hospital, Mission Health provides for the safety of all residents by establishing a system to ensure all drugs and biologicals used in the facility are safely labeled, including the appropriate expiration date, and that expired or out of date drugs and biologicals are safely removed.</p> <p>Action Plan: In response to the findings in the Cherry Trail and Dogwood Trail medication carts: 1.A. The vial of expired Albuterol was immediately removed from the Cherry Trail medication cart and disposed of per facility policy. 1.B. The bottle of Xalatan eye drops past its use by date was immediately removed from the Cherry Trail medication cart and disposed of per facility policy. 2.A. The expired Q Tussin Cough syrup was immediately removed from the Dogwood Trail medication cart and disposed of per facility policy. 2.B. The out-of-date Extra Protective Cream was immediately removed from the Dogwood Trail medication cart and disposed of per facility policy. Additionally, all medication carts and</p>		

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F 431	Continued From page 2  An interview on 06/30/15 at 4:18 PM with the Director of Nursing (DON) about the storage guidelines for Xalatan eye drops revealed the facility policy for eye drops was that they could remain in use for 6 months after opening or until the expiration date, whichever came first.  An interview on 06/30/15 at 4:30 PM with the DON revealed she had spoken with Pharmacy staff and confirmed that Xalatan eye drops could only remain in use for 6 weeks after opening.  An interview on 07/01/15 at 4:12 PM with the DON revealed the Pharmacy sent a checklist each month that the night nurse on each medication cart completed that indicated expired meds were removed from the cart and refrigerator temperatures were checked. The DON stated she didn't know why there was an expired Albuterol in with 3 other Albuterol that weren't expired. The DON stated all multi-dose containers came with a sticker to indicate the date they were opened but the eye drops did not have instructions on the label to discard 6 weeks after opening. When asked about her expectation for expired medications, she stated she expected expired meds or out of date meds to be removed from the cart by the expiration date.  2. A. Observation on 06/30/15 at 4:22 PM of the Dogwood Medication Cart revealed a bottle of Q-Tussin cough syrup which was almost full labeled for a specific resident. The pharmacy dispense label indicated it was dispensed on 08/29/14. The manufacturer expiration date on the bottle was February 2015.	F 431	storage areas were inspected by the Director of Nursing on 7/14/15 and no additional out-of-date medications were found. To enhance current compliant operations, the Director of Nursing reeducated nursing staff in a series of in-services conducted during the period 7/19/15 - 7/23/15. Nurses were reminded of the importance of removing all expired medications from the carts. In addition, nurses were reminded to check expiration dates prior to administering every medication and discard any that have expired. Sign-in logs confirmed attendance at the in-services. Staff who missed the education due to PTO or FMLA will be required to receive the education prior to the end of their second shift back to work. During new employee orientation, the Eckerd Living Center Management Team will ensure that all new employees receive education on the proper storage of medications and on the policy outlining the expiration dates for medications, including the need to be alert for manufacturer's recommendations, which may differ from the policy. The Pharmacy Manager instructed pharmacy staff on the importance of applying applicable "opened" and "expired" stickers on all multi-dose medications. Additionally, pharmacy staff was educated to alert nursing staff		

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F 431	<p>Continued From page 3</p> <p>2. B. Also in the medication cart was a tube of Extra Protective Cream (EPC), a barrier protective cream used to protect the skin from incontinence, with a manufacturer expiration date of May 2013. The EPC cream was not labeled for a specific resident.</p> <p>An interview on 06/30/15 at 4:36 PM with Nurse #2 about who was responsible for checking expiration dates on medications revealed the night nurse was assigned to check the medication carts once a month. Nurse #2 stated the resident for whom the Q-Tussin was ordered had not received a dose in a long time and whenever she administered the medication to him she used the floor stock of Q-Tussin cough syrup.</p> <p>An interview on 07/01/15 at 4:12 PM with the DON revealed the Pharmacy sent a checklist each month that the night nurse on each medication cart completed that indicated expired meds were removed from the cart and refrigerator temperatures were checked. The DON was asked about expired medications being in the medication cart and she stated the containers of Q-Tussin labeled for specific residents weren't used any longer and EPC cream wasn't used in the facility so she didn't know why they were in the medication cart. When asked about her expectation for expired medications, she stated she expected expired meds or out of date meds to be removed from the cart by the expiration date.</p>	F 431	<p>whenever manufacturer's recommendations differ from the expiration dates outlined in facility policy. This instruction was provided at a pharmacy staff meeting on 7/20/15. Sign-in logs confirmed attendance at the education sessions. Staff who missed the education due to PTO or FMLA will be required to receive the education prior to the end of their second shift back to work. In the in-services conducted 7/19/15 - 7/23/15, the Director of Nursing instructed nursing staff on the appropriate completion of the stickers on all multi-dose medications, which includes indicating the opened date and applicable expiration date. Nursing was instructed that the expiration date for a specific medication may differ from the expiration date outlined in facility policy, based on manufacturer's recommendations. Sign-in logs confirmed attendance at the education sessions. Staff who missed the education due to PTO or FMLA will be required to receive the education prior to the end of their second shift back to work. During new employee orientation, the Eckerd Living Center Management Team will ensure that all new employees receive education on the proper storage of medications and on the policy outlining the expiration dates for medications, including the need to be alert for manufacturer's</p>		

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F 431	Continued From page 4	F 431	<p>recommendations, which may differ from the plan of policy.</p> <p>The Pharmacy Manager instructed pharmacy staff on the importance of applying applicable "opened" and "expired" stickers on all multi-dose medications. Additionally, pharmacy staff was educated to alert nursing staff whenever manufacturer's recommendations differ from the expiration dates outlined in facility policy. This instruction was provided at a pharmacy staff meeting on 7/20/15. Sign-in logs confirmed attendance at the education sessions. Staff who missed the education due to PTO or FMLA will be required to receive the education prior to the end of their second shift back to work. In the in-services conducted 7/19/15 - 7/23/15, the Director of Nursing instructed nursing staff on the appropriate completion of the stickers on all multi-dose medications, which includes indicating the opened date and applicable expiration date. Nursing was instructed that the expiration date for a specific medication may differ from the expiration date outlined in facility policy, based on manufacturer's recommendations.</p> <p>Sign-in logs confirmed attendance at the education sessions. Staff who missed the education due to PTO or FMLA will be required to receive the education prior to</p>		

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F 431	Continued From page 5	F 431	the end of their second shift back to work. Monitoring/Responsible Person: To ensure ongoing monitoring and sustainability of improvements, the Director of Nursing or designee will inspect the medication carts and storage areas on a weekly basis for the period of August 1st through November 30th 2015, to ensure that all medications are within their use-by dates and that all multi-dose medications are labeled appropriately. The findings of this quality assurance check will be reported to nursing staff and leadership at their monthly meetings. Findings will also be reviewed every other month starting 7/20/15 by the Quality Assurance and Performance Improvement Committee and acted upon as required.		