

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

PRINTED: 02/07/2013
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 345477	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 01/24/2013
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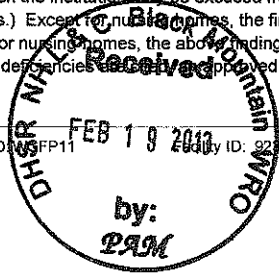
NAME OF PROVIDER OR SUPPLIER THE OAKS AT SWEETEN CREEK	STREET ADDRESS, CITY, STATE, ZIP CODE 3864 SWEETEN CREEK RD ARDEN, NC 28704
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(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETION DATE
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F 431 SS=D	<p>483.60(b), (d), (e) DRUG RECORDS, LABEL/STORE DRUGS & 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:</p>	F 431		
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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE <i>B. Welch</i>	TITLE Ex. Dir.	(X6) DATE 2/15/13
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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 corrected and approved plan of correction is requisite to continued program participation.



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F 431	<p>Continued From page 1</p> <p>Based on observation, record review and staff interviews, the facility failed to discard an opened medication vial per manufacturer's recommendation for 1 of 1 residents (Resident #3). Findings included:</p> <p>A review of the facility's policy entitled "Storage and Expiration Dating of Medications, Biologicals, Syringes and Needles", revised on 08/09/11, revealed once any medication or biological package is opened, the facility should follow manufacturer/supplier guidelines with respect to expiration dates for opened medications. A review of prescribing information by the manufacturer of Novolog insulin, revised June 2011, indicated after initial use a vial may be kept for up to 28 days.</p> <p>A review of Resident #3's medical record revealed an endocrinologist order dated 01/08/13 for 10 units of Novolog insulin by subcutaneous (SQ) injection before breakfast. A review of Resident #3's medication administration record (MAR) for January 2013 revealed her receiving Novolog insulin as ordered at breakfast time on all dates through 01/23/13.</p> <p>An observation on 01/24/13 at 9:12 AM revealed Nurse #1 reviewing Resident #3's medication administration record (MAR). Nurse #1 obtained Resident #3's opened vial of Novolog insulin from a plastic pill bottle with the resident's name and pharmacy drug label. The cap of the pill bottle was dated 12/21/12. The pill bottle had a yellow warning sticker, also dated 12/21/12, stating discard after 28 days. A date on the actual vial of insulin was illegible. Nurse #1 inserted an insulin syringe with needle into the vial and drew up 10</p>	F 431	<ol style="list-style-type: none"> 1. Resident #3 suffered no harm. The expired vial of insulin was immediately discarded and replaced with a new unexpired vial of insulin by the facility's Director of Clinical Services. 2. The facility's Director of Clinical Services inspected current residents' medications for administration to insure that any expired medications were discarded. The facility's DCS/Nurse Manager re-educated licensed nursing staff on the facility's policy and procedure for medication storage to insure that medications for administration are discarded according to their dates of expiration. 3. The facility's Director of Clinical Services/Nurse Manager will conduct Quality Improvement (QI) monitoring of medications for administration to insure that they are discarded according to their dates of expiration. QI monitoring will be conducted 5 x weekly for 4 weeks, then 3 x weekly for 4 weeks, then 1 x weekly for 4 weeks, and then 1 x monthly for 9 months. 4. The facility's Director of Clinical Services/Nurse Manager will report results of QI monitoring to the Quality Assurance/Performance Improvement Committee monthly x 12 months for continued compliance and/or revision. 	2-21-13.

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F 431	<p>Continued From page 2</p> <p>units of Novolog insulin. Upon locking of the medication cart, Nurse #1 was asked by the surveyor not to administer the insulin to the resident.</p> <p>An interview on 01/24/12 at 9:15 AM with Nurse #1 revealed her confirmation of the 12/21/12 dates on the pill bottle cap and yellow warning sticker on the pill bottle. Nurse #1 stated dates on opened vials should be checked before drawing up medication and not given after 28 days as stated on the label for Novolog insulin. Nurse #1 stated that 12/21/12 indicated the date the vial of Novolog insulin was originally opened for use and that the 28 day limit for use would start from this date.</p> <p>An observation on 01/24/13 at 9:31AM revealed Nurse #1 discarding the opened vial of Novolog insulin into the sharps container and keeping aside the plastic pill container with lid for review by her Unit Manager. A new unopened vial of Novolog insulin was obtained from the medication room refrigerator, labeled by Nurse #1 with the date of 01/24/13 on the vial, the yellow warning sticker on the accompanying pill bottle and the cap of the pill bottle. Nurse #1 opened the new vial of Novolog insulin, drew up 10 units and administered it to Resident #3 in her right abdomen.</p> <p>An interview on 01/24/13 at 9:52 AM with the Unit Manager revealed the expectation of nurses to discard Novolog insulin vials after 28 days of being opened. Upon reviewing the plastic pill container and lid that contained the old vial of Novolog insulin, the Unit Manager stated that Resident #3's opened vial dated 12/21/12 should</p>	F 431			

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F 431	<p>Continued From page 3 have been discarded after 01/18/13.</p> <p>An interview on 01/24/13 at 10:30 AM with the Director of Nursing (DON) revealed the consultant pharmacy technician checked medication carts for expired medications once a month. The DON could not recall the exact date of the last visit by the pharmacy technician but stated it had already occurred before 01/18/13 when Resident #3's opened vial of Novolog insulin should have been discarded. The DON stated her expectation that nurses have ultimate responsibility to check expiration dates of medications before administration.</p>	F 431		
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