STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	345011	A. BUILDING _____ B. WING _____	C 02/01/2019

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
ACCORDIUS HEALTH AT LEXINGTON	279 BRIAN CENTER DRIVE LEXINGTON, NC 27292

(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 755 SS=D	Pharmacy Srvcs/Procedures/Pharmacist/Records CFR(s): 483.45(a)(b)(1)-(3) §483.45 Pharmacy Services The facility must provide routine and emergency drugs and biologicals to its residents, or obtain them under an agreement described in §483.70(g). The facility may permit unlicensed personnel to administer drugs if State law permits, but only under the general supervision of a licensed nurse. §483.45(a) Procedures. A facility must provide pharmaceutical services (including procedures that assure the accurate acquiring, receiving, dispensing, and administering of all drugs and biologicals) to meet the needs of each resident. §483.45(b) Service Consultation. The facility must employ or obtain the services of a licensed pharmacist who- §483.45(b)(1) Provides consultation on all aspects of the provision of pharmacy services in the facility. §483.45(b)(2) Establishes a system of records of receipt and disposition of all controlled drugs in sufficient detail to enable an accurate reconciliation; and §483.45(b)(3) Determines that drug records are in order and that an account of all controlled drugs is maintained and periodically reconciled. This REQUIREMENT is not met as evidenced by: Based on record review, observations, and resident interviews the facility failed to have pain medication available for 1 of 3 residents reviewed for pain management (Resident #1).	F 755	Accordius at Lexington acknowledges receipt of the Statement of Deficiencies and purpose of this Plan of Correction to the extent the summary of findings is	3/1/19

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE | (X6) DATE

Electronically Signed | 02/18/2019

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F 755	Continued From page 1 Findings included: Resident #1 was originally admitted to the facility on 1/18/19 with the current diagnoses of cellulitis, chronic pain syndrome and hypertension. Review of the Medication Administration Record revealed resident #1 was last given Tramadol (a medication for pain) on 1/23/19 and Tylenol (a medication for pain) on 1/19/18. Resident's #1 Minimum Data Set dated 1/25/18 revealed the resident was cognitively intact and required extensive assistance with bed mobility, dressing and personal hygiene. The resident had occasional pain and was receiving pain medication. The resident had received an opioid medication for 4 days. Resident's #1 medical record revealed the resident was discharged to the hospital on 1/25/19 and returned to the facility on 1/30/19. Physician's orders dated 1/30/19 revealed resident #1 had an order for 50 milligrams (mg) of Tramadol every 6 hours for pain as needed and 1000 mg of Tylenol Extra Strength ordered every 8 hours as needed for pain. The resident's baseline care plan dated 2/1/19 revealed resident #1 had pain present. Nurse #1 was interviewed on 2/1/19 at 8:21 AM. She stated when resident #1 was initially admitted, the doctor was called, and the facility obtained a prescription for pain medication. The doctor wrote for Tramadol and Tylenol to be given. The Tramadol was scheduled to be given	F 755	factually correct in order to maintain compliance with applicable rules and provisions of quality of care of residents. The Plan of Correction is submitted as written allegation of compliance. Preparation and submission of this Plan of Correction is in response to the CMS 2567 from the survey conducted on January 31-February 1, 2019. Accordius at Lexington response to the Statement of Deficiencies and Plan of Correction does not denote agreement with the Statement of Deficiencies nor does it constitute an admission that any deficiency is accurate. Furthermore, Accordius at Lexington reserves the right to refute any deficiency on the Statement of Deficiencies through Informal Dispute Resolution, formal appeal and/or other administrative or legal procedures. F755 1. Facility failed to have pain medication available for Resident #1. Facility obtained pain medication for Resident #1 on 2/1/19. 2. Audit of all residents on controlled substance(s) conducted to ensure the medication is available. 3. Licensed staff educated to notify physician if controlled substance(s) not available. Licensed staff will be educated on the six rights of medication administration.	

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F 755	Continued From page 2 every 6 hours as needed. Resident #1 was interviewed on 2/1/19 at 8:45 AM. She stated she asked for Tramadol pain medication last night around 12:00 AM. She stated the (night) nurse told her the medication was not at the facility yet. She stated she was still waiting on the pain medication. She stated she has chronic pain in left leg and back. She revealed her pain level was an 8 out of 10 last night and was an 8 out of 10 this morning. She stated she had not asked the day shift nurse for pain medication today. She also stated it was common for the facility not to have her pain medication available. Nurse #1 entered the resident's room on 2/1/18 at 8:48 AM. Nurse #1 asked Resident #1 if she was having pain after administrating resident's #1 roommate medications. The resident answered "yes" and stated she wanted "Tramadol" for pain, not Tylenol. Nurse #1 was observed to re-enter resident #1 room on 2/1/18 at 9:00 AM to give her pain medication and scheduled morning medications. Nurse #1 exited resident #1 room on 2/1/18 at 9:02 AM. She stated after exiting the room, she had given the resident Tramadol for pain. She stated the resident had not had Tramadol medication since she was back at the facility. The nurse stated resident #1 pain level was an 8 out of 10 this morning. She stated she didn't work last night and the (night) nurse didn't mention anything to her about concerns with the pain medication. She stated resident #1 could receive Tramadol every 6 hours for pain. She stated she had to borrow another's resident's Tramadol	F 755	Nurse Managers will audit the declining narcotic sheets for residents prescribed a controlled substance(s). The Nurse Manager will be notified if a hard script is needed and ensure that the controlled substance(s) was ordered and delivered to the facility. Director of Nursing and/or Nurse Managers will monitor all residents prescribed controlled substance(s) to ensure the medication is available. The audit will occur weekly x 12 weeks. 4. Data obtained during the audit process will be analyzed for patterns and trends and reported to QAPI by the Director of Nursing monthly x 3 months. At that time, the QAPI committee will evaluate the effectiveness of the interventions to determine if continued auditing necessary to maintain compliance.	

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medication to give to resident #1 this morning because resident #1 did not have any Tramadol in the medication cart. Nurse #1 stated she wasn't sure why the resident didn't have any pain medication in the medication cart since she was re-admitted from the hospital. She also stated nurses could borrow pain medications from other residents if it was approved by the Director of Nursing (DON). She stated she got approval from the DON to use another resident's Tramadol medication this morning because resident #1 was having pain. She stated she borrowed the Tramadol medication from resident #2 this morning. She also added, resident #1 had plenty of her regular medications available this morning. She stated the pharmacy usually came between 12:00 AM to 2:00 AM and 2:00 AM to 4:00 AM to delever medications to the facility.

The medication card from the medication cart for resident #2 was reviewed on 2/1/19 at 9:02 AM. It stated 50 mg of Tramadol (1 tablet) was to be given twice daily to resident #2.

Nurse #3 (night shift nurse) was attempted to be contacted on 2/1/19 but attempts were unsuccessful.

The Director of Nursing was interviewed on 2/1/19 at 10:40 AM. She stated resident #1 was alert and oriented. She also stated the resident had acute pain in her knee at times. She stated the pharmacy usually made their last drop off at the facility just after midnight. It was not reported to her that the (night) nurse had concerns about the resident's medications. She stated resident 1 could get Tramadol every 6 hours as needed for pain. She stated they also had a backup pharmacy available if they need medication

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F 755	Continued From page 4	F 755		

urgently. She stated this situation was hard because the resident was having pain and the pain medication was not here this morning. She stated the nurses would not usually give another resident's medication to another resident if they were out of a medication. She stated they were trying to do what was best for the resident because resident #1 was in pain. She stated she called the pharmacy and told them another resident's pill had been used for resident #1 so the medication used could be replaced. She stated this was the first time the facility had done this. She stated nurse #1 told her she had placed the prescription in the pharmacy's tote on 1/30/19 so the medication would be refilled by the pharmacy. The medication should have come to the facility the next day (1/31/19).

The pharmacy manager was interviewed on 2/1/19 at 12:41 PM. She stated they have 24-hour coverage for the facility and were physically available at the pharmacy until midnight. She stated the facility could call them if they needed a medication right away. She stated the facility could have used the backup pharmacy to get medications. She stated they sent resident #1 Tramadol medication to the facility on 1/19/19 and were also sending it today. She stated she received the prescription for Tramadol today (2/1/19) at 10:14 AM. She stated the pharmacy had 3 deliveries a day to the facility at 1:30 PM, 8:30 PM and 12:00 AM. She added, she had never heard of this facility using other resident's medications to give to other residents when they were out.

The Administrator was interviewed on 2/1/19 at 4:26 PM. He stated he personally picked up resident #1 Tramadol medication from the backup

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F 755	Continued From page 5 pharmacy today. He stated he would expect for residents' pain to be managed appropriately and for medications to be delivered to the facility.	F 755		