

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>HAL035022</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>02/20/2015</b>
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NAME OF PROVIDER OR SUPPLIER  <b>AUTUMN WIND ASSISTED LIVING OF LOUISBI</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>361 LEONARD ROAD LOUISBURG, NC 27549</b>
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D 000	Initial Comments	D 000		
D 074	<p>10A NCAC 13F .0306(a)(1) Housekeeping And Furnishings</p> <p>10A NCAC 13F .0306 Housekeeping And Furnishings (a) Adult care homes shall: (1) have walls, ceilings, and floors or floor coverings kept clean and in good repair;</p> <p>This Rule is not met as evidenced by: Based on observation and interviews, the facility failed to assure walls, floors and baseboards were kept clean and in good repair in 3 of 3 hallways.</p> <p>The findings are:</p> <p>Observation of Hall 200 on 2/19/15 between 12:00 p.m. -12:30 p.m. revealed the following: -Baseboards in the hallway had peeled paint. -Walls needed re-painting. -Tile floor was scuff and dulled.</p> <p>Observation of Hall 300 on 2/19/15 between 12:30 p.m.-1:00 p.m. revealed the following: -Baseboards in the hallway had peeled paint. -Walls needed re-painting. -Tile floor was scuff and dulled.</p> <p>Observation of Hall 100 on 2/20/15 between 3:30 p.m. -3:45 p.m. revealed the following: -Baseboards in the hallway had peeled paint. -Walls needed re-painting -Tile floor was scuff and dulled.</p>	D 074		

Division of Health Service Regulation LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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D 074	<p>Continued From page 1</p> <p>Interview with the Maintenance Director on 2/20/15 at 3:15 p.m. revealed:</p> <ul style="list-style-type: none"> <li>-He was aware the walls and baseboard needed to be repainted.</li> <li>-He was also aware the hallway floors needed to be buffed.</li> <li>-He would paint the walls and baseboards in the hallways when the weather was warmer.</li> <li>-He wanted to do all the painting at one time.</li> <li>-He would buff the hallway floors when the weather was warmer.</li> <li>-He reported all needed repairs to the Administrator on Wednesday.</li> <li>-He did not have a scheduled time for painting and buffing the floors.</li> </ul> <p>Interview with the Administrator on 2/20/15 at 3:40 p.m. revealed:</p> <ul style="list-style-type: none"> <li>-She was aware the walls and baseboards needed to be re-painted.</li> <li>-She was also aware the hallways' floors needed to be buffed.</li> <li>-The Maintenance Director would paint the hallways and baseboards when it gets warmer outside.</li> <li>-The Maintenance Director would buff the hallways' floors when it gets warmer outside.</li> <li>-The Maintenance Director was responsible for making rounds every Wednesday and reporting needed repairs to the Administrator.</li> <li>-The Administrator was responsible for reporting needed repairs to the facility's owner every Wednesday.</li> <li>-No date had been scheduled for painting the walls and baseboards or buffing the floors.</li> <li>-No information was given as to how long the walls or baseboards would be painted or floors would be buffed.</li> </ul>	D 074		

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D 273 D 273	<p>Continued From page 2</p> <p>10A NCAC 13F .0902(b) Health Care</p> <p>10A NCAC 13F .0902 Health Care (b) The facility shall assure referral and follow-up to meet the routine and acute health care needs of residents.</p> <p>This Rule is not met as evidenced by: Based on record review and interviews, the facility failed to follow-up on a physician's order for a heating pad for 1 (#1) of 5 sampled residents who had chronic back pain and a lumbar sprain.</p> <p>These are the findings:</p> <p>Review of Resident #1's current FL-2 dated 3/28/14 revealed: -Diagnoses included degenerative joint disease (DJD) and arthritis. -Resident #1 had an order for Celebrex (pain medication) 200 mg by mouth daily.</p> <p>Review of Resident #1's record revealed a prescription dated 12/18/14 for Tramadol (pain medication) 50 mg 1/2 tablet by mouth three times a day.</p> <p>Review of a physician's note dated 1/15/15 revealed: -Resident #1 complained of back pain and a lumbar strain. -An order was written for heating pad for back pain as needed. -An order was also written for Tramadol (pain medication) as needed.</p>	D 273 D 273		

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D 273	<p>Continued From page 3</p> <p>Interview with Resident #1 on 2/20/15 at 2:35 p.m. revealed:                      -She had chronic back pain.                      -She took pain medications three times a day.                      -Her pain level was 10 on 1/15/15, but today (2/20/15) her pain level was a 3 (pain is noticeable and distracting, however you can get used to it and adapt), but not constantly. (pain level 0 - 10, with 0 being no pain and 10 being the worst pain you can imagine)                      -The doctor wrote her an order for a heating pad last month, but she did not have one yet.                      -She had not asked her family member to bring a heating pad to the facility.                      -She had not told her family member about the doctor writing an order for a heating pad.</p> <p>Telephone interview with Resident #1's family member on 2/20/15 at 3:22 p.m. revealed:                      -She was not aware Resident #1 had an order for a heating pad until about 30 minutes ago.                      -The Resident Care Coordinator (RCC) called her on 2/20/15 at 2:58 p.m. and told her Resident #1 had an order for a heating pain.                      -She would have brought a heating pad to the facility, if she had known.                      -Staff should have made me aware of the order for a heating pad for Resident #1.</p> <p>Interview with the Resident Care Coordinator (RCC) on 2/20/15 at 3:50 p.m. revealed:                      -She was aware that a physician had written an order for a heating pad for Resident #1 and pain medication on 1/15/15.                      -She had not clarified the orders for Tramadol or heating pad with Resident #1's primary care physician.                      -The Tramadol order did not have the dosage, frequency of administration or indication for use.                      -The heating pad did not have the frequency of</p>	D 273		

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D 273	<p>Continued From page 4</p> <p>use or indication of use.</p> <ul style="list-style-type: none"> <li>-The RCC told Resident #1 about the order for a heating pad on 1/15/15.</li> <li>-Resident #1 stated, she had a heating pad at home, and she would get her family member to bring it to the facility.</li> <li>-She forgot to asked Resident #1, if she had told her family member to bring a heating pad to the facility.</li> <li>-The RCC thought she had notified Resident #1's family member about the order for a heating pad.</li> <li>-The RCC called Resident #1's family member on 2/20/15 at 2:50 p.m. and told her resident had an order for a heating pad.</li> </ul> <p>The facility's monitoring plan in place for ordering residents' supplies is RCC/Supervisor would fax the order to the medical supply store on the 1st day, follow-up with a phone call on the 2nd day and repeat the process every 2-3 days until supply is available.</p> <p>Telephone interview with Resident #1's physician on 2/20/15 at 4:42 p.m. revealed:</p> <ul style="list-style-type: none"> <li>-She was not aware of the heating pad order for Resident #1.</li> <li>-Another physician covering for her wrote the order for a heating pad for Resident #1.</li> <li>-She agreed with the heating pad order since the resident was still having pain.</li> </ul> <p>Interview with the Administrator on 2/20/15 at 4:00 p.m. revealed:</p> <ul style="list-style-type: none"> <li>-The Administrator was not aware Resident #1 had an order for a heating pad.</li> <li>-The Resident Care Coordinator (RCC) /Supervisor should have clarified the heating pad and the Tramadol order for Resident #1 with her primary care physician.</li> <li>-The Tramadol order did not have the dosage, frequency of administration or indication for use.</li> </ul>	D 273		

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D 273	Continued From page 5  -The heating pad did not have the frequency of use or indication of use. The facility's monitoring plan in place for ordering residents' supplies is RCC/Supervisor would fax information to the supply store, follow-up with a call and document in the chart on the 1st day, repeat the process on the 2nd day and notify the Administrator on the 3rd day, if supply is not available.	D 273		