

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL024015	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 01/30/2015
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NAME OF PROVIDER OR SUPPLIER TABOR COMMONS	STREET ADDRESS, CITY, STATE, ZIP CODE 703 ELIZABETH STREET TABOR CITY, NC 28463
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D 000	Initial Comments	D 000		
D 358	<p>10A NCAC 13F .1004(a) Medication Administration</p> <p>10A NCAC 13F .1004 Medication Administration (a) An adult care home shall assure that the preparation and administration of medications, prescription and non-prescription, and treatments by staff are in accordance with:</p> <p>(1) orders by a licensed prescribing practitioner which are maintained in the resident's record; and</p> <p>(2) rules in this Section and the facility's policies and procedures.</p> <p>This Rule is not met as evidenced by: Based on observation, interview, and record review, the facility failed to assure medications were administered as ordered by the licensed prescribing practitioner for 1 of 8 residents (#6) observed during the medication pass which included errors with the administration of inhalers for breathing problems. The findings are:</p> <p>The medication error rate was 7% as evidenced by the observation of 2 errors out of 27 opportunities during the 9:00 a.m. and 11:00 a.m./12:00 noon medication passes on 01/29/15.</p> <p>Review of Resident #6's record revealed:</p> <ul style="list-style-type: none"> - Current FL-2 dated 07/11/14 included diagnoses of chronic obstructive pulmonary disease, dementia, bipolar disorder, history of stroke, and history of fibula and pelvis fracture. - FL-2 dated 07/11/14 included an order for Advair 250/50 mcg inhale 1 puff twice daily. (Advair is used to treat chronic obstructive pulmonary disease and prevent flare ups.) 	D 358		

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

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D 358	<p>Continued From page 1</p> <ul style="list-style-type: none"> - Physician's order dated 11/04/14 for Combivent inhale 1 puff 4 times daily. (Combivent is used to treat chronic obstructive pulmonary disease by relaxing the muscles in the airways and increasing airflow to the lungs.) <p>Observation during the 12:00 noon medication pass on 01/29/15 revealed:</p> <ul style="list-style-type: none"> - Medication aide administered Advair 250/50mcg 1 puff to Resident #6 at 11:21 a.m. - Medication aide did not administer any Combivent to Resident #6 during the 12:00 noon medication pass. <p>Review of the January 2015 medication administration record (MAR) revealed:</p> <ul style="list-style-type: none"> - Advair 250/50mcg 1 puff twice daily was scheduled to be administered at 8:00 a.m. and 8:00 p.m. - Advair was not scheduled at 12:00 noon. - Resident #6 had already received the morning dose of Advair at 8:00 a.m. on 01/29/15. - Combivent 1 puff 4 times daily was scheduled to be administered at 8:00 a.m., 12:00 noon, 4:00 p.m., and 8:00 p.m. - Resident #6 had received the morning dose of Combivent at 8:00 a.m. on 01/29/15. <p>Interview with the medication aide on 01/29/15 at 11:28 a.m. revealed:</p> <ul style="list-style-type: none"> - She was nervous during the medication pass. - She picked up the wrong inhaler from the medication cart. - She made a mistake and should have given the Combivent inhaler instead of the Advair inhaler at 12:00 noon. - Resident #6 already had Advair at the scheduled time that morning at 8:00 a.m. - Advair was not due again until 8:00 p.m. - She would do a medication error report and 	D 358		

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D 358	<p>Continued From page 2</p> <p>notify the physician.</p> <p>Interview with the Resident Care Coordinator (RCC) on 01/29/15 at 2:00 p.m. revealed:</p> <ul style="list-style-type: none"> - Staff had been trained to read the MARs and check the medication labels 3 times before administering medications. - A medication error report had been sent to the physician. <p>Interview with Resident #6 on 01/29/15 at 3:30 p.m. revealed:</p> <ul style="list-style-type: none"> - She gets three different inhalers but she did not know the name of the inhalers. - She had received the "purple" inhaler (Advair comes in a purple inhalation device.) twice already today. - She usually got the purple inhaler at night. - She denied any current problems with shortness of breath. 	D 358		
D935	<p>G.S.§ 131D-4.5B(b) ACH Medication Aides; Training and Competency</p> <p>G.S. § 131D-4.5B (b) Adult Care Home Medication Aides; Training and Competency Evaluation Requirements.</p> <p>(b) Beginning October 1, 2013, an adult care home is prohibited from allowing staff to perform any unsupervised medication aide duties unless that individual has previously worked as a medication aide during the previous 24 months in an adult care home or successfully completed all of the following:</p> <p>(1) A five-hour training program developed by the Department that includes training and instruction in all of the following:</p> <p>a. The key principles of medication</p>	D935		

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D935	<p>Continued From page 3</p> <p>administration.</p> <p>b. The federal Centers for Disease Control and Prevention guidelines on infection control and, if applicable, safe injection practices and procedures for monitoring or testing in which bleeding occurs or the potential for bleeding exists.</p> <p>(2) A clinical skills evaluation consistent with 10A NCAC 13F .0503 and 10A NCAC 13G .0503.</p> <p>(3) Within 60 days from the date of hire, the individual must have completed the following:</p> <p>a. An additional 10-hour training program developed by the Department that includes training and instruction in all of the following:</p> <ol style="list-style-type: none"> 1. The key principles of medication administration. 2. The federal Centers of Disease Control and Prevention guidelines on infection control and, if applicable, safe injection practices and procedures for monitoring or testing in which bleeding occurs or the potential for bleeding exists. <p>b. An examination developed and administered by the Division of Health Service Regulation in accordance with subsection (c) of this section.</p> <p>This Rule is not met as evidenced by: Based on interviews and record reviews, the facility failed to assure 1 of 4 staff (Staff B) who began performing medication aide duties after October 1, 2013 met the requirements to administer medications. The findings are:</p> <p>Review of Staff B's personnel record revealed:</p> <ul style="list-style-type: none"> - She was hired as a Personal Care Aide on 6/15/14. - She completed her medication clinical skills validation on 11/13/14. 	D935		

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D935	<p>Continued From page 4</p> <ul style="list-style-type: none"> - No documentation of her passing the medication exam. - No documentation of the 5 hour/10 hour or 15 hour state medication training. <p>Review of the January 2015 medication administration record (MAR) revealed Staff B had administered medications on 1/17/15, 1/18/15, 1/22/15 1/23/15, 1/25/15, 1/28/15 and 1/29/15.</p> <p>Review of the staff schedule dated 1/23/15 through 2/5/15 revealed:</p> <ul style="list-style-type: none"> - Staff B was scheduled to work 7:00pm-7:00am as supervisor in charge on the following dates: - 1/23/15, 1/25/15, 1/28/15, 1/29/15, 1/30/15, 1/31/15, 2/4/15 and 2/5/15.. <p>Interview with the Administrator on 1/30/15 at 12:25 p.m. revealed:</p> <ul style="list-style-type: none"> - She was not aware of the 5/ 10/ 15 hour trainings required for medication aides. - Staff B had not passed the medication exam. - Staff B was hired as a patient care aide in June 2014. - Staff B had received medication training from a Community College, she was under the impression that would meet the requirement for medication training. - Staff B had been assessed and checked off on medication clinical skills by a Registered Nurse before she started medication administration. - Staff B had worked as a Medication Aide and administered mediation independently since 1/23/15. <p>Interview with the Owner/President on 1/30/15 at 1:35pm revealed:</p> <ul style="list-style-type: none"> - Staff B had been working as a medication 	D935		

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D935	Continued From page 5 aide. - She had been checked off on the medication checklist. - Staff B had taken medication training at a community college (Owner/President) was under the understanding would meet the requirement. - Staff B had not had the state approved 5/10/15 hour training prior to administering medications. - Staff B had not passed the state approved medication exam prior to administering medications. Staff B was not available for interview.	D935		