

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: FCL082021	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 09/17/2015
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NAME OF PROVIDER OR SUPPLIER GREEN ACRES FAMILY CARE HOME	STREET ADDRESS, CITY, STATE, ZIP CODE 631 WILLIAMS STREET CLINTON, NC 28328
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C 000	Initial Comments The Adult Care Licensure Section conducted an annual survey on September 17, 2015.	C 000		
C 034	<p>10A NCAC 13G .0302(n) Design and Construction</p> <p>10A NCAC 13G .0302 Design and Construction (n) The home shall have current sanitation and fire and building safety inspection reports which shall be maintained in the home and available for review.</p> <p>This Rule is not met as evidenced by: Based on observations, interviews and record reviews, the facility failed to assure current sanitation inspection reports were completed and available for review.</p> <p>The findings are:</p> <p>Observations of the facility during the initial tour on 09/17/2015 revealed: -A black substance covered the wooden wall molding near the base of the bathtub. This substance was easily wiped off with a paper towel. -There was a spongy area in the floor near the bath tub when stepped on. -Numerous flies and small black flying insects were in the facility dining room. -The dining room table and chairs were sticky and had crumbs in between the slats of the chair back.</p> <p>Interview with the Administrator on 09/17/2015 at 10:30am revealed: -The Administrator could not locate the most recent sanitation inspection report.</p>	C 034		

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

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C 034	<p>Continued From page 1</p> <ul style="list-style-type: none"> -The Administrator was aware a copy of the most recent sanitation report must be available for review at all times. <p>Telephone interview with the local Environmental Health Supervisor on 09/17/2015 at 11:15am revealed:</p> <ul style="list-style-type: none"> -The last sanitation inspection for the facility was done 04/14/2014. -The facility received 13 demerits, with no "6" point items, which is an "approved" rating. -Unless a facility called and requested an inspection, the inspections could be done any time during the calendar year. -The facility was responsible to call the health inspector to request an inspection. -The facility owner had made a visit to the health department on today (09/17/2015) for a copy of the last sanitation inspection report. -The supervisor was not aware of any previous request from the facility for the sanitation inspection to be completed. -The supervisor did not consider the facility's inspection late since it could be done anytime within a calendar year. -If a facility wanted an inspection by a certain time of the year, they should call and make a request. -Visits to the facility for sanitation inspections were unannounced but once a request was made, it usually would be done within 30 days of the request. 	C 034		
C 375	<p>10A NCAC 13G .1009(a)(1) Pharmaceutical Care</p> <p>10A NCAC 13G .1009 Pharmaceutical Care (a) The facility shall obtain the services of a licensed pharmacist, prescribing practitioner or registered nurse for the provision of pharmaceutical care at least quarterly for</p>	C 375		

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C 375	<p>Continued From page 2</p> <p>residents or more frequently as determined by the Department, based on the documentation of significant medication problems identified during monitoring visits or other investigations in which the safety of the residents may be at risk. Pharmaceutical care involves the identification, prevention and resolution of medication related problems which includes at least the following: (1) an on-site medication review for each resident which includes at least the following: (A) the review of information in the resident's record such as diagnoses, history and physical, discharge summary, vital signs, physician's orders, progress notes, laboratory values and medication administration records, including current medication administration records, to determine that medications are administered as prescribed and ensure that any undesired side effects, potential and actual medication reactions or interactions, and medication errors are identified and reported to the appropriate prescribing practitioner; and, (B) making recommendations for change, if necessary, based on desired medication outcomes and ensuring that the appropriate prescribing practitioner is so informed; and, (C) documenting the results of the medication review in the resident's record;</p> <p>This Rule is not met as evidenced by: Based on interviews and record reviews the facility failed to ensure quarterly medication reviews were completed by a licensed pharmacist, prescribing practitioner or registered nurse for 3 of 3 residents (Resident #1, #2, #3) sampled.</p> <p>The findings are: 1. Review of Resident #1's current FL-2 dated</p>	C 375		

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C 375	<p>Continued From page 3</p> <p>11/25/2014 revealed: -Resident #1 was admitted to the facility on 10/16/2012. -Diagnoses included Schizophrenia, Diabetes Mellitus Type II, Hypertension and Hyperlipidemia. - Medications prescribed for Resident #1 on the 11/25/2014 FL-2 included ordered included Bzotropine (used to treat symptoms of Parkinson's Disease), Depakote (used to treat seizures and behavioral disorders), Haloperidol (used to treat behaviors), Lorazepam (used to treat anxiety), Enalapril (used to treat high blood pressure), Hydrochlorothiazide (used to treat high blood pressure), Janumet (used to treat diabetes), Simvastatin (used to treat high cholesterol), Ammonium Lactate Cream (topical medication used to treat skin disorders), and Ketoconazole Cream (topical cream used to treat fungal skin disorders).</p> <p>Review of pharmacy review reports revealed review dates included 02/20/2014, 08/14/2014 with the most recent on 05/22/15.</p> <p>Refer to interview with the Administrator on 09/17/2015 at 11:30am.</p> <p>Refer to interview with the Pharmacy Provider Representative on 09/17/2015 at 3:25pm.</p> <p>Refer to interview with the Administrator on 09/17/2015 at 4:45pm.</p> <p>2. Review of Resident #2's current FL-2 dated 08/06/2015 revealed: -Resident #2 was originally admitted to the facility on 01/04/2013 and readmitted to the facility on 07/15/2015 from hospital. -Resident #2's diagnosis was listed as</p>	C 375		

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C 375	<p>Continued From page 4</p> <p>Schizophrenia. -Medications prescribed for Resident #2 on the 08/06/2015 FL-2 included Duloxetine (used to treat depression), Fluphenazine (used to treat psychotic behaviors), Mirtazapine (used to treat depression), and Benztropine (used to treat symptoms of Parkinson's Disease).</p> <p>Review of pharmacy review reports revealed pharmacy review dates for 08/14/2014, 02/20/2015 and 05/22/2015.</p> <p>Refer to interview with the Administrator on 09/17/2015 at 11:30am.</p> <p>Refer to interview with the Pharmacy Provider Representative on 09/17/2015 at 3:25pm.</p> <p>Refer to interview with the Administrator on 09/17/2015 at 4:45pm.</p> <p>3. Review of Resident #3's current FL-2 dated 05/12/2015 revealed: -Resident #3 was admitted on 10/07/2013. -Diagnoses included Schizoaffective Disorder, Anemia, Constipation and Heartburn. -Medications prescribed for Resident #3 on the 05/12/2015 FL-2 included Prilosec (used to treat gastric reflux), Cogentin (used to treat symptoms of Parkinson's Disease), Colace (used to treat constipation), Abilify (used to treat pschotic behaviors), Ibuprofen (used to treat pain), Zaditor (used to treat allergies), Risperidone (used to treat behaviors), and EpiPen injection (used to treat allergic reactions).</p> <p>Review of pharmacy review reports revealed reviews dated 02/20/2014, 08/14/2014 with the most recent on 05/22/2015.</p>	C 375		

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C 375	<p>Continued From page 5</p> <p>Refer to interview with the Administrator on 09/17/2015 at 11:30am.</p> <p>Refer to interview with the Pharmacy Provider Representative on 09/17/2015 at 3:25pm.</p> <p>Refer to interview with the Administrator on 09/17/2015 at 4:45pm.</p> <p>_____</p> <p>Interview with the Administrator on 09/17/2015 at 11:30am revealed:</p> <ul style="list-style-type: none"> -The facility's previous pharmacy had recently merged with their new pharmacy. -The Administrator had spoken with a representative from the new pharmacy about scheduling the review on 09/14/2015 and was waiting for a return call. -The new pharmacy required a prepayment of a fee before the pharmacy review could be scheduled. -The pharmacy representative said that the pharmacy had mailed a letter to the facility explaining the new process for scheduling pharmacy reviews. -The Administrator had not seen the letter. -The Administrator stated that she had not prepaid the fee so the pharmacy reviews could be scheduled. <p>Telephone interview with the facility's Pharmacy Provider Representative on 09/17/2015 at 03:25pm revealed:</p> <ul style="list-style-type: none"> -The facility was responsible to contact the pharmacy provider notifying of need for pharmacy reviews to be completed. -The pharmacy provided a nurse reviewer to complete pharmacy reviews for the facility. -Prepayment was required prior to the pharmacy 	C 375		

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C 375	<p>Continued From page 6</p> <p>reviews being scheduled and completed by the pharmacy staff.</p> <ul style="list-style-type: none"> -Once the required payment was made, the pharmacy nurse contacts the facility typically within 48 hours to schedule the review. -The facility should not wait until the review is due to begin the process of scheduling. -The review done on 05/22/2015 was performed as a complimentary visit. -The representative was not aware of any recent request for reviews from the facility. <p>Interview with the Administrator at 4:45 PM on 09/17/2015 revealed that she had just paid the required fee on- line and was now waiting for the pharmacy to contact her to schedule visit.</p>	C 375		