

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  FCL011319	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING: _____	(X3) DATE SURVEY COMPLETED  C 01/19/2016
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NAME OF PROVIDER OR SUPPLIER  SERENITY HEART FAMILY CARE HOME # 234	STREET ADDRESS, CITY, STATE, ZIP CODE 234 COUNTRY TIME CIRCLE LEICESTER, NC 28748
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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) COMPLETE DATE
C 000	Initial Comments  The Adult Care Licensure Section conducted an annual survey on January 14-15, 2016 with an exit conference via telephone on January 19, 2016.	C 000		
C 153	<p>10A NCAC 13G .0501 (a) Personal Care Training And Competency</p> <p>10A NCAC 13G .0501 Personal Care Training And Competency</p> <p>(a) The facility shall assure that personal care staff and those who directly supervise them in facilities without heavy care residents successfully complete a 25-hour training program, including competency evaluation, approved by the Department according to Rule .0502 of this Section. For the purposes of this Subchapter, heavy care residents are those for whom the facility is providing personal care tasks listed in Paragraph (i) of this Rule. Directly supervise means being on duty in the facility to oversee or direct the performance of staff duties.</p> <p>This Rule is not met as evidenced by: Based on interview and record review, the facility failed to assure 1 of 1 staff (Staff B) who had worked in the facility more than 6 months without completing the 25 hour personal care training.</p> <p>The findings are:</p> <p>Review of the personnel record for Staff B, Supervisor-In-Charge (SIC), on 1/14/16 revealed: -Staff B was hired on 11/8/12 as a SIC / Medication Aide.</p>	C 153	<p>Please see attached sheet</p> <p>2/1/16</p>	

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE: *Shirley Stott, Administrator* TITLE: \_\_\_\_\_ (X6) DATE: 2/15/16

Reviewed and Accepted with Revisions  
Date: 3/2/16 *CS*

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C 153

Continued From page 1

-There was no documentation of completion of the 25 hour personal care training.

Telephone interview with Staff B, SIC, on 1/14/16 at 2:25pm revealed:

- She had worked at the facility for 3 years.
- She assisted residents with personal care needs, administered medications, prepared meals and snacks, and performed housekeeping duties in the facility.
- She believed she had received the 25 hours personal care training with a nurse consultant from the facility pharmacy, but she was unsure of the date of the training.

Interview with the Administrator on 1/14/16 at 2:50pm revealed:

- She did not think Staff B had ever received the 25 hour personal care training class.
- She had difficulty setting up a nurse who could teach the 25 hour personal care training class.
- The "assistance needed in this house is pretty extensive."

Confidential interviews with five residents revealed five of five residents stated the staff provided the assistance they needed respectfully and in a timely manner.

C 153

C 246

10A NCAC 13G .0902(b) Health Care

10A NCAC 13G .0902 Health Care  
(b) The facility shall assure referral and follow-up to meet the routine and acute health care needs of residents.

This Rule is not met as evidenced by:  
TYPE B VIOLATION

C 246

*Please See Attached sheet*

*3/4/16*

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C 246	<p>Continued From page 2</p> <p>Based on observation, interview, and record review, the facility failed to assure a physician was contacted when Lovenox was not administered as ordered and as needed Pyridium was unavailable for 1 of 3 sampled Residents (Resident #3).</p> <p>The findings are:</p> <p>Review of Resident #3's current FL2 dated 11/17/15 revealed: -Diagnoses included: post traumatic stress disorder, past cerebral vascular accident, seizure disorder, and schizoaffective disorder. -A physician's order for Lovenox (used to prevent blood clots) 40mg by subcutaneous injection every 24 hours. -A physician's order for Pyridium (used to treat symptoms associated with urinary tract infections) 200mg three times a day as needed per protocol. -A physician's order for in and out self catheterization.</p> <p>Review of Resident #3's Resident Register revealed the resident was admitted to the facility on 11/18/15.</p> <p>A. Review of Resident #3's November 2015 Medication Administration Record (MAR) revealed: -A computer generated entry for Lovenox 40mg inject 0.4mg subcutaneously every 24 hours with an origination date of 11/17/15. -On 11/19/15, Lovenox was documented as administered at 8am. -There was no other documented administrations from 11/19/15 to 11/30/15.</p> <p>Review of an Nurse Practitioner's (NP) order for Resident #3 dated 12/1/15 revealed discontinue</p>	C 246		

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NAME OF PROVIDER OR SUPPLIER  
**SERENITY HEART FAMILY CARE HOME # 234**

STREET ADDRESS, CITY, STATE, ZIP CODE  
**234 COUNTRY TIME CIRCLE  
LEICESTER, NC 28748**

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C 246	<p>Continued From page 3</p> <p>Lovenox.</p> <p>Review of a NP summary for Resident #3 from an initial visit on 12/1/15 revealed:</p> <ul style="list-style-type: none"> <li>-The resident was listed as allergic to aspirin and non-steroidal anti-inflammatory drugs.</li> <li>-"Another big concern at today's visit is that [the resident] feels he has developed large clots in his arms. He reports he can feel them. They feel like knots on his vein."</li> <li>-The cardiovascular physical examination included "no swelling either arm, the resident has prominent veins, and the structures which he feels as clots are actually valves in the large veins of his forearms."</li> </ul> <p>Telephone interviews with the facility pharmacy on 1/14/15 at 2:40pm and 3:40pm revealed:</p> <ul style="list-style-type: none"> <li>-Two injections of Lovenox 40mg were dispensed to the facility for Resident #3 on 11/17/15.</li> <li>-They had never received a discontinuation order for the Lovenox by the NP.</li> <li>-Neither of the Lovenox injections had been returned for Resident #3, however that was not unusual because the pharmacy could not issue credit for returned injectables.</li> <li>-The facility may have chosen to waste the medication onsite.</li> </ul> <p>Interview with the Administrator on 1/14/16 at 2:50pm revealed:</p> <ul style="list-style-type: none"> <li>-On 11/18/15, she had arrived at the facility to discover Staff B, Supervisor-In-Charge (SIC), had administered a Lovenox injection to Resident #3.</li> <li>-After she informed Staff B only an Registered Nurse (RN) could administer Lovenox, she and Staff B then proceeded to contact a local Home Health agency to get an RN to come out to give Resident #3 Lovenox injections daily until the NP could be reached to either discontinue the</li> </ul>	C 246		

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C 246	<p>Continued From page 5</p> <p>revealed:</p> <p>- "I was getting the shots in the belly at [local hospital name], then I came here and got one shot and they said they don't do that medicine here."</p> <p>- "I don't remember who gave me the shot. All I know is I got one."</p> <p>Telephone interview with Staff B, SIC, on 1/15/16 at 8:33am revealed:</p> <p>- She had administered one injection of Lovenox on the morning of 11/19/15 to Resident #3 as was documented on the MAR.</p> <p>- She administered the injection in the resident's abdomen.</p> <p>- The resident had not experienced any problems with the injection or at the injection site after the medication was administered.</p> <p>- She did not know she was not supposed to administer Lovenox, until after she had already given one injection to the resident.</p> <p>- She thought she could give Lovenox since it was ordered subcutaneously.</p> <p>- The resident had been refusing the Lovenox injections in the hospital, and had not had it the last few days he had been in the hospital.</p> <p>- The Lovenox had somehow "stayed on the FL2."</p> <p>- She had called Home Health on 11/19/15 to arrange for a nurse to administer the Lovenox injections, however Home Health informed her Resident #3's insurance would not pay for daily nurse visits to administer the injection.</p> <p>- The Administrator then contacted the hospital discharge clinician and found out the Lovenox should have never been left on the FL2 and had spoken with the clinician to get an order to discontinue the Lovenox.</p> <p>Telephone interview with Resident #3's NP on 1/15/16 at 9:16am revealed:</p>	C 246		

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C 246	<p>Continued From page 6</p> <p>- "There was some question as to whether he had DVT's [deep vein thrombosis] in his arms."                      - "When [DVT's] were ruled out in the hospital, the Lovenox should never have been left on the FL2."                      - "I discontinued [the Lovenox] on my first visit with him on 12/1/15."</p> <p>B. Review of Resident #3's November 2015 MAR revealed:                      - A computer generated entry for Pyridium 200mg 1 tablet three times daily after meals as needed with an origination date of 11/17/15.                      - There were no documented administrations from 11/19/15 to 11/30/15.</p> <p>Review of an NP order for Resident #3 dated 12/1/15 revealed discontinue Pyridium due to insurance non coverage.</p> <p>Telephone interview with the facility pharmacy on 1/14/16 at 2:40pm revealed:                      - Pyridium 200mg tablets were not dispensed to the facility for Resident #3.                      - The medication was not covered by insurance and Staff B had told the pharmacy over the telephone not to send the medication on 11/18/15.</p> <p>Interview with Resident #3 on 1/14/16 at 3:20pm revealed:                      - Pyridium per protocol "means if I feel like I'm getting a urinary tract infection or bladder infection, I would take it."                      - He had not had any symptoms of a urinary tract or bladder infection since he had been admitted to the facility on 11/18/15.</p> <p>Interview with the Administrator on 1/14/16 at 2:50pm revealed:                      - On 11/19/15, she had contacted the discharge</p>	C 246		

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C 246	<p>Continued From page 7</p> <p>clinician at the local hospital and had asked for the physician who had signed Resident #3's FL2 to write a discontinuation order for the Pyridium and write an order for an alternative medication for the resident.</p> <p>-The facility was never successful in obtaining the discontinuation order for the Pyridium from the local hospital.</p> <p>-On 11/24/15, Resident #3 was taken for a follow up appointment with a local PCP.</p> <p>-Since it was Resident #3's initial visit the local PCP did not want to change any of the resident's medications, and refused to write an order to either discontinue the Pyridium or to change it to another medication.</p> <p>-"Then the holidays hit and we all kind of dropped the ball from there" indicating staff had overlooked pursuing an order to discontinue the medication."</p> <p>Telephone interview with Staff B, SIC, on 1/15/16 at 8:33am revealed:</p> <p>-Resident #3's insurance would not pay for the Pyridium.</p> <p>-She stated she "had every intention" to contact Resident #3's NP to get an alternative medication "but I didn't get it done."</p> <p>Telephone interview on 1/15/16 at 9:16am with Resident #3's NP revealed:</p> <p>-She did not remember the facility staff discussing problems with insurance covering the cost of Pyridium, however "I usually will d/c the medication if insurance won't cover."</p> <p>_____</p> <p>A plan of protection was submitted by the facility on 2/1/16 as follows:</p> <p>-Attempted contact with local hospital to get Resident #3's orders clarified.</p>	C 246		
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C 246	Continued From page 8  -Resident #3 went to the PCP on 11/24/15 with no success on medication alternative. -On 12/1/15, onsite FNP discontinued medication without prescribing an alternative because I guess she felt the resident did not need it. -Administrator or designee will provide documented contact with providers to ensure due diligence in follow-up with physicians.  CORRECTION DATE FOR THE TYPE B VIOLATION SHALL NOT EXCEED MARCH 4, 2016.	C 246		
C 912	G.S. 131D-21(2) Declaration of Residents' Rights  G.S. 131D-21 Declaration of Resident's Rights Every resident shall have the following rights: 2. To receive care and services which are adequate, appropriate, and in compliance with relevant federal and state laws and rules and regulations.  This Rule is not met as evidenced by: Based on observation, interview, and record review the facility failed to assure residents received care and services that are adequate, appropriate and in compliance with federal and state laws and rules and regulations related to health care follow-up.  The findings are:  Based on observation, interview, and record review, the facility failed to assure a physican was contacted when Lovenox was not administered as ordered and as needed Pyridium was unavailable for 1 of 3 sampled Residents (Resident #3). [Refer to Tag 0246, 10A NCAC	C 912	Please See Attached Sheet	03/31/16

# Serenity Heart Family Care Homes

CAR for Unit 234

## **10A NCAC 13G.0501 (c) Personal Care Training and Competency:**

The administrator will ensure that all new hires that are not CNA certified are scheduled to complete the 25/80 hour training within the stated rule parameters with documented scheduled trainings through Blue Ridge Pharmacy Training with the nurse. This has been scheduled to begin 4/11/16. Unsure of the complete date as the RN must compile a complete schedule of 10 (8 hr) days to complete the actual course. This to hopefully be completed by 7/1/16

## **10A NCAC 13G.0902(b) Health Care**

Staff have been instructed to document all correspondence in each resident file. The administrator or designee will check such documentation to ensure that all due diligence protocols are followed with providers not limited to just the primary SIC but also the administrator or designee to document follow up procedures. This will be completed no later than 03/04/2016

## **G.S. 131D-21(2) Residents' Rights:**

The facility will ensure that all resident rights are adhered to through proper care and communication. The administrator will conduct documented routine checks on staff's progress with resident care and responsibilities.

This will be completed by 03/31/2016 Amended to 3/4/16 per telephone interview with Gennea Scott 3/2/16 at 11:10am.

CS

**Serenity Heart 80 Hour PCA Training Schedule**

**Monday 4-11-16**

**Monday 4-18-16**

**Monday 4-25-16**

**Monday 5-2-16**

**Monday 5-9-16**

**Tuesday 5-17-16**

**Monday 5-23-16**

**Monday 5-30-16**

**Monday 6-6-16**

**Monday 6-13-16**

**Class time will start at 10 a.m. and finish at 5p.m. You will be expected to be in class on time and no absences will be allowed. Thank you for your cooperation. Donna Ledbetter, RNC**