Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	FCL060072	A. BUILDING: _____ B. WING _____	07/14/2016

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
ETTA LOVE FAMILY CARE HOME	1951 DIETRICH LANE CHARLOTTE, NC 28262

(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 and the Mecklenburg County Department of Social Services conducted an Annual survey on July 14, 2016.	C 000		
C 202	10A NCAC 13G .0702(a) Tuberculosis Test and Medical Examination 10A NCAC 13G .0702 Tuberculosis Test and Medical Examination (a) Upon admission to a family care home each resident shall be tested for tuberculosis disease in compliance with the control measures adopted by the Commission for Health Services as specified in 10A NCAC 41A .0205 including subsequent amendments and editions. Copies of the rule are available at no charge by contacting the Department of Health and Human Services, Tuberculosis Control Program, 1902 Mail Service Center, Raleigh, North Carolina 27699-1902. This Rule is not met as evidenced by: Based on record review and interviews, the facility failed to assure 1 of 3 sampled residents (Resident #1) was tested for tuberculosis (TB) upon admission in compliance with the control measures adopted by the Commission for Health Services. The findings are: Review of Resident #1's current FL2 dated 04/09/16 revealed diagnoses included depression, bipolar disorder, and urinary incontinence. Review of Resident #1's Resident Register revealed an admission date of 04/13/15.	C 202		

Reviewed and Accepted. Sherry Poplin FSC 8/15/16

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C 202	Continued From page 1 Review of Resident #1's record revealed: -A TB skin test was placed on 03/23/15. -The TB test was read on 03/25/15 and the results were negative. -No documentation in Resident #1's record that a second TB skin test had been administered. Resident #1 was out of the facility and unavailable for interview. Interview with the Administrator on 07/14/16 at 8:20 am revealed: -She was responsible for ensuring residents admitted to the facility had a two TB skin tests. -Resident #1 had previously resided in another facility, was admitted to the hospital, and then was admitted to the current facility. -She was unaware Resident #1 had not had a second TB skin test.	C 202	The Home will ensure that all residents Upon admision will have all the required TB Test with in the pruper time Frame. The administrator will review the Files to make sure TB test are done in compliance with the rule and documented in the resident Folder.	8-31-16
C 315	10A NCAC 13G .1002(a) Medication Orders 10A NCAC 13G .1002 Medication Orders (a) A family care home shall ensure contact with the resident's physician or prescribing practitioner for verification or clarification of orders for medications and treatments: (1) if orders for admission or readmission of the resident are not dated and signed within 24 hours of admission or readmission to the facility; (2) if orders are not clear or complete; or (3) if multiple admission forms are received upon admission or readmission and orders on the forms are not the same. The facility shall ensure that this verification or clarification is documented in the resident's record.	C 315		

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C 315	Continued From page 2 This Rule is not met as evidenced by: Based on interview and record review, the facility failed to assure clarification of medication orders for 1 of 3 sampled residents (#3) with a physician's order for Trazodone. The findings are: Review of Resident #3's current FL2 dated 05/23/16 revealed: -Diagnoses included schizophrenia and insomnia. -An order for Trazodone HCL 50mg take at bedtime. (Trazodone is used for sleep and depression). Review of a Physician Visit Form, signed 05/23/16 by Resident #3's primary physician, revealed: -A list of medications, including "Trazodone HCL 50mg as needed" written by the facility administrator. -A note by the medical physician for "Corrections/clarifications of recent FL2" with an order for Trazodone HCL 50mg every hs (bedtime). Review of a Physician Visit Form, signed 07/12/16 by Resident #3's primary physician, revealed: -A note from the Administrator requesting the physician to advise if Resident #3 still needed Trazodone because "he never asks for it" and seemed to sleep with no issues. -The physician's response was "No changes." Review of Resident #3's May 2016, June 2016, and July 2016 Medication Administration Records (MARs) revealed a handwritten entry for Trazodone 50mg "prn" on each month's MAR with no administration of the medication.	C 315	The Home will make sure that all medication orders are clear and written correctly. The Home will review orders from the doctor within 24 hours to make sure they are clear. If they are not clear the administrator will immediately call the doctor for clarification. The Home will no longer write meds	~~9-16-16~~ 8/31/16 per telephone conversation with Jeresa Washington on 8/25/16

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C 315	Continued From page 3 Observation of medication on hand revealed: -A labeled prescription bottle for Resident #3 for Trazodone 50mg. -Instructions for administration of the Trazodone 50mg were to take one by mouth at bedtime as needed for sleep. -Thirty tablets were dispensed on 10/19/15 and 15 tablets were in the prescription bottle. Resident #3 was out of the facility and unavailable for interview. Interview with the facility's pharmacy representative on 07/14/16 at 10:25 am revealed: -The pharmacy received an order for Resident #3 on 05/12/15 for Trazodone 50 mg take one at bedtime as needed for sleep. -The order for the Trazodone 50 mg had always been as needed and not scheduled. -The most current order received was dated 03/23/16 for Trazodone 50 mg take one at bedtime as needed for sleep. -The pharmacy had not received, from the facility or the physician, the order written on 05/23/16 for Trazodone 50mg take at bedtime. -The pharmacy last dispensed (30) Trazodone 50 mg pills to be administered at bedtime, as needed, on 10/9/15. Interview with Resident #3's Psychiatrist's Registered Nurse (RN) on 07/14/16 at 10:50 am revealed: -The Psychiatrist was "usually the one who orders the Trazodone" medication for Resident #3. -The most recent order written the Psychiatrist was on 03/23/16 for Trazodone 50 mg take one at bedtime as needed for sleep. -There had been no changes to the order for Trazodone since 03/23/16.	C 315	On the residents physican sheets due to errors. The Home will send a cupy of the residents MARS for the doctor to review and make any changes. If any changes or updates are needed. the Home will ensure these changes ur done within 24hours and reflected immediately on the resident MAR and documented in the resident fulder	9/16/16 8/31/16

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C 315	Continued From page 4 -"It is still ordered as needed." -The Psychiatrist noted on 07/12/16 to continue medications as ordered. Attempted interview with Resident #3's medical physician on 07/14/16 at 10:31 pm was unsuccessful. Interview with the Administrator on 07/14/16 at 11:15 am revealed: -She was responsible for obtaining clarification of orders. -The Trazodone "had always been prn" for Resident #1 and was to be given if he was having difficulty sleeping. -Resident #1 had not recently had concerns with not being able to sleep at night. -The prescription for Trazodone 50mg had not been refilled since it was first ordered. -She did not know why the medical physician wrote an order on 05/23/16 for the Trazodone to be given scheduled at bedtime and not as needed. -She did not clarify with the medical physician if the Trazodone 50mg was to be given scheduled at bedtime or to continue as needed "because the psychiatrist is the one that writes the orders for the Trazadone."	C 315		