

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	X2) MULTIPLE CONSTRUCTION A. BUILDING <u>00</u> B. WING _____	X3) DATE SURVEY COMPLETED 11/02/2017
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NAME OF PROVIDER OR SUPPLIER  SENIOR SUITES AT THE LELAND, LLC	STREET ADDRESS, CITY, STATE, ZIP CODE 900 SOUTH A STREET RICHMOND, IN 47374
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R 0000  Bldg. 00	<p>This visit was for a State Residential Licensure Survey. This visit included the Investigation of Complaint IN00238935.</p> <p>Complaint IN00238935 - Substantiated. State Residential Findings are cited at R0297 and R0298.</p> <p>Survey dates: October 31, 2017. November 1 and 2, 2017.</p> <p>Facility number: 012497</p> <p>Residential Census: 98</p> <p>These State Residential Findings are cited in accordance with 410 IAC 16.2-5.</p> <p>Quality review completed on November 6, 2017</p>	R 0000		
R 0297	410 IAC 16.2-5-6(c)(1) Pharmaceutical Services - Noncompliance			

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

Any deficiency statement ending with an asterisk (\*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (see instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

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Bldg. 00	<p>(c) If the facility controls, handles, and administers medications for a resident, the facility shall do the following for that resident: (1) Make arrangements to ensure that pharmaceutical services are available to provide residents with prescribed medications in accordance with applicable laws of Indiana.</p> <p>Based on interview and record review the facility failed to obtain medication from the pharmacy in a timely manner for 2 of 6 residents reviewed for pharmacy services (Resident B and Resident D).</p> <p>Findings include:</p> <p>1.) Review of the record of Resident B on 11/1/17 at 9:00 a.m., The Physician order for Resident B, dated October 2017, an antiretroviral drug twice a day and antiviral combination drug one time a day. The resident was ordered an immunosuppressive drug twice a day.</p> <p>The October 2017 Medication Administration Record (MAR) for Resident B did not receive 4 doses of the immunosuppressive drug on 10/1/17 and 10/2/17. The resident did not receive 1 dose of the antiviral combination drug 10/13/17. The resident did not receive 7 doses of the antiretroviral drug on 10/12/17, 10/13/17, 10/14/17 and 10/15/17.</p>	R 0297	<p>State Plan of Correction: Deficiency R297 What corrective action (s) will be accomplished for those residents found to be affected by the deficient practice;</p> <p>1. Facility has contracted with a new pharmacy, Care One (expertise is in long term care and assisted living communities) as of 10/26/2017. Residents continue to have choice for their pharmacy needs.</p> <p>How will the facility identify other residents having the potential to be affected by the same deficient practice and what corrective action will be taken;</p> <p>2. Any orders for medications from non-contracted pharmacies will be handled in compliance with the medication ordering policy for Non-Contracted Pharmacies (see attached). Residents who are now with Care One pharmacy-- their medications will be electronically reordered as they are integrated with our new system, Point Click Care. (see attached)</p> <p>What measures will be put into place or what systemic changes</p>	11/30/2017			

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	<p>The nursing note for Resident B, dated 10/2/17, a call was placed to the physician for prescription for the immunosuppressive drug as soon as possible.</p> <p>The nursing note for Resident B, dated 10/12/17, the pharmacy was notified that antiviral combination drug and antiretroviral drug was not sent in the medication cycle change.</p> <p>Interview with Resident B on 11/1/17 at 1:20 p.m., the resident did not always receive the medication from the facility that the physician ordered.</p> <p>2.) Resident D's record was reviewed on 10/31/17 at 10:22 a.m. His diagnoses documented on his October 2017 physician's recapitulation orders included but were not limited to, major depressive disorder, anxiety, and diabetes mellitus. His record indicated he did not self-administer his own medications.</p> <p>Resident D's Medication Flowsheet for September 2017 had documented he had not received his benzodiazepine prescribed twice a day from the evening of September 1st through September 9th day shift. This resulted in 16 missed doses. He had not received his oral diabetes medication prescribed twice a day on day shift September 2nd through</p>		<p>the facility will make to ensure that the deficient practice does not recur;</p> <p>3. Initiated new medication order policy and procedure for reordering medications. Entire medication administration staff will be oriented to new policy by 11/30/17. (Please see attached.)</p> <p>How the corrective action (s) will be monitored to ensure the deficient practice will not recur;</p> <p>4. All medication administration staff will be trained by 11/30/17 to check the status of ordered and awaiting receipt of medications portal in the Point Click Care system <u>every</u> shift to assess receipt of expected medications.</p> <p>All medications received are scanned or checked against the delivery manifest verifying their receipt.</p> <p><b>Assisted Living</b></p> <p><b>G-123 Policy &amp; Procedure</b></p> <p><i>Policy Title:</i> <b>Medication Ordering</b></p>	

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	<p>September 17th, and on evening shift September 1st, and September 5th through the September 17th. His record indicated he did not self-administer his medications.</p> <p>During an interview with Resident D on 11/2/17 at 9:37 a.m., he voiced he had went without his psychiatric medication for 7 days last month because it had not arrived from the pharmacy and staff had informed him they were waiting on it.</p> <p>During an interview with the DON on 11/2/17 at 4:10 p.m., she explained Resident D had not received his benzodiazepine and oral diabetes medication as prescribed in September 2017 because the facility had not been able to obtain the medications from pharmacy.</p> <p>The Pharmacy policy provided by QMA 1 on 10/31/17 at 12:26 p.m., included the following: The Pharmacy provider duties included, but were not limited to, accurately dispensing prescriptions based on the authorized prescriber orders and provide routine and timely pharmacy services.</p> <p>These State Residential tags relate to Complaint IN00238935.</p>		<p><b>(Non-Contracted Pharmacy)</b></p> <p><i>Policy:</i> Medications (new order and refills) and any related equipment and supplies are ordered from the contracted pharmacy as agreed upon between the pharmacy and the facility. The facility medical staff will maintain accurate records of all medications and supplies ordered and received.</p> <p><i>Procedure:</i></p> <ol style="list-style-type: none"> <li>1. Fax new orders and refills to the pharmacy for all medications including non-prescription and over the counter medications.</li> <li>2. New orders are to be entered into the Point Click Care system into the medication order portal of the resident's profile.</li> <li>3. Refills will be requested when there is a 7-day supply of medications left in med cart to allow for the timely receipt of the medication.</li> </ol> <p>· Refill requests should be documented onto a</p>				

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			<p>progress note and continued documentation on shift report until received.</p> <ul style="list-style-type: none"> <li>· If no information regarding the refill is received with 24 hours the Director of Nursing or Nursing Manager is to be informed.</li> <li>· Contact the pharmacy for follow up communication and information.</li> </ul> <p>4. Urgent or STAT orders are to be faxed and followed up with telephone communications with the pharmacy to satisfactorily convey the urgency.</p> <ul style="list-style-type: none"> <li>· Urgent or stat medications needed while awaiting receipt from non-contracted pharmacy can be obtained via the Emergency Medication Box with approval from the facility contracted pharmacy.</li> <li>· Nurse obtaining medication out of the Emergency Medication Box is to fill out form in box and must include insurance information for any resident not regularly receiving</li> </ul>		

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			<p>medications from contracted pharmacy. Fax this form to facility contracted pharmacy.</p> <p>1.Discontinued and changed orders are to be entered into the Point Click Care system accordingly and then faxed to the non-contracted pharmacy for proper processing.</p> <p><b>Assisted Living</b></p> <p><b>G-122 Policy &amp; Procedure</b></p> <p>Policy Title: Medication Ordering (Contracted Pharmacy)</p> <p>Policy:Medications (new order and refills) and any related equipment and supplies are ordered from the contracted pharmacy as agreed upon between the pharmacy and the facility. The facility medical staff will maintain accurate</p>		

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			<p>records of all medications and supplies ordered and received.</p> <p>Procedure:</p> <p>1.New orders are to be entered into the Point Click Care system into the medication order portal of the resident's profile.</p> <ul style="list-style-type: none"> <li>·This will start the new order process. The pharmacy will receive the new order via this system.</li> <li>·The system will indicate whether or not the pharmacy requires that the order also be faxed to the pharmacy.</li> </ul> <p>2.Refills will be requested when there is a 7-day supply of medications left in med cart to allow for the timely receipt of the medication.</p> <ul style="list-style-type: none"> <li>·Refill requests should be documented onto a progress note and continued documentation on shift report until received.</li> <li>·If no information regarding the refill is received with 24 hours the Director of Nursing or</li> </ul>	

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			<p>Nursing Manager is to be informed.</p> <ul style="list-style-type: none"> <li>·Contact the pharmacy for follow up communication and information.</li> <li>3.Urgent or STAT orders are to be faxed and followed up with telephone communications with the pharmacy to satisfactorily convey the urgency.</li> <li>·Urgent or stat medications needed can be obtained via the Emergency Medication Box with approval from the facility contracted pharmacy.</li> <li>·Nurse obtaining medication out of the Emergency Medication Box is to fill out form in box and fax this form to facility contracted pharmacy.</li> <li>1.Discontinued and changed orders are to be entered into the Point Click Care system accordingly. Pharmacy will be automatically notified according to what is entered into this system.</li> <li>2.All residents medications will be updated, changes made and new medications sent</li> </ul>	

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R 0298 Bldg. 00	<p>410 IAC 16.2-5-6(c)(2) Pharmaceutical Services - Deficiency (2) A consultant pharmacist shall be employed, or under contract, and shall: (A) be responsible for the duties as specified in 856 IAC 1-7; (B) review the drug handling and storage practices in the facility; (C) provide consultation on methods and procedures of ordering, storing, administering, and disposing of drugs as well as medication record keeping; (D) report, in writing, to the administrator or his or her designee any irregularities in dispensing or administration of drugs; and (E) review the drug regimen of each resident receiving these services at least once every sixty (60) days.</p> <p>Based on interview and record review the facility failed to provide pharmacy review of medications every 60 days for 6 of 6 residents reviewed for pharmacy services (Resident A, B, C, D, E, &amp; F).</p> <p>Findings include:</p> <p>The most recent Pharmacy review provided by the facility on 11/2/17 at 10:40 a.m., Resident B, C, D, and F medications had last been reviewed June 2017. Resident A and E medications had not been reviewed. The Regional</p>	R 0298	<p>according to information put into the Point Click Care system, medications ordering portal.</p> <p>State Plan of Correction: Deficiency R298 1. Describe what the facility did to correct the deficient practice for each client cited in the deficiency. Answer: ●□□□□□□□□ The facility has contracted with a new consulting pharmacy, Care One. The new pharmacy will conduct every 60 days a review of every resident receiving medications in the facility.</p> <p>2. Describe how the</p>	11/30/2017



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	<p>medications.</p> <p>3.) Review of the record of Resident C on 11/1/17 at 9:40 a.m., indicated the resident's diagnoses included, but were not limited to, heart failure, overactive bladder, nausea, insomnia, hypomagnesemia, severe protein-calorie malnutrition, hypertension and chronic pain. Resident C did not self administer medications.</p> <p>4.) Resident D's record was reviewed on 10/31/17 at 10:22 a.m. His diagnoses documented on his October 2017 physician's recapitulation orders included but were not limited to, major depressive disorder, anxiety, insomnia, essential hypertension, diabetes mellitus, constipation, sleep apnea, anemia, allergic rhinitis, disease of the upper respiratory tract, gastroesophageal reflux disease, angina, heart failure, shortness of breath, edema, vitamin deficiency, and hypokalemia.</p> <p>5.) Resident E's record was reviewed on 10/31/17 at 1:51 p.m. His diagnoses documented on his October 2017 physician's recapitulation orders included but were not limited to, dementia with behavioral disturbance, depressive disorder, convulsions, anemia, hypothyroidism, vitamin deficiency, dry eye syndrome, essential hypertension,</p>		<p>4. Describe how the corrective action(s) will be monitored to ensure the deficient practice will not recur, i.e., what quality assurance program will be put into place.</p> <p>Answer:</p> <ul style="list-style-type: none"> <li>•□□□□□□□ The Facility Administrator and the Director of Nursing will receive copies of the pharmacist reports timely following every 60-day review.</li> <li>•□□□□□□□ The Director of Nursing in 5-7 days of receipt of report, will review the entire report. Any recommendations will be forwarded to the attending physician for any possible medication changes.</li> </ul> <p>Any medication changes received from the prescriber will be documented and carried out according to facility policy.</p> <p><b>Assisted Living</b></p> <p><b>G-111 Policy &amp; Procedure</b></p> <p>Policy Title: 60 day Pharmacist Review Policy and Procedure</p> <p>Policy: The Facility will contract with a pharmacy for the purposes of 1.</p>				

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	<p>varicose veins, gastroesophagel reflux disease, constipation, hemorrhoids, overactive bladder, shortness of breath, and pain.</p> <p>6.) Resident F's record was reviewed on 11/1/17 at 10:30 a.m. Her diagnoses documented on her October 2017 physician's recapitulation orders included but were not limited to, dementia, major depressive disorder, insomnia, overactive bladder, hypothyroidism, vitamin deficiency, dry eye syndrome, osteoporosis, constipation, rhinitis, spinal stenosis of the lumbar region, hiatus hernia, essential hypertension, angina pectoris, heart disease, and pain.</p> <p>The Pharmacy policy provided by QMA 1 on 10/31/17 at 12:26 p.m., included the review of medication regimen of each resident at least quarterly or as defined by applicable state regulations to identify any potential or actual medication-related problems, including untreated indications, improper drug selection, sub-therapeutic dosage, failure to receive drugs, overdosage, adverse drug reaction, drug interactions, and drug usage without indication.</p> <p>These State Residential tags relate to Complaint IN00238935.</p>		<p>Providing medications to the facility for facility staff medication administration to the residents residing in the facility or resident self-administration and 2. Consultation on methods and procedures of ordering, storing, administering and disposing of medications as well as medication recordkeeping and to review medication handling and storage practices.</p> <p>Procedure:The consulting Pharmacist will:</p> <ul style="list-style-type: none"> <li>·Review the medication regimen of each resident receiving medication administration services at least once every 60 days.</li> <li>·Provide to the facility a report of any irregularities in the dispensing or administration of medications.</li> <li>·Report will be submitted to the Administrator or Director of Nursing</li> </ul> <p>The Director of Nursing will:</p> <ul style="list-style-type: none"> <li>·Review pharmacists report with 5-7 days post receipt</li> </ul>				

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			<ul style="list-style-type: none"> <li>·Forward any recommendations to the medications prescriber or the residents attending physician</li> <li>·Document and act upon any medication changes received from the prescriber according to facility policy.</li> <li>·Will contact the prescriber directly via telephone or fax if no response is received regarding the pharmacy recommendations within 30 days.</li> <li>·Document all contact attempts made to the prescriber on the resident's medical record.</li> </ul>	