



Citation's Text

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Facility ID: 020619

Facility Name: BELMONT LODGE HEALTH CARE CENTER

Inspection ID: C8QK11

Inspection Exit Date: 4/8/2020

Citation Code: 0658

Citation Title: Services Provided Meet Professional Standards

Scope and Severity (S/S): D

Notes: Citation code "0000" and "9999" are initial and final Comments of an inspection.

Citation Text

Based on observations, record review and interviews, the facility failed to ensure nursing staff followed professional standards for medication administration.

Specifically, the facility failed to administer medications and store them safely.

Findings include:

I. Professional references

According to the Lippincott nursing Center, "Medication Safety: Go beyond the basics", (4/9/2020), retrieved from: <https://www.nursingcenter.com/ncblog/may-2016/medication-safety-go-beyond-the-basics>, "For any nurse working in a direct care setting, preparing medications and administering them to patients is part of the daily routine. Mistakes can happen at any point in the process. Administration errors are one of the most serious and most common mistakes made by nurses. The result may lengthen a hospital stay, increase costs, or have life and death implications for the patient. So, what can you do to safely administer medications?"

Start with the basics:

1. Verify any medication order and make sure it's complete. The order should include the drug name, dosage, frequency and route of administration. If any element is missing, check with the practitioner.
2. Check the patient's medical record for an allergy or contraindication to the prescribed medication. If an allergy or contraindications exist, don't administer the medication and notify the practitioner.
3. Prepare medications for one patient at a time.
4. Educate patients about their medications. Encourage them to speak up if something seems amiss."

II. Observation and interview

The east hall medication cart was observed on 4/8/2020 at 8:44 a.m. On the top of the medication cart were four graduated plastic cups with various pills in them, two inhalers, a nasal spray, and a small plastic cup with orange liquid. Each of the four cups containing the pills had a name written along the side written in a marker. Licensed practical nurse (LPN) #1 said the residents the medications belonged to refused the medications while they were eating their breakfast. She said she would return to the residents after they finished their breakfast. She said she was new and did not want to throw away the medications.

III. Resident #1

A. Resident status

Resident #1, age 62, was admitted on 11/22/19. According to the April 2020 computerized physician orders (CPO), diagnoses included hypertension (HTN), anemia, and chronic obstructive pulmonary disease (COPD).

B. Resident #1's medication administration record (MAR)

The April 2020 MAR identified the on arising (OA) medications:

1. Furosemide tablet 40 milligrams (mg); give 1.5 tablets by mouth (po) once a day.
2. Klor-con 20 milliequivalents (mEq); give one tablet po once a day.
3. Pantoprazole sodium tablet delayed release 40 mg; give one tablet po one time a day.
4. Spironolactone tablet 100 mg; give 1.5 tablet po one time a day.
5. Theragran-M; give one tablet po one time a day.
6. Thiamine HCl tablet 100 mg; give one tablet po one time a day.
7. Advair diskus 500-50 micrograms (mcg) a dose; give one inhalation to inhale two times daily.
8. Duloxetine HCl delayed release 30 mg; give one capsule po two times a day.
9. Lactulose 10 grams (gm) / 15 milliliter (ml); give 60 ml po two times a day.
10. Magnesium oxide tablet 400 mg; give one tablet po twice a day.
11. Rifaximin tablet 550 mg; give one tablet po twice a day.
12. Midrone HCl tablet 5mg; give 1.5 tablet po three times a day.

IV. Resident #2

A. Resident status

Resident #2, age 80, was admitted on 12/29/19. According to the April 2020 computerized physician orders (CPO), diagnoses included hypertension (HTN), gastro esophageal reflux disease (GERD), and chronic pain.

B. Resident #2's MAR

The April 2020 MAR identified the on arising (OA) medications:

1. Calcium-D 600-400 mg; give one tablet po in the morning.
2. Cymbalta capsule 30 mg; give 30 mg po in the morning.
3. Lasix 20 mg; give one tablet orally in the morning.
4. Multivitamin tablet; give one tablet orally in the morning.
5. Spiriva 18 mcg; give one inhalation orally in the morning.
6. Vitamin D tablet; give 2000 IU po one time a day.
7. Colace capsule 100 mg; give one capsule orally every day and every evening.
8. Ensure supplement twice a day (BID) related to (r/t) weight loss two times a day.
9. Famotidine tablet; give 20 mg po BID.
10. Metoprolol tartrate tablet 75 mg; give 50 mg orally two times a day.
11. Tramadol HCl tablet 50 mg; give one tablet po three times a day.

V. Resident #3

A. Resident status

Resident #3, age 43, was admitted on 10/21/11. According to the April 2020 computerized physician orders (CPO), diagnoses included cerebellar ataxia, anxiety, and chronic tension-like headaches.

B. Resident #3's MAR

The April 2020 MAR the on arising (OA) medications:

1. Abilify tablet 10 mg; give 10 mg po in the morning.
2. Aspirin tablet 81 mg; give one tablet via peg tube one time a day.
3. Citalopram hydrobromide tablet 40 mg; give 40 mg via peg tube in the morning.
4. Fenofibrate tablet; give 54 mg po one time a day.
5. Lasix tablet 20 mg; give one tablet po one time a day.
6. Multivitamin tablet; give one tablet via peg tube in the morning.
7. polyethylene glycol 3350 powder; give 17 gm via peg tube in the morning.
8. Potassium chloride solution 20 mEq/15 ml; give 15 ml via peg tube one time a day.
9. Topriamate tablet 50 mg; give one tablet via peg-tube in the morning.
10. Vitamin D tablet; give 5000 IU via peg tube in the morning.
11. Baclofen tablet 10 mg; give three tablets po every morning and at bedtime.
12. Colace capsule 100 mg; give one tablet via g-tube every morning and every evening.
13. Flonase allergy relief suspension 50 mcg; give one spray in both nostrils two times a day.
14. Clonazepam tablet 2 mg; give one tablet via per-tube three times a day.
15. Oxycodone HCl tablet 10 mg; give one tablet via peg-tube three times a day.

VI. Resident #4

A. Resident status

Resident #4, age 70, was admitted on 10/29/15. According to the April 2020 computerized physician orders (CPO), diagnoses included schizophrenia, hyperlipidemia, and extra pyramidal and movement disorder.

B. Resident #4's MAR

The April 2020 MAR the on arising (OA) medications:

1. Aspirin tablet chewable; give 81 mg po in the morning.
2. Bisacodyl tablet delayed release 5 mg; give one tablet po in the morning.
3. Magnesium oxide tablet 400 mg; give one tablet po in the morning.
4. Olanzapine tablet 10 mg; give one tablet by mouth in the morning.
5. Polyethylene glycol powder; give 17 gm po in the morning.
6. Risperidone tablet 3 mg; give one tablet po in the morning.
7. Metformin HCl tablet 500 mg; give one tablet po two times a day. (ordered at 9:00 a.m.)

VII. Interview

The director of nursing (DON) was interviewed on 4/8/2020 at 10:30 a.m. She said the facility did not allow the floor nurses to store cups of medications for multiple residents in the top of the cart. She said the facility had already talked to the nurse and provided education on the importance to administer the medications after they have been set up for delivery. She said the potential for staff or any individual walking past the cart could take any/all medications was present.

