

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 04/08/2019
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 056334	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED C 04/08/2019
NAME OF PROVIDER OR SUPPLIER BEACHWOOD POST-ACUTE & REHAB			STREET ADDRESS, CITY, STATE, ZIP CODE 1340 16TH STREET SANTA MONICA, CA 90404		
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F 000	INITIAL COMMENTS The following reflects the findings of the California Department of Public Health during an investigation of a complaint. Complaint Number: CA00623362 Representing the California Department of Public Health: Health Facilities Evaluator Nurse: 40541 The inspection was limited to the specific complaint investigated and does not represent the findings of a full inspection of the facility. A deficiency was issued for Complaint Number: CA00623362.	F 000	This plan of correction as submitted shall serve as provider's letter of credible allegation in reference to the survey findings. Preparation and/or execution of this plan of correction do not constitute admission or agreement by the provider of the truth of the facts alleged or conclusions set forth on the statement of deficiencies. This plan of correction is prepared and/or executed solely because it is required by the provisions of Health and Safety Code Section 1280 and 42 CFR 405.1907.		4/17/19
F 755 SS=D	Pharmacy Svcs/Procedures/Pharmacist/Records CFR(s): 483.45(a)(b)(1)-(3) §483.45 Pharmacy Services The facility must provide routine and emergency drugs and biologicals to its residents, or obtain them under an agreement described in §483.70(g). The facility may permit unlicensed personnel to administer drugs if State law permits, but only under the general supervision of a licensed nurse. §483.45(a) Procedures. A facility must provide pharmaceutical services (including procedures that assure the accurate acquiring, receiving, dispensing, and administering of all drugs and	F 755			

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 participation.

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F 755	<p>Continued From page 1 biologicals) to meet the needs of each resident.</p> <p>§483.45(b) Service Consultation. The facility must employ or obtain the services of a licensed pharmacist who-</p> <p>§483.45(b)(1) Provides consultation on all aspects of the provision of pharmacy services in the facility.</p> <p>§483.45(b)(2) Establishes a system of records of receipt and disposition of all controlled drugs in sufficient detail to enable an accurate reconciliation; and</p> <p>§483.45(b)(3) Determines that drug records are in order and that an account of all controlled drugs is maintained and periodically reconciled. This REQUIREMENT is not met as evidenced by: Based on interview and record review, the facility failed to administer medications as prescribed and to properly store medications for one of three sampled residents (Resident 1). This deficient practice had the potential for Resident 1's needs not being provided and placed an increased risk for adverse consequence associated with the medication use.</p> <p>Findings:</p> <p>On February 19, 2019, at 8:27 a.m., an unannounced visit was made to the facility to investigate a complaint regarding quality of care, pharmaceutical services, and resident neglect.</p> <p>A review of the admission record, indicated Resident 1 was admitted to the facility, on January 26, 2019, with diagnoses including</p>	F 755	<p>Resident 1 was discharged home on 2/3/19.</p> <p>Resident 1 was assessed by MD throughout his stay and did not have any adverse effect related to not receiving Nevirapine and Descovy for four days. Completed 2/3/19.</p> <p>Director of Nursing and designee reviewed the medication administration logs of the facility residents to identify any missed medications. There were no findings. Completed 4/9/19.</p> <p>Director of Nursing completed an in-service with the nursing staff regarding ensuring that medications are administered per MD order. For any medications that are not available licensed nurses in-serviced to notify DON and Administrator. Completed 4/9/19.</p> <p>Medical Records Director or designee to review medication administration logs 5X a week to ensure prescribed medications have been administered. Any findings will be reported to the Director of Nursing immediately. On-</p>		4/17/19

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F 755	<p>Continued From page 2</p> <p>abnormal level of serum enzymes (the clear, straw-colored, liquid portion of the plasma [colorless, watery fluid in the blood]), Human Immunodeficiency Virus (HIV) disease (a type of virus which infects the human immune system [the system in the body which is in charge of fighting off illness]). HIV may cause AIDS (a collection of diseases and symptoms) by eventually killing the white blood cells, which a healthy body uses to fight off disease, and hypertension (high blood pressure).</p> <p>A review of Resident 1's Minimum Data Set (MDS, a standardized resident assessment and care-screening tool), dated February 2, 2019, indicated Resident 1's cognition (a mental process of acquiring knowledge and understanding) was intact. The MDS indicated Resident 1 required limited assistance with bed mobility, transfer, toilet use, and personal hygiene, and extensive assistance with dressing and bathing.</p> <p>During an interview, on March 12, 2019, at 11:14 a.m., the Responsible Party (RP) stated Resident 1 did not receive his prescribed HIV medications for four days after being admitted to the facility and that they were not informed of the missed medication doses until the fifth day of Resident 1's admission to the facility. The RP stated they had taken Resident 1's home medications to the facility and that these medications were misplaced by the facility and were not returned to Resident 1 until after they were discharged from the facility.</p> <p>During an interview with the Senior Business Development Director, on March 12, 2019, at 11:50 a.m., they confirmed that Resident 1's</p>	F 755	<p>Medical Records Director or designee to report any findings related to the licensed nurses not administering medications per MD order to IDT in the quarterly quality assurance meeting (On-going).</p>	4/17/19	

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F 755	<p>Continued From page 3</p> <p>home medications were misplaced by the facility during his stay and that these medications were returned to the RP the same day after Resident 1's discharge to home from the facility.</p> <p>A review of the Physician's Order Report, dated January 1, 2019 - January 31, 2019, indicated Resident 1 was to receive Descovy 200-25 milligram (mg) oral once a day for HIV and Nevirapine 400 milligram (mg) oral once a day for HIV.</p> <p>A review of Resident 1's HIV care plan, initiated on January 26, 2019 and edited on January 29, 2019, indicated Resident 1 was at risk for rapid physical or mental decline related to HIV/AIDS Disease Process. The care plan goal indicated that Resident 1 would remain free of unrecognized physical or mental decline related HIV/AIDS. The approach indicated to administer multi-immunoviral (protected from a virus) medications as ordered and monitor for side-effects.</p> <p>A review of Resident 1's medication administration record (MAR), dated January 26, 2019 - February 3, 2019, indicated in the comments section, that Descovy 200-25 milligram (mg) oral once a day for HIV and Nevirapine 400 milligram (mg) oral once a day for HIV were not administered on January 27, 28, or 30, 2019 because the drug/item was unavailable and will follow-up with pharmacy. The MAR indicated these medications were not administered on January 31, 2019, due to awaiting for family to provide.</p> <p>During an interview, on March 12, 2019, at 12:25 p.m., the Administrator stated Resident did not</p>			F 755			

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F 755	<p>Continued From page 4</p> <p>receive their prescribed HIV medications as ordered, from January 27-31, 2019, and acknowledged that there was no documented notification to Resident 1's RP of the missed prescribed medication doses. The Administrator stated the facility was required to provide Resident 1 with the prescribed medications from the time of the admission to the facility, and that the facility did not have a specific method of storing the resident's home medications, but that there should be an appropriate method to do so.</p> <p>During an interview, on March 12, 2019, at 3:49 p.m., Registered Nurse 1 (RN 1), stated and acknowledged the facility did not have a specific method of storing the resident's home medications, but that there should be an appropriate method with proper labeling in place.</p> <p>During an interview with LVN (Licensed Vocational Nurse) 1, on March 13, 2019, at 11:23 a.m., they confirmed that the Resident did not receive their prescribed HIV medications as ordered, from January 27-31, 2019, and acknowledged that there was no documented notification to Resident 1's Responsible Party (RP) of the missed prescribed medication doses.</p> <p>A review of the facility's policy and procedure titled, "Administering Medications," revised April 2007, indicated medications shall be administered in a safe and timely manner, and as prescribed. The policy indicated medications must be administered in accordance with the orders, including any required time frame.</p> <p>A review of the facility's policy and procedure titled, "Storage of Medications," revised April 2007, indicated the facility shall store all drugs</p>	F 755			

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F 755	Continued From page 5 and biologicals in a safe, secure, and orderly manner. The policy indicated drugs shall be stored in an orderly manner in cabinets, drawers, carts, or automatic dispensing system. Each resident's medications shall be assigned to an individual cubicle, drawer, or other holding are to prevent the possibility of mixing medications of several residents.	F 755			