

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENTIFICATION NUMBER 035127	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 06/13/2019
NAME OF PROVIDER OF SUPPLIER PRESCOTT NURSING AND REHABILITATION CENTER		STREET ADDRESS, CITY, STATE, ZIP 864 DOUGHERTY STREET PRESCOTT, AZ 86305	
For information on the nursing home's plan to correct this deficiency, please contact the nursing home or the state survey agency.			
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)		
<p>F 0761</p> <p>Level of harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Ensure drugs and biologicals used in the facility are labeled in accordance with currently accepted professional principles; and all drugs and biologicals must be stored in locked compartments, separately locked, compartments for controlled drugs.</p> <p>Based on observations, staff interviews, and policy review, the facility failed to ensure that expired blood Vacutainer tubes and Pneumococcal vaccines were not available for use in 2 of 2 medication storage areas. The deficient practice could result in inaccurate laboratory results and the risk of ineffective vaccines.</p> <p>Findings include:</p> <p>An observation of the main medication storage area was conducted on (MONTH) 12, 2019 at 9:53 a.m., with the Assistant Director of Nursing (ADON/staff #60). At this time, there were 20 expired blood Vacutainer tubes with expiration dates that varied from (MONTH) 31, (YEAR) to (MONTH) 31, 2019.</p> <p>An observation of the secured unit medication storage refrigerator was conducted on (MONTH) 12, 2019 at 11:01 a.m., with a LPN (staff #117). Inside of the refrigerator there were two expired vials of pneumococcal vaccine, one had expired on (MONTH) 16, 2019 and the other had expired on (MONTH) 11, 2019.</p> <p>An interview was conducted with a Licensed Practical Nurse (LPN/staff #97) on (MONTH) 12, 2019 at 10:47 a.m. She stated that when she does a blood draw, she obtains a blood draw tube out of the main medication room drawer, checks the expiration date of the tube and if expired, it would be disposed. She stated that it is not the facility practice to have expired tubes available for blood draws, as there is a risk of an expired tube being used for a laboratory test.</p> <p>An interview was conducted with the ADON (staff #60) on (MONTH) 12, 2019 at 10:53 a.m. She stated there should not be any expired blood draw tubes available for use, and that she would expect all nurses to check the expiration date of the tube before using. She stated there is a risk of inaccurate laboratory results if an expired tube is used.</p> <p>An interview with a LPN (staff #117) was conducted on (MONTH) 12, 2019 at 11:12 a.m. She stated that expired medications/Pneumococcal vaccines should not be available for use. Staff #117 said that if a vaccine was administered it could pose the risk of being ineffective for the resident.</p> <p>On (MONTH) 12, 2019 at 3:00 p.m., the Administrator (staff #67) stated that the facility did not have a policy which addressed blood draw/lab supplies.</p> <p>An interview was conducted with the Director of Nursing (DON/staff #6) and the Administrator (staff #67) on (MONTH) 13, 2019 at 8:42 a.m. Staff #6 stated they would not want to have expired medications or biologicals available for use. Staff #6 said they have several checks and balances in place such as; pharmacy visits and checks for expired items, the nurses observe for expired items when in the medication cart, and the night shift nurses do a more formal check for outdated items. Staff #6 stated that the final check is done by the staff member using the item as they are expected to check the date. Staff #6 stated that the risk of a medication/biological being available for use would depend on the specific item, but as a standard of practice they would not want to use an expired product.</p> <p>Review of the facility policy regarding Medication Management revealed that in order to promote and maintain each resident's physical and mental well-being relative to his/her medication regimen, medication management shall be provided in accordance with professional standards and pursuant to the policies and procedures established by the pharmacy. The policy further noted that expired medications shall be disposed of in accordance with Safety Drug Pharmacy policies and procedures.</p>		
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.