Summary Statement of Deficiencies:

F 000 - INITIAL COMMENTS

Surveyor: 39190
A recertification health survey for compliance with 42 CFR Part 483, Subpart B, requirements for long term care facilities, was conducted from 8/13/18 through 8/15/18. The Neighborhoods at Brookview was found not in compliance with the following requirement: F759.

F 759 - Free of Medication Error Rts 5 Prent or More

§483.45(f) Medication Errors.
The facility must ensure that its-

§483.45(f)(1) Medication error rates are not 5 percent or greater;
This REQUIREMENT is not met as evidenced by:
Surveyor: 29162
Based on observation, record review, interview, and policy review, the provider failed to ensure medication had been administered according to policy and procedure by one of one licensed practical nurse (LPN) (A) causing a medication error rate of 6.67% for:
*One of one observed resident's (6) nasal inhalation medication had administered incorrectly.
*One of one randomly observed resident's (2) insulin had been administered incorrectly.
Findings include:

1. Observation and interview on 8/15/18 at 7:34 a.m. of LPN A during resident 2's Toujao insulin pen injection revealed she:
*Had not primed the insulin pen prior to administering the insulin.
*Stated that was her usual practice when

1. Nurse A has been re-educated regarding proper administration of insulin and nasal inhalation medication for residents #2 and #6.

2. All residents requiring insulin and nasal inhalation medication are at risk.

3. All professional nurses will be re-educated on properly administering insulins and nasal inhalation medications. All medication aides will be re-educated on properly administering nasal inhalation medications at an inservice on 9-12-18 by the Director of Nursing.

4. The Director of Nursing or her designee will audit 5 residents receiving insulin and/or nasal inhalation medications weekly x 4 and monthly x 3 to ensure proper medication administration techniques are followed. Results of the audits will be provided by the Director of Nursing monthly x 3 to the QAPI Committee with follow up as recommended by the committee.
administering an insulin pen injection.
*Stated she always primed the insulin pen the first
time after it was opened but not after that.

2. Observation on 8/15/18 at 8:20 a.m. of LPN A
while she administered resident 6's Nasacort
inhaled medication revealed she:
*Removed the cap from the medication and
inserted it approximately one-half inch into the
resident’s left nostril.
-Pressed the device to release the spray of
medication.
-Did not hold the opposite nostril closed.
-Repeated the same method for the right nostril.

3. Interview on 8/15/18 at 10:45 a.m. with the
director of nurses confirmed the above
medication administrations had been incorrect.

Review of the provider's February 2014 Insulin
Administration: Sq and Continuous IV infusion
policy made no mention of the use of an insulin
injection pen.

Review of the provider’s 1/31/13 Medication
Administration policy revealed no mention of
nasal inhaled medications.
E 000  Initial Comments

Surveyor: 39190
An initial health survey for compliance with 42 CFR Part 482, Subpart B, Subsection 483.73, Emergency Preparedness requirements for Long-Term Care Facilities was conducted from 8/13/18 through 8/15/18. The Neighborhoods at Brookview was found in compliance.
### Initial Comments

Surveyor: 25107

A recertification survey for compliance with the Life Safety Code (LSC) (2012 existing health care occupancy) was conducted on 8/14/18. The Neighborhoods at Brookview was found in compliance with 42 CFR 483.70(a)(1) requirements for Long Term Care Facilities.

The building will meet the requirements of the 2012 LSC for Existing Health Care Occupancies in conjunction with the provider's commitment to continued compliance with the fire safety standards.
<table>
<thead>
<tr>
<th>ID PREFIX TAG</th>
<th>SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)</th>
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<td>S 000</td>
<td>Compliance/Noncompliance Statement</td>
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<td>Surveyor: 39190</td>
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<td>A licensure survey for compliance with the Administrative Rules of South Dakota, Article 44:73, Nursing Facilities, was conducted from 8/13/18 through 8/15/18. The Neighborhoods at Brookview was found in compliance.</td>
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<tr>
<th>ID PREFIX TAG</th>
<th>PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)</th>
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<td>A licensure survey for compliance with the Administrative Rules of South Dakota, Article 44:74, Nurse Aide, requirements for nurse aide training programs, was conducted from 8/13/15 through 8/15/18. The Neighborhoods at Brookview was found in compliance.</td>
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