

# THE QUARTERLY CONNECTION

Quarterly Report from Pharma-Care, Inc., Health Care Consultation Specialists

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## State Survey Results of LTC Facilities: Recorded Trends

### F329 - Unnecessary Medication

- Medication with no clear diagnosis for use.
- Psychoactive targeted behavior sheets with no quantitative monitoring.
- Targeted behaviors too vague.
- Psychoactive summaries that are inaccurate as to medication changes during the month.
- Gradual dosage reductions not done in a timely manner.

### F332 - Medication Pass

- Aspirin, Celebrex, Ibuprofen and potassium all should be given with food.
- Chewable aspirin given in place of enteric-coated aspirin.
- Meds given outside of the specified time window for administration

### F431 - Labeling & Storage of Drugs/Biologicals

- Oral antibiotic box found with expired medication.
- In refrigerator, PPD and Insulin lacking date as to when opened.
- Medications that require dating when opened, not dated or with expired dates.
- ProSource with no dating as to when it was opened. (It is good for 90 days after opening.)
- Not removing medications of discharged residents from med carts and refrigerators.
- Refrigerating insulin pens after beginning use.

### F441 - Infection Control

- Hands not washed for the required 20 seconds.
- Staff and family members entering isolation rooms with no protective gear.

## "Borrowing" of Controlled Drug Substances(CDS)

"Borrowing" of a controlled drug substance from one person to another is prohibited by federal law. Only

the person whose name appears on the prescription label can utilize the medication. A borrowing policy CANNOT override this. Facilities should be able to provide all medications in a timely manner. If the pharmacy provider is unable to provide medications when needed, the back up pharmacy should be utilized. Surveyors have found instances of "borrowing" by reviewing the declining inventory sheets. In some cases, the nurse had written "borrowed"; other times a different resident's name appeared in the declining inventory sheets. Surveyors can also find it if the number of doses signed on the declining inventory sheet does not match the number of doses administered in the MAR.

Again, under no circumstances can you borrow CDSs. It is ILLEGAL.

## Several deficiencies have been reported regarding the use of insulin pens:

- Insulin pens should not be shared among patients.
- Pens should be labeled with the name of the patient and other required information on the pen, not the cap.
- Storage of insulin pens should be separated by patient. The outer surfaces of the pens may be contaminated and lead to cross contamination among patients. Place each patient's pens in an individual plastic bag or container.
- **In-use (opened) insulin pens should not be refrigerated!**

Date When Opened (or removed from refrigerator)	Discard after
Apidra Solo Star	28 days
Humalog KwikPen	28 days
Humalog Mix 75/25 KwikPen	10 days
Humalog Mix 50/50 KwikPen	10 days
Humulin 70/30 Pen	10 days
Humulin N Pen	14 days
Lantus SoloStar	28 days
Levemir FlexPen	42 days
NovoLog FlexPen	28 days
NovoLog Mix 70/30 FlexPen	14 days



**Pharma-Care, Inc.**  
Health Care Consultation Specialists  
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## EPIC Updates

Suggestion: Maintain an ongoing log

The sheer volume of information generated by increasingly complex patients can be overwhelming. The volume of information can cause patient records to be sent to EPIC multiple times. We have had instances when the same patient information was transmitted to EPIC up to three different times within 48 hours!

To avoid creating extra work for your staff, EPIC recommends following the procedure printed on your yellow EPIC signs that should be posted for the unit. **EPIC recommends keeping a log of both transmitted and received patient information.**

If you need more EPIC signs, ask your Pharma-Care, Inc. consultant pharmacist or call EPIC's dedicated phone directly at [1-732-943-3573](tel:1-732-943-3573).

## Disaster Preparedness Study Shows LTCs Need Special Consideration

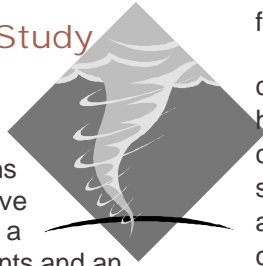
Sometimes the unthinkable happens as evidenced in May when a massive tornado hit Joplin, MO devastating a nursing home and killing ten residents and an employee.

A recent commentary in the *Journal Biosecurity and Bioterrorism* points out that, when planning disaster response programs, individuals living in long-term facilities deserve special considerations, especially for those with dementia and other cognitive impairments.

According to the authors, when planning disaster-response programs, organizers often overlook the needs of individuals with mental illnesses, such as dementia, schizophrenia, addiction and bipolar disorder.

Disaster-preparedness training for first responders should include advice on treating these individuals in a way that respects their dignity, the authors said.

Disasters could disrupt patients' access to crucial medications. If access is limited, withdrawal from certain medications can be deadly.



## In the News

⇒ A new study in the *Journal of General Internal Medicine* found that although e-prescribing systems may overall reduce errors, they may increase occurrences of certain types of errors.

*The Wall Street Journal* reports that researchers followed 17 physicians during implementation of a new e-prescribing system, and counted errors before implementation, 12 weeks after implementation, and one year after implementation. Errors involving dangerous abbreviation subsided, while errors in directions or frequency of medication instructions increased. Overall, errors were reduced from 35.7 errors per 100 prescriptions to 12.2 a year after implementation.

Source: *Patient Safety Monitor Alert* © 2011 HCPro, Inc.

⇒ Nearly one in seven nursing homes is cited for deficiencies in infection control practices each year according to a new study published in the May issue of the *American Journal of Infection Control*. The study examined the deficiency citation records used in Medicare/Medicaid certification between 2000 and 2007 and represented 96 percent of all U.S. nursing home facilities.

The researchers concluded there is a strong correlation between low staffing levels at these nursing homes and the receipt of an infection control deficiency citation. The researchers noted that when faced with staffing shortages, nurse aides, licensed practical nurses and registered nurses are likely to be rushed and may cut corners on infection control measures, such as proper hand washing. The high number of deficiency citations suggests there is a need for infection prevention programs to protect the elderly.

Source: *HealthDay* May 6, 2011

Welcome to Our New Clients  
Meadowview Care Center Residential  
Golden Rehabilitation Center  
SarahCare of South Plainfield  
House of the Good Shepherd

## SAVE THE DATE: October 11

New Jersey Long-Term Care Leaders Coalition Conference  
"Person-Centered Care Across the Continuum"  
8:30 am - 4:00pm Crowne Plaza, Monroe Twp, NJ  
Five credit hours pending for administrators, medical directors,  
nurses, physicians, pharmacists, social workers, dietitians  
Call: Maureen Ziegler (732) 574-9434, Ext 105



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