THE QUARTERLY CONNECTION

Quarterly Report from Pharma-Care, Inc. / Creative Care Consulting — Fourth Quarter 2018

P: (732) 574-9015 (PCI) / (732) 574-9434 (CCC) 136 Central Ave., Clark, New Jersey 07066 F: (732) 499-6778

State Survey Trends/Focus

Our review of last quarter state surveys identified the following areas of concern:

Unnecessary Medications

- PRN psychotropics beyond 14 days without clinical rationale
- Continuation of psychotropics without GDRs (gradual dose reductions)
- Physician rationale and nursing documentation not sufficient to support continuing current therapy

Infection control

- Improper hand washing techniques with respect to treatment pass; multiple glove changes without hand washing, as well as not dating the bandage before being placed on residents
- Oxygen tanks on the floor
- Blood pressure cuffs and glucometers not cleaned

Dialysis residents

- Communication book not being filled out and signed by facility nurse after each session
- Medications not adjusted for dialysis times

CDS accountability

- Narc boxes are not permanently affixed to refrigerators
- Proper record keeping and inventory (see below on DEA 222)
- Declining inventory sheets not matching documentation on MAR

Multiple fingersticks without insulin coverage

- Residents who have fingersticks three or four times a day that do not require insulin coverage need to be reviewed and routine diabetic therapy re-evaluated for optimum glycemic control

A "How-to" Review of Filling Out DEA Form 222: Narcotics in Oral Backup/Automated Dispensing Systems

Instruction checklist:

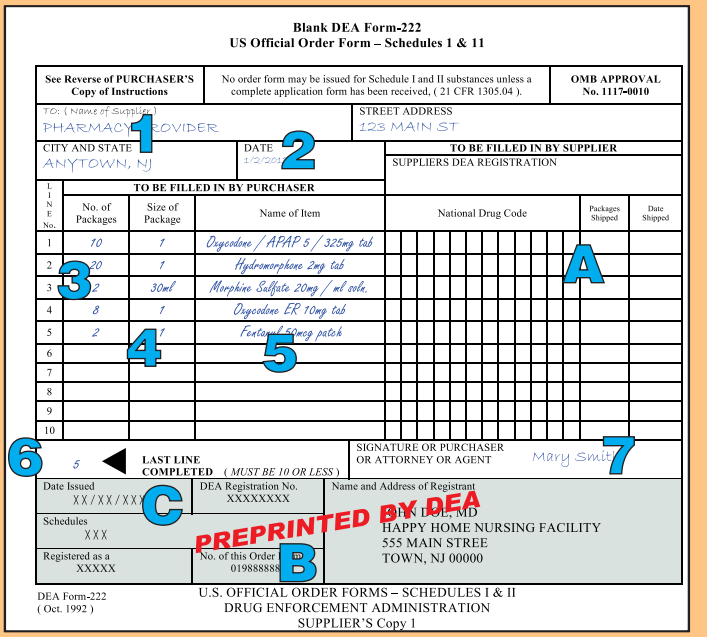
1. Write in supplier name, address
2. Date the form.
3. Indicate number of packages desired.
4. Size of package refers to the available size of the medication.
5. Name of item and desired strength of medication. (Name of item must be filled out completely by writing the drug name, strength, and dosage form.)
6. The last line completed must ALWAYS be filled in.
7. Make sure the Registered Practitioner signs the DEA 222 Form.

When the medication is received from the pharmacy:

A) Record "packages shipped" and "date shipped" on the right-hand side of the form for each line item.

B) Forms should be filed in numerical order.

C) Facility must do biennial inventory of these medications.



Blank DEA Form-222
US Official Order Form – Schedules 1 & 11

See Reverse of PURCHASER'S Copy of Instructions | No order form may be issued for Schedule I and II substances unless a complete application form has been received, (21 CFR 1305.04). | OMB APPROVAL No. 1117-0010

TO: (Name of Supplier) PHARMACY PROVIDER | STREET ADDRESS 123 MAIN ST

CITY AND STATE ANYTOWN, NJ | DATE 1/2/2018 | TO BE FILLED IN BY SUPPLIER: SUPPLIERS DEA REGISTRATION

TO BE FILLED IN BY PURCHASER

LINE No.	No. of Packages	Size of Package	Name of Item	National Drug Code	Packages Shipped	Date Shipped
1	10	1	Oxycodone / APAP 5 / 325mg tab			
2	20	1	Hydromorphone 2mg tab			
3	2	30ml	Morphine Sulfate 20mg / ml soln.			
4	8	1	Oxycodone ER 10mg tab			
5	2	1	Fentanyl 50mcg patch			
6						
7						
8						
9						
10						

5 ◀ LAST LINE COMPLETED (MUST BE 10 OR LESS)

SIGNATURE OR PURCHASER OR ATTORNEY OR AGENT: Mary Smith

Date Issued XX/XX/XXXX | DEA Registration No. XXXXXXXX | Name and Address of Registrant: JOHN DOE, MD, HAPPY HOME NURSING FACILITY, 555 MAIN STREE, TOWN, NJ 00000

Schedules XXX | Registered as a XXXXX | No. of this Order 019888888

PREPRINTED BY DEA

DEA Form-222 (Oct. 1992)

U.S. OFFICIAL ORDER FORMS – SCHEDULES I & II
DRUG ENFORCEMENT ADMINISTRATION
SUPPLIER'S Copy 1

Pharma-Care, Inc. has created its own "Biennial Controlled Substances Inventory Form". The Biennial Inventory requirements and our form can be found on our corporate website at: *pharmacareinc.com*, along with a detailed procedure for obtaining, executing, and filing of DEA Form 222. From the main page, click on *"Facility Page"*. Midpage you will find these two inservices: *Biennial Controlled Substance Inventory Inservice* and *Federal regulations DEA Form 222.*

We're Going Green

As part of our effort to go green, Pharma-Care will institute a paperless initiative. Beginning in January 2019, facilities receiving printed versions of their monthly report will receive only one copy, to the attention of their DON. We will continue to send the monthly reports via email to the administrator, DON, medical director, and as many other people as requested.

New Requirements in MDS Section N: Drug Regimen Review

The new MDS Section N reporting requirements on Drug Regimen Review are scheduled to go into effect on October 1, 2018. These represent a change in the reporting requirements and the prompt performance and follow up on Drug Regimen Review findings that are deemed "clinically significant" for newly admitted and readmitted Medicare Part A residents.

Requirements include that the review be completed as close to the time of admission as reasonably possible. The initial review begins with the medication reconciliation performed by the nurse when doing admission orders and continues throughout the residents stay under Medicare Part A.

To assist with compliance, many of our facilities utilize EPIC, our Electronic Pharmacist Information Consultant program.

In order to fulfill the requirement about timeliness, EPIC recommendations deemed "clinically significant" will now be marked as such on the review and will be sent to the prescriber, DON, or designee. These findings must then be acted upon on or before midnight of the next day for the immediate safety and well being of the resident.

"Clinically significant" irregularities found by the consultant pharmacists during the monthly visit will be brought to the attention of nursing and addressed while the consultant is in the facility, as well as included in the consultant's monthly report.

Visit our website at *pharmacareinc.com* for our detailed policy and procedure, or request a copy from your consultant pharmacist.

EPIC Corner

Electronic Pharmacist Information Consultant
(Medication reviews within 48 business hours)

EPIC Phone: 732-943-3573
EPIC Fax: 732-574-3469 or 3926
Email: epic@pharmacareinc.com

But It's in the Book!

As more discharge forms are being computerized, there is an increased possibility for a medication name, strength, or frequency of dosing to be incorrectly entered. The order entry person may be distracted when entering the data. Or-there may be noise on the unit. Or-the handwriting may be unclear.

When a resident arrives at a facility, it is not enough to just copy everything that is on the transfer sheet without question. If an order that is usually administered once daily is ordered three times daily, it should raise a red flag to the nurse transcribing the order and the physician should be contacted at once.

If an order contains unusual directions, that order should be clarified with the physician at once. When the order contains unusual directions for use, -e.g. give 25 mg of drug X twice daily by combining a 20 mg tablet with a 5 mg tablet, - the transcriber should immediately use available references to see if Drug X is available as a 25 mg dose and what is the usual dose. In the above example, Drug X is usually administered as 20 mg once daily.

If your provider pharmacy contacts you about an unusual or excessive dose, the response should not be "but it is on the transfer sheet". Action should be taken, and results fully documented.

If the EPIC consult alerts the facility about a potential problem, the physician should be contacted as soon as possible.

Word has it that survey teams will be looking at facilities antibiotic stewardship programs in depth starting November 2018. EPIC has been a full participant in several facility's antibiotic stewardship programs. For more information about how EPIC can help with this, email or call to the number above.