

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

PRINTED: 03/29/2018  
FORM APPROVED  
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>49E076</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>12/07/2017</b>
NAME OF PROVIDER OR SUPPLIER  <b>SNYDER NURSING HOME</b>			STREET ADDRESS, CITY, STATE, ZIP CODE <b>11 NORTH BROAD ST SALEM, VA 24153</b>	
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETION DATE
E 000	Initial Comments  An unannounced Emergency Preparedness survey was conducted 12/05/17 through 12/07/17. The facility was in substantial compliance with 42 CFR Part 483.73, Requirement for Long-Term Care Facilities. No complaint(s) were investigated during the survey.	E 000		
F 000	INITIAL COMMENTS  An unannounced Medicare/Medicaid standard survey was conducted 12/05/17 through 12/07/17. Corrections are required for compliance with 42 CFR Part 483 Federal Long Term Care requirements. The Life Safety Code survey/report will follow.	F 000		
F 758 SS=D	The census in this 45 certified bed facility was 43 at the time of the survey. The final survey sample consisted of 14 current Resident reviews (Residents #1 through #14 ) and 2 closed record review (Resident #15 and #16 ).  Free from Unnec Psychotropic Meds/PRN Use CFR(s): 483.45(c)(3)(e)(1)-(5)  §483.45(e) Psychotropic Drugs. §483.45(c)(3) A psychotropic drug is any drug that affects brain activities associated with mental processes and behavior. These drugs include, but are not limited to, drugs in the following categories: (i) Anti-psychotic; (ii) Anti-depressant; (iii) Anti-anxiety; and (iv) Hypnotic  Based on a comprehensive assessment of a resident, the facility must ensure that---	F 758		12/31/17

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

Electronically Signed

12/26/2017

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.

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F 758	<p>Continued From page 1</p> <p>§483.45(e)(1) Residents who have not used psychotropic drugs are not given these drugs unless the medication is necessary to treat a specific condition as diagnosed and documented in the clinical record;</p> <p>§483.45(e)(2) Residents who use psychotropic drugs receive gradual dose reductions, and behavioral interventions, unless clinically contraindicated, in an effort to discontinue these drugs;</p> <p>§483.45(e)(3) Residents do not receive psychotropic drugs pursuant to a PRN order unless that medication is necessary to treat a diagnosed specific condition that is documented in the clinical record; and</p> <p>§483.45(e)(4) PRN orders for psychotropic drugs are limited to 14 days. Except as provided in §483.45(e)(5), if the attending physician or prescribing practitioner believes that it is appropriate for the PRN order to be extended beyond 14 days, he or she should document their rationale in the resident's medical record and indicate the duration for the PRN order.</p> <p>§483.45(e)(5) PRN orders for anti-psychotic drugs are limited to 14 days and cannot be renewed unless the attending physician or prescribing practitioner evaluates the resident for the appropriateness of that medication. This REQUIREMENT is not met as evidenced by: Based on staff interview and clinical record review, the facility staff failed to ensure 1 of 16 residents (Resident #11) was free of an unnecessary medication. Resident #11's clinical record did not reveal that a GDR (gradual dose</p>	F 758	<p>F 578 CFR(s): 483:45 (c)(3)(e)(1)-(5) Free From Unnecessary Psychotropic Meds/PRN Use</p> <p>Snyder Nursing Home maintains, in</p>		

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F 758	<p>Continued From page 2</p> <p>reduction) determination had been done for Zoloft (an antidepressant/psychotropic) since 12/16/15.</p> <p>The findings included:</p> <p>The facility's contracted pharmacist failed to ensure a GDR for Zoloft was completed for Resident #11. The last GDR for Zoloft was recommended in December 2015.</p> <p>The clinical record of Resident #11 was reviewed 12/5/17 through 12/7/17. Resident #11 was admitted to the facility 4/3/07 with diagnoses that included but not limited to poliomyelitis, chronic obstructive pulmonary disease, dementia without behavioral disturbances, type 2 diabetes mellitus, major depressive disorder, anxiety, gastroesophageal reflux disease, edema, osteoporosis, kyphosis, obesity, asthma, and dysphagia.</p> <p>Resident #11's quarterly minimum data set (MDS) with an assessment reference date (ARD) of 9/26/17 assessed the resident with a cognitive summary score of 9 out of 15 in Section C.</p> <p>The surveyor reviewed Resident #11's clinical record for unnecessary medication. Resident #11's physician's orders for December 2017 included an order for Zoloft 50 mg (milligrams) each morning. Resident #11 had been receiving Zoloft for depression and had been receiving since 1/22/15.</p> <p>The surveyor reviewed the "Chronological Medication Regimen Review" from 12/2016 through 12/2017 and identified that Resident #11 had not had a GDR for Zoloft since 2015. At the request of the surveyor, Registered Nurse #1</p>	F 758	<p>accordance with accepted professional standards and practices, that facility resident comprehensive assessments do ensure residents who have not used psychotropic drugs are not given these drugs unless the medication is necessary to treat a specific condition as diagnosed and documented in the clinical record. Furthermore; Snyder Nursing Home maintains, that residents who use psychotropic drugs receive gradual dose reductions, and behavioral interventions, unless clinically contraindicated, in an effort to discontinue these drugs. Snyder Nursing Home also maintains, that residents should not receive psychotropic drugs pursuant to a PRN order unless that medication is necessary to treat a diagnosed specific condition that is documented in the clinical record.</p> <p>On December 7, 2017, a Facility Incident Report was filed on behalf of Resident #11 seeking clarification from the Medical Director, Pharmacist Consultant and the Interdisciplinary Care Plan Team pertaining to the need for Gradual Dose Reduction (GDR) of a psychotropic medication.</p> <p>On December 13, 2017, Resident #11's medical record was reviewed and recommendations made to the Attending Physician to consider an attempt to taper the current dosage of Zoloft, or if contraindicated, proved documentation to support the clinical rationale for why any attempted dose reduction would likely impair the residents function or cause</p>		

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F 758	<p>Continued From page 3</p> <p>placed a call to the contracting pharmacy at 9:56 a.m. on 12/7/17. The surveyor spoke with contracting pharmacist #2 regarding Zoloft and GDR. Pharmacist #2 stated Zoloft was on the psychotropic list and a GDR should have been done. The consultant pharmacist #2 stated she didn't know why one wasn't done.</p> <p>The surveyor informed the DON on 12/07/17 10:05 a.m. regarding no GDR since Dec 2015 for Zoloft for Resident #11. The DON stated she would pull the thinned records.</p> <p>On 12/07/17 11:54 AM the surveyor spoke with consultant pharmacist #1 regarding Zoloft GDR. The consultant pharmacist #1 stated that the surveyor was correct. The consultant pharmacist stated that the pharmacist, DON and medical director meet and do chart reviews throughout the year. The consultant pharmacist stated these are usually discussed verbally. "I'll have to check my laptop when I get to work and check if I wrote anything about the GDR and the discussion with the medical director. I may not have documented."</p> <p>On 12/07/17 12:45 p.m., the surveyor spoke with the DON regarding the GDR for Zoloft. The DON stated there was no documentation in the physician's visits that spoke about Zoloft or the GDR.</p> <p>No further information was provided to the surveyor prior to the exit conference on 12/7/17 regarding the pharmacy's failure to present to the attending physician or prescribing practitioner the need to attempt a GDR for Resident #11's Zoloft.</p>	F 758	<p>psychiatric instability by exacerbating an underlying medical or psychiatric disorder.</p> <p>On December 12th and 13th, 2017, an audit was performed by the Consultant Pharmacist on 100% of medical records including all residents who are currently receiving psychotropic medications. Recommendations were made for residents prescribed psychotropics that currently require a GDR, unless clinically contraindicated.</p> <p>On December 14, 2017, 100% of recommendations made by the consultant Pharmacist, (including GDR's due to review) were considered by the Attending Physician. Physician orders were written for all dose reductions indicated and if not indicated, written rationale for continuation of current therapy was included in the resident's medical record.</p> <p>On December 14, 2017, an audit of 100% of current MDS/Care Plans was performed by the Director of Nursing and the MDS Coordinator. This audit determined that residents receiving any anti-psychotic medication were also receiving appropriate behavior interventions.</p> <p>To prevent the reoccurrence of this type of deficiency, facility policy and procedure pertaining to psychotropic medications and Gradual Dose Reductions were reviewed for revision by the Medical Director, Director of nursing, Pharmacist Consultant, Administrator and the</p>		

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F 758	Continued From page 4	F 758	<p>Interdisciplinary Care Plan Team. This review was completed on 12/12/17.</p> <p>To prevent the reoccurrence of this type of deficiency, all Care Plan Team members and Nurses will received additional training and education pertaining to psychotropic medication use in a long term care setting. Additional training and education will include the use of anti-psychotics, anti-depressants, anti-anxiety and hypnotics in a long term care setting. This training will include; behavior analysis, behavioral triggers and non-drug interventions. This training will be conducted by the Director of Nursing or her designee and Relias Learning Services. This training will be completed by 12/31/2017.</p> <p>To prevent the reoccurrence of this type of deficiency, the Facility Quality Assurance/Quality Improvement Team will review the results of the monthly Medication Regimen Review conducted by the Facility Consultant Pharmacist. This will be an ongoing QA/QI measure.</p>		