STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER / SUPPLIER / CLIA IDENNTIFICATION NUMBER	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	555206	A. BUILDING _____ B. WING _____	**09/09/2020**

NAME OF PROVIDER OF SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP
BOULDER CREEK POST ACUTE	**12696 MONTE VISTA ROAD POWAY, CA 92064**

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)
F 0554 **Level of harm -** Minimal harm or potential for actual harm **Residents Affected -** Few	**Allow residents to self-administer drugs if determined clinically appropriate.** **NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on observation, interview and record review, the facility failed to assure one of three residents (Resident 1) was able to self-administer her own medications. As a result, Resident 1 was at risk to apply or take medication in an inappropriate manner, endangering her health. Findings: Resident 1 was admitted to the facility on [DATE] per the facility's Admission Record. Per Resident 1's history and physical, dated 6/15/20, the resident had the capacity to understand and make decisions. During an interview and observation on 8/3/20 at 9:30 A.M., Resident 1 stated I have two tubes of Cortisone 1% topical cream I keep at my bedside and pointed to the Cortisone 1% topical cream located in a basket on her bedside table. Resident 1 stated I use it for the back of my ears and put it on myself. During an observation, interview and record review on 8/3/20 at 9:35 A.M., LN 1 observed the Cortisone 1% cream tubes at Resident 1's bedside table in a basket. LN 1 stated Resident 1's Medication Administration Record [REDACTED]. LN 1 stated the IDT team (nursing, activity and social work staff including pharmacy and the physician that work together to implement care for the resident) should have assessed Resident 1's ability to take her medications by herself. During an interview on 8/3/20 at 10:05 A.M., The DSD stated Resident 1's doctor and the nursing staff had not assessed the resident's capability to take her own meds. The DSD stated the IDT team and her doctor should have assessed Resident 1's ability to take her own medications. During an interview on 8/3/20 at 10:30 A.M., the DON stated the nurses had not assessed Resident 1's ability to self administer her medications. The DON stated the nursing staff should have assessed Resident 1 and talked to the physician about Resident 1's potential to take her own medication. Per the facility's policy, dated December 2016, titled Self Administration of Medication .as part of their overall evaluation the staff and practitioner will assess each resident's mental and physical abilities to determine whether self-administering medication is clinically appropriate for the resident .
F 0761 **Level of harm -** Minimal harm or potential for actual harm **Residents Affected -** Few	**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.** **NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on observation, interview and record review, the facility failed to secure medication found in one of three resident's (Resident 1) room on her bedside table in a basket. As a result, residents with impaired reasoning were able to access the medication, which could potentially endanger their health. Findings: Resident 1 was admitted to the facility on [DATE] per the facility's Admission Record. Resident 2 was admitted to the facility on [DATE] with a [DIAGNOSES REDACTED].M., Resident 1 lived in the same room as Resident 2. During an interview and observation on 8/3/20 at 9:30 A.M., Resident 1 stated she kept the Cortisone 1% topical cream at the bedside, pointing to it in a basket on her bedside table. Resident 1 stated I use it for the back of my ears and I put it on myself. Resident 1 stated I have two tubes of Cortisone 1% topical cream I keep at my bedside and pointed to the two tubes on her bedside table in a basket. During an observation and an interview on 8/3/20 at 9:35 A.M., LN 1 observed the Cortisone 1% cream tubes on Resident 1's bedside table in a basket. LN 1 stated licensed nurses should keep Resident 1's Cortisone 1% topical cream in the medication cart and secure it. During an interview on 8/3/20 at 10:05 A.M., the DSD stated the licensed staff should have secured the medication so that no other residents had access to the medication. During an interview on 8/3/20 at 10:30 A.M., the DON stated nursing should have secured Resident 1's medication so that no other residents had access to it. Per the facility's policy, dated December 2016, titled Self Administration of Medication .self-administered medication must be stored in a safe and secure place, which is not accessible by other residents .

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE | (X6) DATE