

**DEPARTMENT OF BEHAVIORAL HEALTH AND DEVELOPMENTAL SERVICES
CORRECTIVE ACTION PLAN**

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License #: 142-04-005

Organization Name: Virginia Commonwealth University Health System Authority

Date of Inspection: 06-13-2022

Program Type/Facility Name: 04-005 VTCC Inpatient Unit

<u>Standard(s) Cited</u>	<u>Comp</u>	<u>Description of Noncompliance</u>	<u>Actions to be Taken</u>	<u>Planned Comp. Date</u>
12VAC35-105-150. (4) - The provider including its employees, contractors, students, and volunteers shall comply with: 4. Section 37.2-400 of the Code of Virginia and related human rights regulations adopted by the state board;	N	VTCC Inpatient Unit This regulation was NOT MET as evidenced by: See OHR citation below.	PR) 07/06/2022 Provide a statement of the issue that led to non-compliance and state <u>how you corrected/will correct</u> the deficient practice in this specific violation. PR) Patient received the wrong medication dose; specifically the nurse administered another patient's PRN of the same medication (wrong dose) to this patient. Nurse 1 pulled the medication from the Pyxis (under the wrong patient name), and proceeded to pass that medication to Nurse 2 who was caring for the patient at that time to administer. Nurse 2 administered the medication without following the barcode scanning procedure prior to giving the medication. After administration, Nurse 2 attempted to complete the barcode scanning process which is when the medication error was found as the medication would not scan. Nurse 2 who administered the wrong dose of medication on 4/25/2022 resigned, her last shift at VTCC was on 4/26/2022. Nurse 2 did not receive verbal or written counseling as she did not return back to the facility after 4/26/22. Nurse 1 was given verbal counseling by the Nurse Manager on May 4th, 2022. Include a plan of action to address <u>systematic changes (process/protocols, etc)</u> that have been or will be implemented to ensure you remain in compliance of the regulation. PR) All registered nurses were reminded to follow the medication administration policy at nursing staff meeting on May 4th 2022 @ 7:30 am which includes the 6 rights of medication administration and barcode medication	1/1/2023

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			administration procedures. The same information regarding the need to follow barcode scanning procedures was also verbally passed along in the daily huddles between nursing staff starting 4/26/22. Barcode medication administration compliance goal is set at 95% for all nurses. Include Staff by Title who will monitor the procedures implemented to ensure you stay in compliance with the regulation. Indicate the frequency for monitoring the plan including how it will be monitored (Ex: monthly audits, weekly chart reviews, daily checklist). PR) Monthly medication administration barcode scanning compliance audits will be completed by the nurse manager. By what date you will have each planned corrective action completed (Ex. Date training completed or Date protocol implemented). PR) Medication administration monthly barcode scanning compliance audits will be ongoing completed monthly until January 1, 2023. OLR) Accepted 07/12/2022	
12VAC35-115-50. B. (2) - In receiving all services, each individual has the right to: 2. Be protected from harm including abuse, neglect, and exploitation.	N	VTCC Inpatient Unit This regulation was NOT MET as evidenced by: "Neglect" means failure by a person, program, or facility operated, licensed, or funded by the department, excluding those operated by the Department of Corrections, responsible for providing services to do so, including	PR) 07/06/2022 Provide a statement of the issue that led to non-compliance and state how you corrected/will correct the deficient practice in this specific violation. PR) Patient received the wrong medication dose; specifically the nurse administered another	1/1/2023

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		nourishment, treatment, care, goods, or services necessary to the health, safety, or welfare of an individual receiving care or treatment for mental illness, intellectual disability, or substance abuse. - Upon review of CHRIS entry A-20220032, the provider's investigation determined Employee #1 administered the wrong medication to Individual #1 and neglect was found. - Upon review of the provider's written internal investigation report received 5/24/2022, Employee #1 did not give Individual #1 the correct prescribed dosage of medication and failed to follow CUHS (PH.AD.009) Medication Administration to ensure proper Medication Administration.	patient's PRN of the same medication (wrong dose) to this patient. Nurse 1 pulled the medication from the Pyxis (under the wrong patient name), and proceeded to pass that medication to Nurse 2 who was caring for the patient at that time to administer. Nurse 2 administered the medication without following the barcode scanning procedure prior to giving the medication. After administration, Nurse 2 attempted to complete the barcode scanning process which is when the medication error was found as the medication would not scan. Nurse 2 who administered the wrong dose of medication on 4/25/2022 resigned, her last shift at VTCC was on 4/26/2022. Nurse 2 did not receive verbal or written counseling as she did not return back to the facility after 4/26/22. Nurse 1 was given verbal counseling by the Nurse Manager on May 4th, 2022. <u>Include a plan of action to address systematic changes (process/protocols, etc) that have been or will be implemented to ensure you remain in compliance of the regulation.</u> PR) All registered nurses were reminded to follow the medication administration policy at nursing staff meeting on May 4th 2022 @ 7:30 am which includes the 6 rights of medication administration and barcode medication administration procedures. The same information regarding the need to follow barcode scanning procedures was also verbally passed along in the daily huddles between nursing staff starting 4/26/22. Barcode medication administration compliance goal is set at 95% for all nurses. <u>Include Staff by Title who will monitor the</u>	

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			procedures implemented to ensure you stay in compliance with the regulation. Indicate the <u>frequency for monitoring the plan including how it will be monitored</u> (Ex: monthly audits, weekly chart reviews, daily checklist). PR) Monthly medication administration barcode scanning compliance audits will be completed by the nurse manager. By what date you will have each planned corrective action completed (Ex. Date training completed or Date protocol implemented). PR) Medication administration monthly barcode scanning compliance audits will be ongoing completed monthly until January 1, 2023. OHR/OLR) Accepted 07/11/2022	

General Comments / Recommendations:

I understand it is my right to request a conference with the reviewer and the reviewer's supervisor should I desire further discussion of these findings. By my signature on the Corrective Action Plan, I pledge that the actions to be taken will be completed as identified by the date indicated.

Tonya Carr, Legal Operations Manager

(Signature of Organization Representative)

Date

C = Substantial Compliance, N = Non Compliance, NS = Non Compliance Systemic, ND = Non Determined