

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 425387	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 03/07/2025
NAME OF PROVIDER OR SUPPLIER Rice Estate Rehabilitation and Healthcare		STREET ADDRESS, CITY, STATE, ZIP CODE 100 Finley Road Columbia, SC 29203	

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)
<p>F 0755</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Many</p>	<p>Provide pharmaceutical services to meet the needs of each resident and employ or obtain the services of a licensed pharmacist.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on observation, staff interviews, record reviews, and facility policy review, the facility failed to implement pharmacy procedures for the reconciliation of controlled drugs on four (4) out of four (4) medication carts (Arbor Medication Cart Number One (#1), Arbor Medication Cart Number Two (#2), [NAME] Medication Cart, and [NAME] Medication Cart).</p> <p>Findings include:</p> <p>Review of the facility's policy titled, Controlled Substances, revised April 2019, revealed controlled medications are counted at the end of each shift. The nurse coming on duty and the nurse going off duty determines the count together.</p> <p>A review of the facility's documents titled Record of Narcotic and Medication Administration Record Review, and Change of Shift Controlled Medication Sheet, was identified by Licensed Practical Nurse (LPN)2, as the change of shift controlled drugs count sheets for March 2025, designated for the Arbor Medication Cart #2. The documents revealed that the on-coming nurse and/or off-going nurse failed to sign the sheets during shift change on 3/1/25, 3/2/25, and 3/3/25 to verify completion of the task to count the controlled drugs in the respective medication cart.</p> <p>Interview with LPN2, on 3/4/25, at approximately 11:40 a.m., he/she confirmed the observation and acknowledged that licensed nurses are expected to sign the count verification sheets at the change of shift.</p> <p>A review of the facility's document titled Shift-Change Controlled Substance Count Check, identified by Registered Nurse (RN)2 as the change of shift controlled count sheets for February through March 2025 for Arbor Medication Cart #1, revealed that the on-coming nurse and/or off-going nurse failed to sign the sheets during shift change on the following date to verify completion of the task to count the controlled drugs in the respective medication cart 2/23/25, 2/24/25, and 2/26/25, and 3/1/25.</p> <p>Interview with RN2, on 3/4/25, at approximately 12:22 p.m., confirmed the observation and acknowledged the licensed nurses are expected to sign the count verification at change of shift.</p> <p>(continued on next page)</p>

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.

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information)		
<p>F 0755</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Many</p>	<p>A review of a document titled Change of Shift Controlled Medication Sheet, identified by LPN5 as the change of shift controlled drugs count sheet for March 2025, for the [NAME] Medication Cart, revealed that the on-coming nurse and/or off-going nurse failed to sign the sheets during shift change on 3/1/25 to verify completion of the task to count the controlled drugs in the respective medication cart.</p> <p>Interview with LPN5, on 3/4/25 at approximately 12:53 p.m., he/she confirmed the observation and acknowledged that licensed nurses are expected to sign the count verification at change of shift.</p> <p>A review of a document titled Record of Narcotic and Medication Administration Record Review, and Narcotic/Control Count, identified by LPN7, as the change of shift controlled drugs count sheets for January 2025, February 2025, and March 2025, for the [NAME] Medication Cart, revealed that the on-coming nurse and/or off-going nurse failed to sign the sheets during shift change on the following dates to verify completion of the task to count the controlled drugs in the respective medication cart; 1/1/25, 1/5/25, 1/6/25, 1/20/25, 1/23/25, 1/27/25, 2/6/25, 2/16/25, 2/17/25, 2/22/25, and 3/1/25.</p> <p>During an interview with LPN7, on 3/4/25 at approximately 1:08 p.m., he/she confirmed the observation and acknowledged that licensed nurses are expected to sign the count verification at change of shift.</p> <p>A review of facility provided controlled drug count records titled, Record of Narcotic and Medication Administration Record Review, and Shift-Change Controlled Substance Count Check for January 2025 and February 2025 for the [NAME] Medication Cart, revealed that the on-coming nurse and/or off-going nurse failed to sign the sheets during shift change to verify completion of the task to count the controlled drugs on 1/3/25, 1/8/25, 1/9/25, and 1/10/25; and 2/25/25, 2/26/25, and 2/28/25.</p> <p>A continued review of facility provided controlled drug count records titled Record of Narcotic and Medication Administration Record Review, and Shift-Change Controlled Substance Count Check for January 2025 and February 2025, Arbor Medication Cart #1 revealed that the on-coming nurse and/or off-going nurse failed to sign the sheets during shift change on the following date to verify completion of the task to count the controlled drugs in the respective medication cart on 1/27/25, 2/4/25, 2/23/25, 2/24/25, and 2/26/25.</p> <p>A further review of facility provided controlled drug count records entitled Record of Narcotic and Medication Administration Record Review, and Shift-Change Controlled Substance Count Check for January 2025 and February 2025, for Arbor Medication Cart #2, revealed that the on-coming nurse and/or off-going nurse failed to sign the sheets during shift change to verify completion of the task to count the controlled drugs in the respective medication cart on 1/14/25, 1/27/25, 2/6/25, 2/14/25, 2/15/25, 2/25/25, 2/26/25, 2/27/25, and 2/28/25.</p> <p>During an interview, with the Director of Nursing (DON), on 3/5/25 at approximately 4:03 p.m., he/she confirmed that it was his/her expectation that nursing staff sign the Control Substance logs at change of shift to demonstrate that they have completed the count of the controlled drugs to identify any discrepancies. The DON further confirmed that the facility failed to implement pharmacy procedures for the reconciliation of controlled drugs.</p>		