The administrator/manager shall develop and implement a safe and effective system of medication control and use...  
19 CSR 30–86.042 (51) (RCF I), 19 CSR 30–86.043 (49)(RCF II) and 19 CSR 30–86.045 (46) (ALF) 

Most frequently cited deficiency in RCF/ALF level of care 

Common problems (discussed in detail in the next presentation) 
- Timing errors 
- Medications administered as directed by the physician 
- Infection control during administration 
- Storage of medications 

RCF I: 19 CSR 30–86.042 (18) 
RCF II: 19 CSR 30–86.043 (4) and 19 CSR 30–86.047 (17) 
ALF: 19 CSR 30–86.047 (19) 

Common problems identified during inspection 
- Late administration (of first and/or second step) 
- TB test results not documented 
- Testing of all employees (from all departments) 
- Staff not tested annually
(3) Protective Oversight

- Protective oversight shall be provided twenty-four (24) hours a day.
  19 CSR 30-86.042 (39) (RCF I), 19 CSR 30-86.043 (34) (RCFII) and 19 CSR 30-86.047(35) (ALF)

- Most Frequently Cited Class I in RCF level of care
- Common problems identified during inspection
  - Resident elopements
  - Falls with fractures
  - Failure to provide CPR
  - Failure to address needs of residents with history of drug/alcohol abuse

(4) Individualized Service Plan (ISP) Regulation

ALF: 19 CSR 30-86.047 (28)(H):

- Reviews the ISP with the resident, or legal representative of the resident, at least annually or when there is a significant change in the resident’s condition which may require a change in services; II

Individualized Service Plans

- Common problems identified during inspection
  - Failure to allow resident and/or legal representative during ISP planning
  - ISP after a significant change in condition
(5) Proper Care in accordance with ISP

- ALF: 19 CSR 30–86.047 (36)
  - Residents shall receive proper care as defined in the individualized service plan. I/II

- Most frequently cited Class I in ALF

Proper Care Per ISP (cont’d)

- Common problems identified during inspection
  - Follow physician medication and treatment orders
  - Care and services to prevent falls
  - Follow physician orders to obtain laboratory tests
  - Communicate abnormal lab results to the physician
  - Personal hygiene (incontinence care) for dependent residents
  - Behavior and substance abuse monitoring
  - CPR not performed

(6) Physician statement for employees to work in a long term care setting

- I) Written statement signed by a licensed physician or physician’s designee indicating the person can work in a long-term care facility and indicating any limitations; III
  RCF I: 19 CSR 30–86.042 (21)(I), RCF II: 19 CSR 30–86.043 (19), and 19 CSR 30–86.047 (20)(I) ALF

- Common Problems identified during inspection
  - Missing or incomplete Fit for Duty statement from a physician
(7) Admission Records

- Admission information including the resident’s name; admission date; confidentiality number; previous address; birth date; sex; marital status; Social Security number; Medicare and Medicaid numbers (if applicable); name, address and telephone number of the resident’s physician and alternate; diagnosis; name, address and telephone number of the resident’s legally authorized representative or designee to be notified in case of emergency; and preferred dentist, pharmacist and funeral director; III
  - RCF I: 19 CSR 30-86.042 (62)(A), RCF II: 19 CSR 30-86.043 (58)(A), and 19 CSR 30-86.047(58)(A) ALF

Admission Records (cont’d)

- Common problems identified during inspection
  - Emergency contact missing or incomplete
  - Incomplete or missing diagnoses
  - Missing or incomplete required information:
    - dentist
    - pharmacy
    - funeral director

(8) Kitchen Requirements

- At all times, including while being stored, prepared, displayed, served or transported to or from the facility, food shall be protected from potential contamination,
  - RCF I: 19 CSR 30-87.030 (13), RCF II: 19 CSR 30-87.030 (13), and
  - ALF: 19 CSR 30-87.030 (13)

- Common problems (discussed in detail during combined presentation)
  - Food Storage Requirements
  - Food Preparation
  - Food Service Sanitation
  - (to be discuss
19 CSR 30–87.030 (2) (for all levels of care)
Employees shall thoroughly wash their hands and the exposed portions of their arms with soap and warm water before starting work, during work as often as is necessary to keep them clean and after smoking, eating, drinking or using the toilet. Employees shall keep their fingernails clean and trimmed. II/III

Common problems identified during an inspection (dirty to clean without handwashing)
- Loading the dishwasher
- Handling trash/trashcan
- Before and after handling raw meat or eggs

The facility shall not admit or continue to care for residents whose needs cannot be met. If necessary services cannot be obtained in or by the facility, the resident shall be promptly referred to appropriate outside resources or discharged from the facility. I/II
- 19 CSR 30–86.042 (30) RCF I, 19 CSR 30–86.043 (27) RCF II, and 19 CSR 30–86.047 (10) ALF
Nursing Care and Services Requirements

- Common problems identified during inspection
  - ISP coordinated with private sitter/caregiver (ALF)
  - Care provided according to ISP (ALF)
  - Unqualified staff providing care (LIMA providing wound care) (RCF)

Most Frequently Cited Fire Safety Regulations

- Safe electrical wiring
- Emergency lighting
- Substantially constructed and maintained
- Fire alarm system
- Fire drill/evacuation

Questions?