

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  135147	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  01/10/2025
NAME OF PROVIDER OR SUPPLIER  Meridian Meadows Transitional Care		STREET ADDRESS, CITY, STATE, ZIP CODE 2656 E Magic View Drive Meridian, ID 83642	

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 0726</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Ensure that nurses and nurse aides have the appropriate competencies to care for every resident in a way that maximizes each resident's well being.</p> <p>50981</p> <p>Based on observation, review of policy, and interviews, it was determined the facility failed to ensure Certified Medication Aides (CMAs) performed tasks which they had the knowledge, skills, and competencies. This was true for 4 of 4 CMAs reviewed for medication administration competencies. This failure increased the risk for harm to residents receiving insulin when the CMAs did not have the appropriate medication administration competencies and skill sets to assure resident safety during insulin administration. Findings include:</p> <p>The facility Licensed Nurse Delegation and Supervision policy, undated, documented the RN/LPN must ensure the CMA is competent and trained to administer the medication being delegated.</p> <p>The facility CMA Restrictions and Prohibitions policy, undated documented CMAs cannot administer medication via parenteral routes and CMAs cannot convert or calculate medication dosages.</p> <p>The National Institute of Health Library, accessed on 1/10/24, documented, there are four types of parenteral injections, including intradermal, subcutaneous, intramuscular, and intravenous.</p> <p>On 1/8/25 at 11:50 AM, CMA #1 was observed calculating insulin dosages, preparing insulin injections, and administering the subcutaneous injections for two residents (#10 and #15). CMA #1 stated he was allowed to calculate and administer insulin injections because he had a training on it.</p> <p>The facility's skills check off sheets for CMA #1, CMA #2, CMA #3, and CMA #4 were reviewed and did not include insulin administration.</p> <p>On 1/10/24 at 9:25 AM, the Administrator confirmed the facility did not specifically have a CMA competency training for insulin dosage calculation and subcutaneous injection.</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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<p>F 0761</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Many</p>	<p>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.</p> <p>50981</p> <p>Based on policy review, observation, and staff interview, it was determined the facility failed to ensure medications were secure and inaccessible to unauthorized staff and residents. This was true for 1 of 3 medication carts observed in the facility. This failed practice created the potential for harm if an unauthorized person obtained medications left unattended and unsecured by staff. Findings include:</p> <p>CMS SOM-Appendix PP, accessed on 1/10/25, documents, in accordance with State and Federal laws, the facility must store all drugs and biologicals in locked compartments.</p> <p>On 1/6/25 at 10:25 AM, the medication cart on the 200 hall was observed to be unlocked and unmonitored by staff.</p> <p>On 1/6/25 at 10:33 AM, RN #1 returned to the cart and stated she should have locked the cart when she was away, and she had been trying to remember to do so.</p> <p>On 1/10/25 at 10:40 AM, the Director of Nursing (DON) stated RN #1 did not follow the facility's process for locking the cart before stepping away from it.</p>