DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	345473	A. BUILDING ____ B. WING ____	C 07/05/2012

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
WILORA LAKE HEALTHCARE CENTER	6001 WILORA LAKE ROAD CHARLOTTE, NC 28212

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETION DATE
F 312 SS=D	483.25(a)(3) ADL CARE PROVIDED FOR DEPENDENT RESIDENTS A resident who is unable to carry out activities of daily living receives the necessary services to maintain good nutrition, grooming, and personal and oral hygiene. This REQUIREMENT is not met as evidenced by: Based on observations, staff interviews and record review the facility failed to provide nail care for a dependent resident for one (1) of six (6) sampled residents (Resident #1). The findings are: Resident #1 was readmitted to the facility on 9/26/11 with diagnoses that included cerebravascular accident, osteoporosis among others. The most recent Minimum Data Set (MDS) dated 5/1/12 specified the resident had no cognitive impairment but required extensive assistance with Activities of Daily Living (ADLs) including personal hygiene. The MDS also specified the resident did not reject care. Resident #1's medical record was reviewed and revealed a care plan updated 5/12/12 related to ADL care that specified the resident required extensive assistance and was to have compete personal care and be well groomed. On 7/5/12 at 11:55 a.m. observations were made of Resident #1 that revealed her ten (10) toenails and ten (10) fingernails were approximately ¼ inch long and jagged. The resident was	F 312	This Plan of Correction does not constitute an admission or agreement by the Provider of the truth of the facts alleged or conclusions set forth in this Statement of Deficiencies. This Plan of Correction is prepared solely because it is required by State and Federal law. A. Resident # 1's toenails and fingernails were immediately trimmed on July 5, 2012 B. An audit of all residents' Toenails and fingernails was completed on July 5, 2012 and care provided as needed. C. On July 6, 2012 and July 23, 2012 Nursing Staff were reeducated on assuring that residents receive proper nail care. Nail Care will be assessed during resident's weekly skin sweeps. Residents requiring care by a Podiatrist will be scheduled during the facility Podiatrist monthly visit or a Community Podiatrist of their choice. Nail care will be randomly audited for six residents by the DON	

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
Anne Jackson	Administrator	7-31-12

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.

Original Signature 7/24/12 MLP

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BY:

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F 312	Continued From page 1 interviewed and stated she would like to have her nails trimmed. She reported she was unaware of the last time her nails had been trimmed and added she usually had to ask staff. The Resident stated that her toenails were too long and had started to bother her to the point that wearing socks was uncomfortable. She also reported she had fragile skin and was afraid her fingernails might cause a skin tear if tried to scratch her skin. On 7/5/12 at 12:05 p.m. the Director of Nursing (DON) was interviewed and reported that nurse aides were expected to trim residents' fingernails as needed during the morning care. She added that licensed nurses were responsible for trimming non-diabetic residents' toenails. The DON reported that nurse aides were expected to monitor residents' toenails during their showers and notify the licensed nurse of residents who needed their toenails trimmed. She stated that the licensed nurse was expected to trim non-diabetic residents' toenails or add diabetic residents' name to the podiatrist list to have their toenails trimmed. On 7/5/12 at 12:10 p.m. licensed nurse (LN) #1 was interviewed and reported that she had not been asked to trim Resident #1's toenails. She observed Resident #1's toenails at this time and stated they were too long and needed to be trimmed. LN #1 stated she would expect the nurse aide to have trimmed the resident's fingernails and to have notified her of Resident #1's toenails. On 7/5/12 at 12:20 p.m. nurse aide (NA) #1 assigned to care for Resident #1 was interviewed and stated she was trained to provide fingernail	F 312	or designee 3 times weekly for four weeks, then one time weekly for four weeks and monthly thereafter for ten months. D. Results of QI monitoring will be reported to the RM/QI Committee monthly for 12 months. The Committee will assure compliance and make revisions to the plan as necessary. E. Completion Date 7/28/2012	

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F 312	Continued From page 2 care during her daily morning care. She added that all residents were seen by the podiatrist for toenail care. She stated that she was not aware she needed to report concerns to the licensed nurse regarding the condition of a resident's toenails. She added that she was aware that Resident #1's fingernails and toenails were long and needed to be trimmed but offered no explanation why she failed to trim Resident #1's fingernails during her morning care. On 7/5/12 at 3:20 p.m. the DON was interviewed and reported she would have expected the nurse aide to have trimmed the resident's fingernails and to have notified the licensed nurse about the condition of the resident's toenails.	F 312		