

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

PRINTED: 03/20/2013
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 345550	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 03/07/2013
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NAME OF PROVIDER OR SUPPLIER WHITE OAK OF WAXHAW	STREET ADDRESS, CITY, STATE, ZIP CODE 700 HOWIE MINE ROAD WAXHAW, NC 28173
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(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
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F 000 INITIAL COMMENTS

F 242 483.15(b) SELF-DETERMINATION - RIGHT TO MAKE CHOICES
SS=D

No deficiencies were cited as a result of the complaint investigation. Event ID # NETJ11

The resident has the right to choose activities, schedules, and health care consistent with his or her interests, assessments, and plans of care; interact with members of the community both inside and outside the facility; and make choices about aspects of his or her life in the facility that are significant to the resident.

This REQUIREMENT is not met as evidenced by:

Based on resident and staff interviews, and record review, the facility failed to offer a choice in the type and frequency of baths for 3 of 3 sampled residents (Residents #17, #76 and #107).

The findings are:

1. Resident #17 was admitted to the facility on 03/20/10 with diagnoses which included macular degeneration with blindness.

Review of Resident #17's activity interview dated 11/06/12 revealed Resident #17 indicated a choice between a tub bath, shower, bed bath or sponge bath was marked as very important to Resident #17. There was no type of bath indicated on the activity interview.

Review of Resident #17's quarterly Minimum Data Set (MDS) dated 01/29/13 revealed

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F 242

F242
White Oak of Waxhaw assures that the residents have the right to make choices.

Resident #17, #76 and #107 were re-interviewed regarding their preference in the type and frequency of baths. Completed 3/6/2013.

All interviewable resident (8-15 BIMS) re-interviewed for their preferences for type and frequency of baths. Authorized representatives of residents with BIMS 0-7 were interviewed for type and frequency of baths. Care guide in SmartCharting updated for any preference changes. Staff to complete by 3/31/2013. Life Enrichment staff will interview upon admission for type and frequency of baths for all new admits. Interviewable residents 8-15 BIMS and authorized representatives of residents with BIMS 0-7 will be interviewed at quarterly assessments for choice of type and frequency of baths on-going.

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

Benita D Chapman

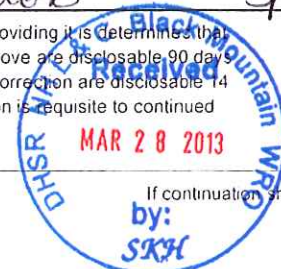
TITLE

Administrator

(X6) DATE

3/27/13

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.



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F 242

Continued From page 1

moderately impaired cognition. Resident #17 could understand and be understood by others and required the physical assistance of one person with bathing. Resident #17's care plan updated 02/11/13 directed staff assistance with showers.

Review of the nurse aide assignment sheet for Resident #17 revealed twice weekly scheduled bath days on Monday and Thursday. There was no indication of the type of bath.

Interview with Resident #17 on 03/05/13 at 10:01 AM revealed a preference for tub baths. Resident #17 reported staff did not give a choice between a shower and bath. Resident #17 explained a tub bath might take "too long" for the staff since assistance was required. Resident #17 explained she did not know if a tub bath was available due to her blindness.

Interview with Nurse #1 on 03/06/13 at 2:30 PM revealed residents can receive either a tub bath or shower. Nurse #1 explained she did not know if staff offered a choice each time but residents could "speak up" and tell the staff their choice.

Interview with Nurse Aide (NA) #1 on 03/06/13 at 3:27 PM revealed Resident #17 received assistance with showers on Monday and Thursday evenings. NA #1 explained Resident #17 transferred from another unit in the facility and always received showers. NA #1 reported she did not ask Resident #17's preference of a tub or shower.

Interview with the Director of Nursing on 03/06/13 at 3:45 PM revealed staff should give residents a

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The Nursing staff will be re-educated to offer a choice of bathing options on their designated shower day by the Staff Development Coordinator. CNA Assignment Sheets have been updated to reflect option for tub bath or shower choice for each resident. Re-education completed by Staff Development Coordinator by 3/31/2013. Life Enrichment staff were re-inserviced on 3/25/2013. Life Enrichment staff will update care guide in SmartCharting for frequency upon admission and/or resident/authorized representative requests quarterly, on-going for all residents. Bath options will be addressed at Orientation for new hires.

Nursing Administration (DON, ADON, SDC) will monitor all 4 neighborhoods' CNA Assignment Sheets to verify residents are offered a choice in type of bath:

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F 242	<p>Continued From page 2 choice between a tub bath and shower.</p> <p>Interview with the Administrator on 03/07/13 at 10:15 AM revealed residents were given a choice between a tub bath and shower upon admission and annually when asked importance of choice between types of bath which included tub and shower.</p> <p>2. Resident #76 was admitted to the facility on 07/08/10 with diagnoses which included glaucoma.</p> <p>Review of Resident #76's activity interview dated 09/13/12 revealed Resident #76 indicated a choice between a tub bath, shower, bed bath or sponge bath was marked as very important to Resident #76. A shower type bath was circled on the activity interview.</p> <p>Review of Resident #76's quarterly Minimum Data Set (MDS) dated 12/13/12 revealed intact cognition with the ability to understand and be understood by others. Resident #76 required the physical assistance of one person with bathing. Resident #76's care plan directed staff to assist activities of daily living.</p> <p>Review of the nurse aide assignment sheet for Resident #76 revealed twice weekly scheduled bath days on Monday and Thursday. There was no indication of the type of bath.</p> <p>Interview with Resident #76 on 03/05/13 at 10:25 AM revealed a preference for "a good old fashioned tub bath where I could soak" Resident #76 explained she would require more assistance with a tub bath due to a fear of falling.</p>	F 242	<ul style="list-style-type: none"> - Review of 10 residents per neighborhood daily times one week. - Review of 10 residents per neighborhood 3 times per week for 3 weeks. - Review of 10 resident per neighborhood 2 times per week for 2 weeks. - Review of 10 residents per neighborhood weekly times 2 weeks. - Then, as needed <p>Issues or trends identified are reported in QI daily stand-up meeting weekly times 8 weeks and discuss during quarterly QI as needed.</p> <p>DON/ADON/SDC will be responsible for on-going compliance for tag 242.</p>	4/4/13
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Interview with Nurse Aide (NA) #2 on 03/05/13 at 2:50 PM revealed she assisted Resident #76 with twice weekly showers. NA #2 explained Resident #76 never requested a tub bath and did not ask Resident #76 which bath type was preferred. NA #2 explained a choice would not be routinely given and she never thought about offering a choice.

Interview with Nurse #1 on 03/06/13 at 2:30 PM revealed residents can receive either a tub bath or shower. Nurse #1 explained she did not know if staff offered a choice each time but residents could "speak up" and tell the staff their choice.

Interview with the Director of Nursing on 03/06/13 at 3:45 PM revealed staff should give residents a choice between a tub bath and shower.

Interview with the Administrator on 03/07/13 at 10:15 AM revealed residents were given a choice between a tub bath and shower upon admission and annually when asked importance of choice between types of bath which included tub and shower.

3. Resident #107 was admitted to the facility on 12/30/11 with diagnoses which included hemiplegia of the dominant side.

Review of Resident #107's quarterly Minimum Data Set (MDS) dated 01/24/13 revealed intact cognition with the ability to understand others and be understood. Resident #107 required the physical assistance of one person with bathing.

Review of Resident #107's care plan dated

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F 242 Continued From page 4
01/31/13 revealed direction for staff to assist with bathing.

Review of the nurse aide assignment sheet for Resident #107 revealed twice weekly scheduled bath days on Monday and Friday. There was no indication of the type of bath.

Interview with Resident #107 on 03/04/13 at 2:39 PM revealed a preference for daily showers. Resident #107 explained he received showers twice weekly and "would settle for three times a week." Resident #107 reported he did not receive a choice and thought he could not showers more than twice a week.

Interview with Nurse Aide (NA) #2 on 03/05/13 at 2:55 PM revealed Resident #107 received twice weekly showers. NA #2 explained the nurse aide assignment sheet directed twice weekly showers on the day shift so did not ask Resident #107 if he preferred more frequent showers. NA #2 explained if Resident #107 asked for a shower on a non-shower day she would try to work him into her schedule.

Interview with Nurse #1 on 03/06/13 at 2:30 PM revealed residents can receive either a tub bath or shower. Nurse #1 explained she did not know if staff offered a choice each time but residents could "speak up" and tell the staff their choice.

Interview with the Director of Nursing on 03/06/13 at 3:45 PM revealed staff should give residents a choice between a tub bath and shower.

Interview with the Administrator on 03/07/13 at 10:15 AM revealed residents were given a choice

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F 242 Continued From page 5
between a tub bath and shower upon admission and annually when asked importance of choice between types of bath which included tub and shower.

F 242

F 246 483.15(e)(1) REASONABLE ACCOMMODATION OF NEEDS/PREFERENCES
SS=D

F 246

A resident has the right to reside and receive services in the facility with reasonable accommodations of individual needs and preferences, except when the health or safety of the individual or other residents would be endangered.

F246
White Oak of Waxhaw assures that the residents have the right to receive services in the facility with reasonable accommodation of individual needs/preferences.

This REQUIREMENT is not met as evidenced by:
Based on observation, staff and family interviews, and record review, the facility failed to provide a wheelchair at the proper seat height for 1 of 3 sampled residents (Resident #79).

Resident #79 was immediately placed in proper wheelchair on 3/6/2013 so both feet touched the floor.

The findings are:

Visual verification for all other residents was completed on 3/6/2013 to assure they were in the correct chair. (Wheelchairs are labeled with resident's name.)

Resident #79 was admitted to the facility on 10/12/12 with diagnoses which included dementia and glaucoma.

The Nursing staff were re-educated to provide residents with wheelchairs at the proper seat height and check the label on the wheelchair to assure residents are in the correct chair. Re-education completed by Staff Development Coordinator by 3/31/2013.

Review of Resident #79's quarterly Minimum Data Set (MDS) dated 01/17/13 revealed severely impaired cognition and required the limited assistance of one person with locomotion.

Observation on 03/04/13 at 12:07 PM revealed Resident #79 seated in a wheelchair at a table and both feet did not touch the floor. There were no foot rests on the wheelchair.

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Observation on 03/04/13 at 2:40 PM revealed Resident #79 seated in a wheelchair at a table with both feet dangling. There were no foot rests on the wheelchair.

Observation on 03/04/13 at 3:23 PM revealed Resident #79 seated in a wheelchair at a table with both feet dangling. There were no foot rests on the wheelchair.

Observation on 03/05/13 at 9:41 AM revealed Resident #79 self propelled in the wheelchair using hands on both wheels and the toes of the left foot. Resident #79's right foot did not touch the floor. There were no foot rests on the wheelchair.

Observation on 03/05/13 at 9:48 AM revealed Nurse Aide #2 transported Resident #79 to the activity area. Resident #79's feet did not touch the floor. There were no foot rests on the wheelchair.

Observation on 03/05/13 at 3:02 PM revealed Resident #79 seated in a wheelchair in an activity area and both feet do not touch the floor. There were no footrests on the wheelchair.

Observation on 03/06/13 at 8:36 AM revealed Resident #79 seated in a wheelchair at a table with the tips of both feet touching the floor. There were no foot rests on the wheelchair.

Observation on 03/06/13 at 10:02 AM revealed the activity aide transported Resident #79 to a musical activity. Resident #79's feet did not touch the floor and there were no foot rests on the

F 246

Environmental Services staff inserviced to check all wheelchairs for name tags weekly during cleaning and report any concerns with missing or illegible name tags to the Nurse Supervisor for replacement.

Residents are screened on admission and at least quarterly by the facility Restorative Nurse. Skilled therapy services to identify ADL needs and/or services to include appropriate seating on an on-going basis.

Nursing Administration (DON, ADON, SDC) will monitor all 4 neighborhoods' resident seating to verify correct appliance is being utilized.

- Observation of 12 residents per neighborhood daily times one week.

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F 246	<p>Continued From page 7 wheelchair.</p> <p>Interview with Nurse Aide (NA) #2 on 03/06/13 at 11:13 AM revealed Resident #79 always used the wheelchair and never used foot rests. NA #2 explained Resident #79 used both hands to turn the wheels of her wheelchair in order to self propel.</p> <p>Observation on 03/06/13 at 11:35 AM revealed Resident #79 seated in the wheelchair at the table with both feet on the table pedestal.</p> <p>Interview on 03/06/13 at 2:21 PM with Resident #79's family member revealed Resident #79's current wheel chair was a new one. The family member explained Resident #79's feet could reach the floor in the previous wheel chair and did not know the reason for the change.</p> <p>Interview with Nurse #1 on 03/06/13 at 2:25 PM revealed Resident #79 should be in a different wheelchair with a lower seat. Nurse #1 explained she did not notice the seat height and the wheelchair in use was not Resident #79's usual wheelchair.</p> <p>Interview with the Director of Nursing on 03/06/13 at 2:54 PM revealed nursing staff to ensure the proper wheelchair seat height for Resident #79.</p>	F 246	<ul style="list-style-type: none"> - Observation of 12 residents per neighborhood 3 times per week for 3 weeks. - Observation of 12 residents per neighborhood 2 times per week for 2 weeks. - Observation of 12 residents per neighborhood weekly times 2 weeks. - Then, as needed. <p>Issues or trends identified are reported in QI daily stand-up meeting weekly times 8 weeks and discuss during quarterly QI as needed.</p> <p>Restorative Nurse will be responsible for on-going compliance for tag 246.</p>	4/4/13
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