STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	345187	A. BUILDING _____ B. WING _____	06/27/2014

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
GRACE HEIGHTS HEALTH & REHAB CTR	109 FOOTHILLS DRIVE MORGANTON, NC 28655

(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 242 SS=D	483.15(b) SELF-DETERMINATION - RIGHT TO MAKE CHOICES 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 record review, residents and staff interviews, the facility failed to provide a choice of how frequently residents wanted a shower for 2 of 2 residents (resident #102 and #79). Findings included: 1. Resident #102 was admitted to the facility on 09/05/12 with diagnoses including hypertension, chronic kidney disease and osteoporosis. Record review of the most recent Minimum Data Set (MDS) dated 06/07/14 indicated Resident #102 was moderately cognitively intact for daily decision making with no short or long term memory problems and was able to understand and make herself understood. The MDS indicated she had not refused care during the observation period. During an interview with Resident #102 on 06/25/14 at 3:15 PM she stated she had not been asked how frequently she wanted a bath or shower. She revealed she was told she would receive 2 showers a week and she said she	F 242	F 242 1. Resident #102 was asked by the social worker on 7/15/14 about her preference for bathing date, time, and type. Resident #102 stated she was "happy" with current bath schedule and wanted no changes. Resident #79 was asked by the social worker on 07/15/14 about her preference for bathing date, time, and type. Resident #79 stated "she did not like to get out of bed," "preferred bed baths," and would let the staff know when she "feels like taking more baths." Care plan for Resident # 79 was changed accordingly and implemented as indicated. 2. All residents have the potential to be affected by this alleged deficient practice. All residents or their Responsible Party (RP) were asked about bathing preferences by the social worker or her designee. A new form "Bathing Preferences Choice Sheet" (BPCS) was completed for every resident. All changes requested were added to the individual care plans and implemented as indicated by the team.	7/25/14

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
Electronically Signed		07/17/2014

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F 242	Continued From page 1 would like to have more than 2 showers a week. An interview was conducted on 06/26/14 at 10:07 AM with Nurse Aide (NA) #1, who provided care for resident #102. She stated resident #102 received 2 showers a week. The NA said she was not sure if the facility had offered residents and families more showers a week. She revealed residents could have more showers a week if they requested it. She stated she had not been aware Resident #102 had requested more frequent showers. An interview was conducted on 06/27/14 at 8:53 AM with Nurse #1. She stated residents have received 2 baths or showers a week and if they request more could receive more. Nurse #1 was not sure if preferences for frequency of baths and showers had been assessed. An interview was conducted on 06/27/14 at 9:01 AM with the nurse Unit Manager who attends several of the interdisciplinary team meetings where staff discuss 24 hour reports, changes in condition and treatment changes. She stated residents receive 2 showers a week as scheduled and if residents want more they need to request more. She was not sure if residents had been assessed for frequency of showers on admission. An interview was conducted on 06/27/14 at 9:25 AM with the Social Worker (SW). She revealed on admission the nurse has discussed with residents and families frequency and type of bath. She stated she does not ask residents about their preferences for frequency of baths or showers. She said the admission packet provided for 2	F 242	3. Going forward, the admissions staff shall complete the BPCS as part of the admit pack for all residents (RP shall complete if resident is unable)and ensure bathing schedule is implemented and addresses the resident's personal preferences. The BPCS shall also be updated by the MDS Coordinator at least quarterly. The MDS Coordinator shall ensure that changes are made to the care plan as indicated and implemented by the care team accordingly. The Activities Coordinator has been educated to ask more probing questions when completing section F. of the MDS on admission and annually. The Activities Coordinator shall document responses in the medical record and ensure preferences are care planned and implemented by the team. The Administrator or her designee shall continue to round on all newly admitted residents within first 14 days of stay. The current rounding form completed for each resident now has additional questions concerning personal preferences and addresses resident satisfaction (Section F F0400 of the MDS is used as the basis). 4. The MDS Coordinator shall maintain an on-going summary log of all BPCS including the quarterly updates and BCPS completed by the Activities Coordinator and Admission Coordinator. The summary shall include evidence all residents were assessed for bathing preferences on admit and at least quarterly. The summary shall also include a review of the care records to ensure the preferences were implemented to the resident (or RP) satisfaction. This	

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F 242	Continued From page 2 baths or showers a week and residents can receive more baths and showers upon request. An interview was conducted on 06/27/14 at 9:56 AM with the Case Manager Supervisor nurse with admissions and discharges. She stated upon admission residents and families have been told residents are scheduled for 2 baths or showers a week but if they need another bath or shower they can have one. The Case Manager Supervisor revealed she does not ask residents and families about frequency of showers because it is up to the nurse aide to determine frequency of showers. The Case Manager Supervisor revealed the facility has not offered more than 2 baths or showers a week but residents can request more. An interview was conducted on 06/27/14 at 11:22 AM with MDS Nurse #2 and MDS Nurse #3. They stated the nurse manager has told residents they are scheduled for 2 baths or showers a week but if they needed more they need to let staff know. An interview was conducted on 06/27/13 at 2:03 PM with the Director of Nursing (DON). She stated on admission the nurses are supposed to ask families and residents about preferences for time of day for baths and showers. The DON revealed on admission resident and families are told the schedule for baths or showers was twice a week unless requested to have more. 2. Resident #79 was admitted to the facility on 12/15/10 with diagnoses including diabetes mellitus, late effect hemiplegia and chronic pain. Record review of the most recent Minimum Data Set (MDS) dated 06/14/14 indicated Resident #79	F 242	summary shall be reviewed by the management team in the facility weekly risk meetings and at QAPI (Quality Assurance Performance Improvement) team at monthly meetings for 3 consecutive months with revisions made as necessary.	

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F 242	Continued From page 3	F 242		

had clear speech and was able to understand and make herself understood. Review of a weekly nursing note dated 06/25/14 assessed Resident #79 as alert and oriented times 3 and able to make
her needs known verbally.

During an interview with resident #79 on 06/25/14 at 2:55 PM she stated she wanted more than 2 showers a week and staff had not offered a choice of more than 2 showers a week.

An interview was conducted on 06/26/14 at 9:35 AM with Nurse Aide (NA) #2 , who provided care for Resident #79. She stated resident #79 had received 2 showers a
week on Tuesdays and Fridays and was recently moved to Monday and Thursdays
to accommodate another residents preference for days of the week to receive showers.
She revealed residents have been offered 2 showers a week but could receive another shower if requested it.

An interview was conducted on 06/27/14 at 8:53 AM with Nurse #1. She stated residents have received 2 baths or showers a week and if they request more could receive more. Nurse #1 was not sure if preferences for frequency of baths and showers had been assessed.

An interview was conducted on 06/27/14 at 9:01 AM with the nurse Unit Manager who attends several of the interdisciplinary meetings where staff discuss 24 hour reports, changes in condition and treatment changes. She stated residents receive 2 showers a week as scheduled and if residents want more they need to request more. She was not sure if residents had been

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F 242	Continued From page 4	F 242		

assessed for frequency of showers on admission.

An interview was conducted on 06/27/14 at 9:25 AM with the Social Worker (SW). She Revealed on admission the nurse had discussed with residents and families frequency and type of bath. She stated she does not ask residents about their preferences for frequency of baths or showers. She said the admission packet provided for 2 baths or showers a week and residents can receive more baths and showers upon request.

An interview was conducted on 06/27/14 at 9:56 AM with the Case Manager Supervisor Nurse with admissions and discharges. She stated upon admission residents and families have been told residents are scheduled for 2 baths or showers a week but if they need another bath or shower they can have one. The Case Manager supervisor revealed she does not ask residents and families about frequency of showers because it is up to the Nurse aide to determine frequency of showers. The Case Manger supervisor revealed the facility has not offered more than 2 baths or showers a week but residents can request more.

An interview was conducted on 06/27/14 at 11:22 AM with MDS Nurse #2 and MDS Nurse #3. They stated the nurse manager has told residents they are scheduled for 2 baths or showers a week but if they needed more they need to let staff know.

An interview was conducted on 06/27/14 at 2:03 PM with the Director of Nursing (DON). She stated on admission the nurses are supposed to ask families and residents about preferences for

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F 242	Continued From page 5 time of day for baths and showers. The DON revealed on admission resident and families are told the schedule for baths or showers was twice a week unless requested for more.	F 242		
F 371 SS=F	483.35(i) FOOD PROCURE, STORE/PREPARE/SERVE - SANITARY The facility must - (1) Procure food from sources approved or considered satisfactory by Federal, State or local	F 371		7/25/14

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F 371	Continued From page 6 authorities; and (2) Store, prepare, distribute and serve food under sanitary conditions This REQUIREMENT is not met as evidenced by: Based on observations and staff interviews the facility failed to ensure the final rinse temperature of the dish machine consistenly reached 180 degrees Farenheit (F). The findings included: On 06/27/14 from 9:50 AM-10:15 AM observations were made of dietary aides washing breakfast dishes using the dish machine. The final rinse temperature of the first rack of dishes run through the dish machine reached 180 degrees F. and a test strip (applied by facility staff) tested positive for 160 degrees F at the dish surface. Subsequent racks run through the dish machine did not consistently reach 180 degrees F with the highest temperature reached noted at 172 degrees F (for two observations), 175 degrees F (for two observations) and 178 degrees F. When staff stopped, waited a few minutes and then resumed running racks through the machine, the initial final rinse temperature was noted at 180 degrees F. However, the final rinse temperature did not consistently maintain at 180 degrees F. The Food Service Director (FSD) was present throughout these observations and three of the racks of dishes (that did not reach 180 degrees F in the final rinse cycle) were removed and placed in dish storage. A test strip	F 371	F 371 1. There were no named residents affected by this alleged deficient practice, but the dish machine has been replaced. 2. All residents except one tube fed resident had the potential to be affected by the alleged deficient practice: A. All dietary staff shall be educated about the facility policy for dish machine temperatures/sanitation and infection control by July 22, 2014. B. All new hires shall recieve education on facility policy for dish machine temperatures/sanitation and infection control during the orientation period. C. Using the dish machine temperature record, the dietary aides shall document the dish machine wash and final rinse temperatures for breakfast, lunch, and dinner each day. A test strip shall be run once a day per policy to verify that the surface of the dish has reached a minimum of 160 degrees F. The strip shall be dated and attached to the temperature record for documentation. Any inappropriate temperature shall immediately be brought to the attention of the Director of Food Nutrition Services or	

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F 371	Continued From page 7 was not run through (after the initial test strip when the final rinse temperature was 180 degrees F) during the continuous observations from 9:50 AM-10:15 AM. At 10:15 AM the FSD asked the aides to stop using the dish machine and the maintenance director was called in to the kitchen. The maintenance director assessed the machine and booster heater and stated the over limit switch on the booster heater had "kicked off" and he re-set the switch.on, The dish machine was tested after the over limit switch was re-set and the final rinse temperature of the dish machine maintained at 180 degrees F. The FSD reported the past couple months there had been problems with the dish machine maintianing temperatures and a new dish machine was on order and expected to be delivered the week of the survey. The FSD stated staff should be looking at the final rinse temperature gauge each time a rack of dishes was run through the dish machine to ensure the final rinse temperature reached 180 degrees F. On 6/27/14 at 12:15 PM the supervisor of the FSD stated outside contractors had been in to service the dish machine to address continuing issues with maintaining temperatures. The supervisor stated a new dish machine had been ordered due to ongoing problems with the current machine not being able to maintian temperature. The supervisor stated he expected staff to monitor the final rinse temperature using either the test strip or the final rinse temperature gauge to ensure it reached 180 degrees F during the final rinse cycle.	F 371	designee (DFNS/D). The DFNS/D shall determine if the temperature reading is due to a malfunctioning temperature gauge or inappropriate water temperature and make a decision concerning adequacy of sanitation of service ware. If substandard water temperature does occur, the dish machine shall be taken out of service until repaired and disposable service ware implemented. The DFNS/D shall contact source of repair and action taken shall be documented on the back of the dish machine temperature record. D. The DFNS/D shall conduct daily monitoring of the temperature record to ensure dish machine temperatures checks are completed at each meal period. Any identified area of concern shall be addressed at the time identified. E. The DFNS/D shall present results of daily audits at the monthly QAPI meeting for three months with revisions made as necessary. Preparation and/or execution of this plan of correction does not constitute admissions or agreement by the provider of the truth of the facts alleged or conclusions set forth in the statement of deficiencies. The Plan of Correction is prepared in/or executed solely because the provision of the Federal and State Law require it.	