

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

PRINTED: 04/30/2019
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 345362	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 03/28/2019
NAME OF PROVIDER OR SUPPLIER BRIAN CENTER HEALTH & RETIREMENT/CABARRUS			STREET ADDRESS, CITY, STATE, ZIP CODE 250 BISHOP LANE CONCORD, NC 28025	
(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
E 000	Initial Comments An unannounced recertification survey was conducted 3/25/19 to 3/28/19. The facility was found in compliance with the requirement CFR 483.73, Emergency Preparedness. Event # QFS011.	E 000		
F 000	INITIAL COMMENTS A staggered survey was completed for recertification and complaint investigation with an evening entrance on 3/25/19 at 6:00 pm. Event ID #QFS011.	F 000		
F 732 SS=C	Posted Nurse Staffing Information CFR(s): 483.35(g)(1)-(4) §483.35(g) Nurse Staffing Information. §483.35(g)(1) Data requirements. The facility must post the following information on a daily basis: (i) Facility name. (ii) The current date. (iii) The total number and the actual hours worked by the following categories of licensed and unlicensed nursing staff directly responsible for resident care per shift: (A) Registered nurses. (B) Licensed practical nurses or licensed vocational nurses (as defined under State law). (C) Certified nurse aides. (iv) Resident census. §483.35(g)(2) Posting requirements. (i) The facility must post the nurse staffing data specified in paragraph (g)(1) of this section on a daily basis at the beginning of each shift. (ii) Data must be posted as follows: (A) Clear and readable format. (B) In a prominent place readily accessible to	F 732		4/19/19

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

TITLE

(X6) DATE

Electronically Signed

04/17/2019

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 732	<p>Continued From page 1 residents and visitors.</p> <p>§483.35(g)(3) Public access to posted nurse staffing data. The facility must, upon oral or written request, make nurse staffing data available to the public for review at a cost not to exceed the community standard.</p> <p>§483.35(g)(4) Facility data retention requirements. The facility must maintain the posted daily nurse staffing data for a minimum of 18 months, or as required by State law, whichever is greater. This REQUIREMENT is not met as evidenced by: Based on review of the daily nurse staffing forms and nursing schedules and staff interviews, the facility failed to accurately report care hours provided by licensed and unlicensed personnel for 5 out of 5 daily posted nurse staffing forms reviewed.</p> <p>Findings included: 1. Review of the facility ' s daily nursing staffing forms and daily nursing schedules for 12/26/2018, 1/1/2019, 2/1/2019, 2/2/2019, 3/22/2019, revealed the daily nursing staffing forms were not accurate on the following 5 of 5 days: a. The nursing schedule for the facility dated 12/26/2018 was reviewed and 1 Registered Nurse (RN) and 3 Licensed Practical Nurses (LPN) were scheduled to work 2nd shift (3:00 PM to 11:00 PM). The daily posted nurse staffing sheet dated 12/26/2018 indicated that no RN had worked 2nd shift and 4 LPN had provided 32 hours of care.</p>	F 732	<p>F732 Posted Nurse Staffing Information SS=C</p> <p>Brian Center Cabarrus Acknowledges receipt of the Statement of Deficiencies and proposes this Plan of Correction to the extent that the summary of findings is factually correct in order to maintain compliance with applicable rules and provisions of the CMS Rules of Participation. This plan of corrections is submitted as a written allegation of compliance. Preparation and submission of this plan of correction is in response to the CMS 2567 from the survey conducted on March 25-28, 2019.</p> <p>Brian Center Cabarrus' response to this Statement of Deficiencies and Plan of Correction does not denote agreement with the statement nor does it constitute an admission that any deficiency is accurate. Further, Brian Center Cabarrus reserves the right to refute and</p>		

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F 732	<p>Continued From page 2</p> <p>b. The nursing schedule for the facility dated 1/1/2019 was reviewed and 6 Nursing Assistants (NA) were scheduled to work 2nd shift. The posted nurse staffing sheet dated 1/1/2019 indicated that 6.5 NA had provided 48.75 hours of care.</p> <p>c. The nursing schedule for the facility dated 2/1/2019 was reviewed and 7 NA were scheduled to work 1st shift (7:00 AM to 3:00 PM). One NA was noted to be orienting during 1st shift on that date. The daily posted nurse staffing sheet dated 2/1/2019 indicated 8 NA had provided 60 hours of care for 1st shift. The nursing schedule for 2nd shift on 2/1/2019 showed 4 LPN were scheduled to work and 7 NA were scheduled to work. One LPN and 1 NA were noted to be in orientation during 2nd shift on that date. The daily posted staffing sheet dated 2/1/2019 for 2nd shift indicated 5 LPN had provided 40 hours of care and 8 NA had provided 60 hours of care. The nursing schedule for 3rd shift (11:00 PM-7:00 AM) on 2/1/2019 revealed 2 LPN were scheduled to work. The daily posted nurse staffing sheet dated 2/1/2019 indicated 3 LPN had provided 24 hours of care on 3rd shift for 2/1/2019.</p> <p>d. The nursing schedule for 2/2/2019 was reviewed and 7 NA were scheduled to work 1st shift. One NA was noted to be orienting during 1st shift on that date. The daily posted nurse staffing indicated 8 NA had provided 60 hours of care on 1st shift for 2/2/2019.</p> <p>e. The nursing schedule for 3/22/2019 was reviewed and no RN were scheduled to work 1st shift. One RN was noted to be orienting during 1st shift on that date. The daily posted nurse staffing sheet dated 3/22/2019 indicated 1 RN</p>	F 732	<p>deficiencies on this statement through Informal Dispute Resolution, formal appeal, and/or other administrative or legal procedures.</p> <ol style="list-style-type: none"> On March 28, 2019 the facility posted the Nurse Staffing Information at the nurse's station on unit 2, to show the facility name, current date, total number and actual hours worked by the following categories of licensed and unlicensed nursing staff directly responsible for resident care per shift. The categories included Registered Nurses, Licensed Practical Nurses, or Licensed Vocational Nurses, Certified Nursing Aides, and Resident Census. The posting was in a clear and readable format in a prominent place accessible to residents and visitors. All residents who reside in the facility have the potential to be affected by the alleged deficient practice. On March 28, 2019 the Administrator in-serviced the Director of Nursing on the requirements of Nursing Information Posting. On April 2, 2019 the Director of Nursing then in-serviced the Unit managers, the Evening Supervisor and Scheduler on the same requirements. The Director of Nursing, Administrator, the Unit Managers, the Evening Supervisor, or Scheduler will audit the staff postings per shift for 4 weeks to assure compliance with the posting requirements. The Director of Nursing, Administrator, Unit Manager, Evening 		

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F 732	<p>Continued From page 3</p> <p>had provided 8 hours of care on 3/22/2019 during 1st shift. The nursing schedule for 2nd shift on 3/22/2019 revealed 7 NA were scheduled to work 2nd shift. The daily posted nurse staffing sheet indicated 8 NA had provided 60 hours of care on 2nd shift 3/22/2019.</p> <p>Scheduler #1 was interviewed on 3/38/2019 at 1:55 PM. Scheduler #1 reported she completed the daily nurse staffing sheets in the morning and posted the sheets for the day when she arrived for duty. Scheduler #1 further reported if staff called in sick, she made the corrections to the daily posted nurse staffing sheet the next day. Scheduler #1 reported she was not aware the daily posted nurse staffing sheet should be updated each shift or that she should not include staff who were orienting to the facility.</p> <p>An interview was conducted with the Administrator on 3/28/2019 at 2:36 PM and he reported it was his expectation the daily posted nurse staffing sheets were updated to accurately reflect the shift staffing and orienting staff were not included in the hours of care provided.</p>	F 732	Supervisor or Scheduler will then audit the staff posting daily for 4 weeks to assure compliance. Results of each audit will be reviewed in monthly QA committee meeting.		