

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

PRINTED: 12/07/2021
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 345458	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 11/10/2021
NAME OF PROVIDER OR SUPPLIER TREYBURN REHABILITATION CENTER			STREET ADDRESS, CITY, STATE, ZIP CODE 2059 TORREDGE ROAD DURHAM, NC 27712	
(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 000	INITIAL COMMENTS A complaint investigation survey was conducted from 11/8/21 through 11/10/21. Event ID# Q6ZC11. 1 of the 19 complaint allegations was substantiated.	F 000		
F 809 SS=E	Frequency of Meals/Snacks at Bedtime CFR(s): 483.60(f)(1)-(3) §483.60(f) Frequency of Meals §483.60(f)(1) Each resident must receive and the facility must provide at least three meals daily, at regular times comparable to normal mealtimes in the community or in accordance with resident needs, preferences, requests, and plan of care. §483.60(f)(2) There must be no more than 14 hours between a substantial evening meal and breakfast the following day, except when a nourishing snack is served at bedtime, up to 16 hours may elapse between a substantial evening meal and breakfast the following day if a resident group agrees to this meal span. §483.60(f)(3) Suitable, nourishing alternative meals and snacks must be provided to residents who want to eat at non-traditional times or outside of scheduled meal service times, consistent with the resident plan of care. This REQUIREMENT is not met as evidenced by: Based on observations, staff and consultant Registered Dietitian (RD) interviews and record review, the facility failed to regularly provide a nourishing bedtime snack and obtain resident group approval for greater than 14 hours to elapse between the provision of a substantial evening meal and breakfast the following day for	F 809	This plan of Correction constitutes the facilities written allegation of compliance for the deficiencies cited. However, submission of this plan of correction is not an admission that deficiencies exist or that one was cited correctly. This plan of correction is submitted to meet	11/10/21

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

TITLE

(X6) DATE

Electronically Signed

11/26/2021

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 809	<p>Continued From page 1</p> <p>5 of 5 resident hallways (the 100/300 halls, 200 hall, 400 hall, and 500 hall) and one of one Dining Room.</p> <p>The findings included:</p> <p>A review of the meal "Tray Delivery Times" provided by the facility was conducted on 11/9/21. The meal tray delivery schedule included the following information:</p> <ul style="list-style-type: none"> --Meal trays for the 100/300 Halls (a combined meal cart) were scheduled to be delivered for dinner at 5:30 PM and for breakfast at 7:45 AM (indicative of a 14 hour and 15 minute time span between the two meals); -- Meal trays for the 200 Hall were scheduled to be delivered for dinner at 5:45 PM and for breakfast at 8:15 AM (indicative of a 14 hour and 30 minute time span between the two meals); -- Meal trays for the 400 Hall were scheduled to be delivered for dinner at 5:50 PM and for breakfast at 8:30 AM (indicative of a 14 hour and 40 minute time span between the two meals); -- Meal trays for the 500 Hall were scheduled to be delivered for dinner at 6:00 PM and for breakfast at 8:45 AM (indicative of a 14 hour and 45 minute time span between the two meals); -- Meal trays for the Dining Room were scheduled to be served for dinner at 6:10 PM and for breakfast at 9:00 AM (indicative of a 14 hour and 50 minute time span between the two meals). <p>An interview was conducted on 11/9/21 at 1:38 PM with the facility's Certified Dietary Manager (CDM). The CDM reported he began working at the facility approximately three weeks ago. When asked if the meal schedule provided by the facility reflected the current meal tray delivery times, he stated it did. The CDM reported the facility</p>	F 809	<p>requirements established by federal and state law.</p> <p>An acceptable plan of correction must:</p> <p>Address how corrective action will be accomplished for those residents found to have been affected by the deficient practice;</p> <p>On 11/10/2021, the meal time posting was corrected to 14 hours between the dinner meal and breakfast by the Administrator. All resident meal tray delivery times were change indicative of a 14-hour time span between dinner and breakfast. All tray times deliveries were verified to ensure correct timing. No negative outcome was noted.</p> <p>Address how the facility will identify other residents having the potential to be affected by the same deficient practice; All residents have the potential to be affected.</p> <p>Address what measures will be put into place or systemic changes made to ensure that the deficient practice will not recur:</p> <p>Education provided to dietary staff by Administrator regarding new tray delivery times on 11/10/2021.</p> <p>Dietary Manager/Nurse Management will audit tray deliver times to ensure they are being delivered according to the posted meal times. This audit will occur 5 x per week x 12 weeks.</p>		

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F 809	<p>Continued From page 2</p> <p>recently made an adjustment to the schedule by combining the 100 hall and 300 hall meal carts. When asked if he had a concern about the scheduled meal times and the duration of time between the evening meal and breakfast the following day, the CDM stated, "Should be 14 hours" Upon further inquiry, he reported a tray of evening snacks was sent out every night to the nursing station on each side of the building. He stated the snacks typically included animal crackers, packaged cheese crackers, and sugar free cookies.</p> <p>An interview was conducted on 11/9/21 at 1:50 PM with the facility's Administrator. During the interview, the Administrator was asked if the span of time between the evening meal and the breakfast meal was intentionally scheduled to be greater than 14 hours. The tray delivery times for each of the halls and dining room were reviewed with the Administrator. The Administrator reported this was the current meal schedule, which had been recently adjusted. The Administrator printed the previous meal schedule for review. The previous meal schedule was also found to reflect a time span of greater than 14 hours between the evening and breakfast meals. When asked if the facility's Resident Council had approved the previous and/or current meal schedule, the Administrator requested the facility's Activity Director (AD) join the interview. The AD reported she had worked at the facility for approximately two years and was responsible for documenting the Resident Council meeting minutes. At that time, the AD was asked if the meal schedules had been approved by the Resident Council. The AD stated she did not recall the meal schedule having been discussed and/or approved by the Resident Council.</p>	F 809	<p>Administrator will review the results of the audit to ensure that trays are being delivered according to the posted meal times.</p> <p>Indicate how the facility plans to monitor its performance to make sure that solutions are sustained:</p> <p>Data obtained during the audit process will be analyzed for patterns and trends and reported to QAPI by the Administrator/designee monthly X 3 months. At that time, the QAPI committee will evaluate the effectiveness of the interventions to determine if continued auditing is necessary to maintain compliance.</p>		

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F 809	Continued From page 3 A telephone interview was conducted on 11/9/21 at 2:50 PM with the facility's consultant Registered Dietitian (RD). When asked about the facility's meal schedule allowing greater than 14 hours to elapse between the provision of a substantial evening meal and breakfast the following day, the RD stated, "I do not think we were aware of that." When asked, the RD reported examples of a nourishing snack included such items as one-half of a meat sandwich or cottage cheese and fruit. Upon request, a follow-up interview was conducted on 11/9/21 at 3:05 PM with the facility's Administrator. During the interview, the Administrator reported she talked with the facility's RD about the meal schedule and obtained a list of recommended high protein and/or high calorie snack options. The Administrator noted some of these items were already being sent out to the halls for bedtime snacks at times, "but not always." She reported the facility needed to review the provision of nourishing bedtime snacks further and planned to address the meal schedule with the Resident Council. When asked, the Administrator reported the AD completed a review of the Resident Council meeting minutes from the past two years. These records did not indicate the meal schedule had been addressed or approved by the Resident Council to include a time span of greater than 14 hours between the evening and morning meals.	F 809			