

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL001149	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED R 02/22/2018
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NAME OF PROVIDER OR SUPPLIER LANE ST RETIREMENT HOME	STREET ADDRESS, CITY, STATE, ZIP CODE 625 LANE STREET BURLINGTON, NC 27217
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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) COMPLETE DATE
D 000	Initial Comments	D 000		
D 072	<p>10A NCAC 13F .0305(m) Physical Environment</p> <p>10A NCAC 13F .0305 Physical Environment (m) The requirements for outside premises are: (1) The outside grounds of new and existing facilities shall be maintained in a clean and safe condition; (2) If the home has a fence around the premises, the fence shall not prevent residents from exiting or entering freely or be hazardous; and (3) Outdoor walkways and drives shall be illuminated by no less than five foot-candles of light at ground level.</p> <p>This Rule is not met as evidenced by: Based on observations and interviews, the facility failed to remove a stack of used lumber located beside the exit ramp, in the yard.</p> <p>Interview on 2/21/18 at 11:15 am with a resident revealed: -The resident was looking at the pile of wood just on the other side of the exit ramp. -The wood was left over from construction of a new exit ramp. -The wood pile had been there for about 1-1/2 weeks since the ramp construction was completed (did not remember the date).</p> <p>Observation on 2/21/18 at 11:16 am of the yard, on the left side of the house, revealed: -There was a 6 feet x 4 feet pile of old used and scrap lumber on the ground, beside the exit ramp. -There were pieces of lumber with jagged edges</p>	D 072		

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D 072	<p>Continued From page 1</p> <p>sticking out of the pile.</p> <ul style="list-style-type: none"> -There were pieces of lumber in the pile that had old and bent protruding construction nails. -There were no signs or taped off area around the pile of lumber to provide a barrier for residents walking or smoking in the side yard. <p>Interview on 2/21/18 at 11:25 a.m. with a second resident revealed:</p> <ul style="list-style-type: none"> -The ramp was just completed last month (did not remember the date). -The facility staff were slow in getting the area cleaned up. <p>Interview on 2/21/18 at 3:45 p.m. with a third resident revealed:</p> <ul style="list-style-type: none"> -The resident was going to the front porch to smoke. -He had been told by the Medication Aide (MA) not to use the hallway exit ramp because of the pile of wood close to the ramp. -The wood pile had been on the ground for a while, about a month (did not know the date), since the construction of the ramp. <p>Interview on 2/22/18 at 2:35 p.m. with the facility Registered Nurse (RN) revealed:</p> <ul style="list-style-type: none"> -She knew there was a pile of old lumber outside at the ramp area. -Construction was completed a couple of weeks ago (could not remember the date) on the exit door ramp. -The man who did the construction had not come back to take the lumber away. -She did not know when he planned to remove the pile of used lumber. <p>Interview on 2/22/18 at 2:45 p.m. with the MA revealed:</p> <ul style="list-style-type: none"> -She did not know when the used lumber was 	D 072		

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D 072	<p>Continued From page 2</p> <p>going to be removed.</p> <p>-The maintenance man who did repairs for the facility had been back at the facility to fix a toilet, but had not removed the lumber.</p> <p>-There had been a lot of rain and the ground was wet.</p> <p>Attempted interview on 2/22/18 at 3:00 p.m. with the facility Maintenance man was unsuccessful.</p> <p>Interview on 2/22/18 at 3:09 p.m. with the Administrator revealed:</p> <p>-The facility had a maintenance man that came to make repairs on the hallway exit door ramp.</p> <p>-She did not know when the maintenance man was going to remove the piled up wood.</p> <p>-Residents could go to the front porch to smoke.</p> <p>-There had been a lot of rain and the ground was wet.</p> <p>-She would get the maintenance man to remove the pile of lumber.</p>	D 072		
D 074	<p>10A NCAC 13F .0306(a)(1) Housekeeping And Furnishings</p> <p>10A NCAC 13F .0306 Housekeeping And Furnishings</p> <p>(a) Adult care homes shall:</p> <p>(1) have walls, ceilings, and floors or floor coverings kept clean and in good repair;</p> <p>This Rule is not met as evidenced by: Based on observations and interviews, the facility failed to assure the floors, walls, and ceilings were clean and in good repair in 2 of 2</p>	D 074		

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D 074	<p>Continued From page 3</p> <p>bathrooms, 4 of 6 resident rooms (Rooms #1 ,3, 4 and 6), the hallway, dining room, and facility entryway.</p> <p>The findings are:</p> <p>Observation on 2/21/18 at 10:45 a.m. of the Women's Community bathroom revealed:</p> <ul style="list-style-type: none"> -There were black and tan horizontal scrape marks on the lower 3 feet of the bathroom door. -There was a 3 inch x 3 feet layer of a yellow substance on the linoleum tile flooring at the doorway -There were brown scuff marks and dark brown dirt on the linoleum tile flooring. -There was a build up of dark brown dirt in the spaces between several of the flooring tiles. -There was a layer of brown dust along the top edge of the baseboards. -There was a build up of dark brown dirt on the flooring tiles at the corners of the room. -There was a yellow brown stain in the grout around the base of the tub. -The wall at the head of the tub had scrape marks and a 1/4 inch horizontal cut line in the drywall. -The floor air vent just inside the door was coated with gray dust that was 1/4 inch and rusted. -There were yellow stains on the flooring and black stains in the grout at the base of the toilet -There were yellow orange and yellow brown stains on the flooring around the toilet and the grout had cracked open. -There were black and brown marks and a buikd up of brown dust along the top edge of the floor molding behind the toilet. -There were gaps between the flooring tiles at the toilet. -There were dried mounds of hand soap around the nozzle of the wall dispenser and the soap control lever was missing. 	D 074		

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D 074	<p>Continued From page 4</p> <ul style="list-style-type: none"> -The wall electrical flip switch, located 2 feet below the hand soap dispenser, had a yellow brown build up in the spaces around the flip switch. -There were light brown to dark brown stains on the textured ceiling around the ceiling vent; the textured ceiling had small cracks. -The vent had a light coating of dust and small dust balls. <p>Observation on 2/21/18 at 11:00 a.m. of the Men's Community bathroom revealed:</p> <ul style="list-style-type: none"> -There were black and tan horizontal scrape marks on the lower 3 feet of the door. -There were green black smudges and stains covering the threshold floor molding at the entrance to the bathroom. -The grout of the flooring tiles were stained dark brown with a build up of dirt and dust. -There was a dark brown and black build up of dirt and dust on the top and bottom edges of the floor molding. -There was a build up of dark brown dirt at the corners of the bathroom. -There were brown stains on the ceramic wall tiles beside the left wall side sink. -The electrical outlet cover on the wall next to the sink was cracked and had yellow brown stains. -There were yellow stains and a build up of brown dirt on the double, wall light switches by the sinks. -There were brown stains on the ceramic wall tiles under both sinks. -There were brown black stains on the grout at the base of both toilets. -There were two, 1 and 1/2 inch holes in the wall under each end of the toilet paper holder. -The lower 2 feet of the wall separating the 2nd toilet and the shower area had dark brown stains on the ceramic wall tiles and edges. -There was a 1/2 inch wide build up of dark gray 	D 074		

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D 074	<p>Continued From page 5</p> <p>dust and dirt on the grout and tiles on the floor.</p> <ul style="list-style-type: none"> -The floor of the shower was coated with yellow brown stains -There were yellow brown stains on the sides and top of the shower base molding. -There were dark brown and black stains on the grout of the shower molding and a build up of a dark brown and black substance at the corners. -The window sill of the back wall window was coated in a layer of tan dust. <p>Observation on 2/21/18 at 11:10 a.m. of the hallway revealed:</p> <ul style="list-style-type: none"> -Along the hallway, on both sides, there was a 2 to 2 and 1/2 inches wide dark brown stained section of linoleum tile flooring at the edge of the floor molding. -Along the hallway, on both sides of the wood floor molding had dark brown and gray scrapes and small drops and smears of paint. -There were yellow brown stains on the linoleum flooring tiles. -Several tiles along the hallway had separated at the corners or had wider gaps between the tiles. -The hallway door, at the end, had horizontal tan scrapes on the lower section of the metal frame and a build-up of gray dust on the edge of the lower frame. -There were yellow, black, brown, and white marks on the lower 1 foot of the door frame. -There were yellow, black, brown, and white marks on the floor molding at the edges of the door. -There was a build up of dark brown and black grime and dust at the wall corners at the doorway. -There were drop spots of white paint on the floor at the sides of the door. <p>Observation on 2/22/18 at 11:10 a.m. of the hallway ceiling lights revealed:</p>	D 074		

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D 074	<p>Continued From page 6</p> <ul style="list-style-type: none"> -There were 3 florescent ceiling lights in the hallway. -There were yellow streaks in the plastic covering. -There were clusters of dead insects inside the plastic covering of the florescent lights. <p>Observation on 2/22/18 at 10:58 a.m. of resident room #6 revealed:</p> <ul style="list-style-type: none"> - There were tan scrape marks on the lower 3 feet of the room's door frame. -There were horizontal scrape marks on the lower 3 feet of the room's door. -There was a build up of dark brown dirt around the base of the door frame at the floor. -There was a 1/2 inch to 1 inch build up of dirt and dust around the floor vent. -There were dark brown and black stains on the linoleum tile flooring throughout the room. -There was a build up of dark brown dirt and dust at the corners of the room. -There were dark brown scrape marks and dirt on the linoleum tile flooring in the closet. -There was a 1 inch wide layer of built up dust and dirt on the tile flooring at the bottom edge of the closet baseboard and at the corners of the closet. <p>Observation on 2/22/18 at 11:00 a.m. of resident room #4 revealed:</p> <ul style="list-style-type: none"> - There were tan scrape marks on the lower 3 feet of the room's door frame. -There were horizontal scrape marks on the lower 3 feet of the room's door. -There was a build up of dark brown dirt around the base of the door frame at the floor. -There was a 1/4 inch to 1/2 inch build up of dirt and dust around the floor heat/air vent. -There were dark brown and black stains on the linoleum tile floor flooring throughout the room. 	D 074		

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D 074	<p>Continued From page 7</p> <ul style="list-style-type: none"> -There was a build up of dark brown dirt and dust at the corners of the room. -There was a mix of lighter and darker linoleum tiles on the floor that were separating from the floor creating spaces between the tiles. -There were large dust particles and crumbs on the floor at the base of the chests of drawers and at the foot of the beds. <p>Interview on 2/22/18 at 11:03 a.m. with the residents who resided in room #4 revealed:</p> <ul style="list-style-type: none"> -About a month ago (did not remember the date), some of the flooring tiles were replaced; they were the ones with the lighter color. -There were spaces between the tiles and some were starting to separate from the floor. -The residents swept and mopped their room floor every other day. -They did not remember when housekeeping staff last came in to clean the floor. <p>Observation on 2/22/18 at 11: 06 a.m. of resident room #3 revealed:</p> <ul style="list-style-type: none"> -There were dark brown and black stains on the linoleum tile flooring throughout the room. -There was a build up of dark brown dirt and dust at the corners of the room. -There were horizontal scrape marks on the room's door, door frame and closet door frame. <p>Observation on 2/22/18 at 11:08 a.m. of resident room #1 revealed:</p> <ul style="list-style-type: none"> -The room's linoleum tile floor flooring was coated with dark brown stains. -There was a build up of dark brown dirt and dust at the corners of the room. <p>Interview on 2/22/18 at 10:40 a.m. to 11:00 a.m. with the Medication Aide/Supervisor revealed:</p> <ul style="list-style-type: none"> -There were some repairs and painting done 	D 074		

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D 074	<p>Continued From page 8</p> <p>since September, 2017.</p> <ul style="list-style-type: none"> -There was still more repairs to do in the Community bathrooms. -There was a need for housekeeping staff; she and the PCA tried to sweep and mop the resident areas every day; they swept resident rooms this morning. <p>Observation on 2/22/18 at 11:10 a.m. of the Dining Room area revealed:</p> <ul style="list-style-type: none"> -The linoleum tile floor flooring was coated with dark brown stains. -There was a 4 feet x 1 inch line of black marks on the flooring just inside the doorway. -There were scrapes on the flooring baseboard throughout the room. -There was a 4 inch x 6 inch triangle shaped build up of dark brown dirt and dust at the front corners of the room. -The light switch on the wall next to the kitchen door had dark brown smears on the cover and a build up of brown grime around the screws and flip switch. -There were yellow smears on the wallpaper under the light switch. -There were three, 1 foot sections of wallpaper that were split, torn, and separated from the right side wall. <p>Observation on 2/22/18 at 10:13 a.m. of the inside front entryway area revealed:</p> <ul style="list-style-type: none"> -The linoleum tile flooring was coated with dark brown stains. -There was a build up of dark brown dirt and dust under the threshold of the front door, at the base of the door frame, and corners of the wall. -There were scrape marks on the front door frame. -There were horizontal scrape marks across the bottom edge of the metal front door. 	D 074		

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D 074	Continued From page 9 Interview on 2/22/18 at 3:08 p.m. with the Administrator revealed: -"We have painted, cleaned, and mopped to get rid of the grime and dust." -"We have tried to keep the resident rooms clean." -She expected the resident rooms to be cleaned by staff. -She was not aware of the repairs that were needed in the Women's and Men's community bathrooms. -She would come to check on housekeeping needs of the facility.	D 074		
D 137	10A NCAC 13F .0407(a)(5) Other Staff Qualifications 10A NCAC 13F .0407 Other Staff Qualifications (a) Each staff person at an adult care home shall: (5) have no substantiated findings listed on the North Carolina Health Care Personnel Registry according to G.S. 131E-256; This Rule is not met as evidenced by: Based on interviews and record reviews, the facility failed to assure 2 of 2 sampled staff (Staffs A and B) had no substantiated findings listed on the North Carolina Health Care Personnel Registry upon hire according to G.S. 131E-256. The findings are: 1. Review of Staff A's personnel record revealed: -Staff A was hired on 8/01/13 as a medication	D 137		

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D 137	<p>Continued From page 10</p> <p>aide/supervisor.</p> <p>-There was documentation of a HCPR check made on 4/22/10.</p> <p>-There was no other HCPR check in Staff A's personnel record.</p> <p>Observation of Staff A during the survey on 2/21-22/18 revealed:</p> <p>-She worked as the supervisor, medication aide and cook.</p> <p>-She administered medications to the residents, supervised staff, cooked meals and supervised residents when smoking on the front porch.</p> <p>-She assisted residents with personal care as needed.</p> <p>Interview with Staff A on 8/22/18 at 4:30pm revealed she did not know if a HCPR check was done when she was started at the facility on 8/01/13.</p> <p>Interview with the Administrator on 8/22/18 revealed:</p> <p>-A HCPR check was completed and the document was placed in their personnel file upon hire.</p> <p>-Since Staff A worked in other facilities owned by the licensee, the Administrator did not complete a HCPR check when she started at this facility full time on 8/01/13.</p> <p>-The Administrator would complete an online HCPR check immediately and place the document in Staff A's personnel record.</p> <p>2. Review of Staff B's personnel record revealed:</p> <p>-Staff B was hired as a Personal Care Aide on 8/01/17.</p> <p>-There was no Health Care Personnel Registry (HCPR) check in Staff B's personnel record</p>	D 137		

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D 137	<p>Continued From page 11</p> <p>Observation of Staff B from 2/21/18 to 2/22/18 revealed: -She worked as a housekeeper and cook. -She supervised residents when smoking on the front porch. -She assisted residents with grooming as needed.</p> <p>Interview on 2/22/18 at 3:05 p.m. with the facility Registered Nurse revealed: -HCPR checks were done upon hire for staff. -HCPR forms were to be kept in staff personnel record. -Staff B's HCPR form was not in her personnel record. -She would check with the Administrator to see if she knew where to locate Staff B's HCPR check.</p> <p>Interview on 2/22/18 at 4:30 p.m. with Staff B revealed: -She was hired to cook, clean, and assist residents when needed. -She did not know if there was HCPR check document. -She did not know what a HCPR check was or that she was supposed to have the document in her personnel record. -No one had spoken to her about needing a HCPR check completed.</p> <p>Interview on 2/22/18 at 3:40 p.m. with the Administrator revealed: -Staff B's HCPR should be in her personnel record. -"I know the HCPR check was done by me upon hiring." -She did not know why the document could not be found. -She would try to locate the HCPR document or have another check done.</p>	D 137		

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D 137	Continued From page 12 A HCPR check was not done for Staff B by the end of the survey.	D 137		
D 270	<p>10A NCAC 13F .0901(b) Personal Care and Supervision</p> <p>10A NCAC 13F .0901 Personal Care and Supervision (b) Staff shall provide supervision of residents in accordance with each resident's assessed needs, care plan and current symptoms.</p> <p>This Rule is not met as evidenced by: Follow up to a TYPE A2 VIOLATION</p> <p>Based on these findings the previous Type A2 was not abated.</p> <p>Based on observations, interviews and record reviews the facility failed to assure supervision was provided for 1 of 1 sampled residents (resident #1) with a history of smoking in the facility.</p> <p>The findings are:</p> <p>Review of the facility's smoking policy revealed: -The document was hand written. -There was no smoking inside the building or rooms. -There was smoking in designated areas only. -The cigarette butts were to be disposed of in appropriate containers. -All cigarettes and lighters were to be turned in to the Medication Aide nightly. -The first violation was a verbal warning.</p>	D 270		

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D 270	<p>Continued From page 13</p> <ul style="list-style-type: none"> -The second violation was a written warning. -The third and final violation was a 30 day notice of discharge. -The Administrator's signature was at the bottom of the document. <p>Review of Resident #1's current FL-2 dated 9/11/17 revealed:</p> <ul style="list-style-type: none"> -Diagnoses included Schizophrenia, Diabetes, and Duodenal Ulcer, Anemia, and Hyperlipidemia. -Resident #1 was verbally abusive with slurred speech. -Resident #1 was intermittently disoriented. <p>Review of the statements of policies and procedures signed by Resident #1 on 2/21/18 revealed:</p> <ul style="list-style-type: none"> -The first policy was titled "policies for use of tobacco." -Smoking occurred in designated places outside of the building. -There was no smoking in the facility and rooms. -Staff would follow the same policies and supervise smokers. -The facility reserved the right to confiscate "smoking materials" if the policies were not followed. -Chewing tobacco and snuff would only be used outside. -The resident first signed the document on 8/23/99. -The resident signed the second set of policies but it was not dated. <p>Observation of the front porch of the facility on 2/21/18 at 10:15 A.M. revealed:</p> <ul style="list-style-type: none"> -Resident #1 was sitting with two other residents. -Resident #1 was smoking a cigarette. -There were several cigarette receptacles on the 	D 270		

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D 270	<p>Continued From page 14</p> <p>front porch that contained numerous cigarette butts and trash.</p> <p>-A sign that read "No Smoking" was posted on the front door of the facility.</p> <p>-Staff were not present on the front porch nor at the front door.</p> <p>Observation of the entrance hallway of the facility on 2/21/18 at 10:17 A.M. revealed a "No Smoking" sign was posted on the wall.</p> <p>Observation of the rear ramp attached to the facility on 2/21/18 at 10:45 A.M. revealed:</p> <p>-One cigarette receptacle was near the rear door of the facility.</p> <p>-The receptacle contained several cigarette butts and trash.</p> <p>-The receptacle was full to the top with trash.</p> <p>-A single partially smoked cigarette was approximately 5 inches from the receptacle placed near the door.</p> <p>-No other cigarette butts or partially smoked cigarettes were placed directly on the ramp.</p> <p>Observation of Resident #1's room on 2/21/18 at 10:50 A.M. revealed:</p> <p>-An odor of cigarette smoke was noted throughout the room.</p> <p>-A can of room deodorant spray was sitting on the nightstand.</p> <p>-On the floor by the left side of the bed, there were six areas of cigarette ashes.</p> <p>-On the floor by the right side of the bed, there was a cigarette package top wrapper.</p> <p>Observation of Resident #1 on 2/21/18 at 10:15 A.M. revealed he had slurred speech. When asked the location of staff, he pointed to the front door</p>	D 270		

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D 270	<p>Continued From page 15</p> <p>Interview with a resident on 2/21/18 at 11:00 A.M. revealed: -The staff took the cigarettes and lighters from the residents at night. -The cigarettes were collected about the same time that the front door was locked -The doors of the facility were locked at 7:00 P.M..</p> <p>Observation of Resident #1's room on 2/21/18 at 3:33 P.M. revealed a cigarette butt at the foot of the resident's bed surrounded by cigarette ashes. The cigarette butt was not lit.</p> <p>Observation of Resident #1 on 2/21/18 at 3:34 P.M. revealed: -He placed his right foot into the ashes near the bed and swiped his foot from side to side. -He did not brush away the cigarette butt at the foot of his bed. -The staff came to his room because of the volume of his voice.</p> <p>Interview with the MA on 2/21/18 at 3:45 P.M. revealed: -She had worked for the owner for six years. -She had a good rapport with Resident #1. -She gave Resident #1 one cigarette at a time. -She gave him the first cigarette of the day when she arrived in the morning at 7:00 A.M. -He would ask for a cigarette every 8-10 minutes in the morning. -Resident #1 smoked on the front porch and sometimes on the back ramp. -Resident #1 did not have a lighter. -The staff lit Resident #1's cigarettes. -The staff took turns checking Resident #1. -The staff did not document the checks. -Resident #1 smoked heavily during the morning after awakening.</p>	D 270		

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D 270	<p>Continued From page 16</p> <ul style="list-style-type: none"> -Resident #1 asked other residents to light his cigarettes. -A resident had lit cigarettes for Resident #1 on the back ramp. -This was reported to her by another resident. -Resident #1 was influenced to smoke in his room by a former resident, who was caught smoking in the room. -As a result, Resident #1 started smoking in the room with the former resident, who was discharged from the facility a year ago. -The staff kept all residents' cigarettes "up front", locked in the office. -The other residents were given one pack of cigarettes at a time. -When a resident finished one pack they could obtain another pack from staff. -She had not caught Resident #1 smoking in his room. <p>Observation of Resident #1 on 2/21/18 at 3:55 P.M. revealed:</p> <ul style="list-style-type: none"> -Resident #1 entered the building from the front porch. -Resident #1 had a cigarette in between his fingers. -Resident #1 was stopped in the hallway by the MA, after he passed the dining room door. -The cigarette was taken from the resident by the MA. -Resident #1 continued to walk down the hallway and entered his room. <p>Observation of Resident #1's room on 2/21/18 at 4:00 P.M. revealed:</p> <ul style="list-style-type: none"> -The MA placed her right index finger into the cigarette ashes on the floor and swiped it from side to side. -She removed the cigarette butt from the foot of Resident #1's bed and swept the ashes away. 	D 270		

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D 270	<p>Continued From page 17</p> <p>Second interview with the MA on 2/21/18 at 4:05 P.M. revealed:</p> <ul style="list-style-type: none"> -The substance on the floor was partially dirt and partially cigarette ashes. -She knew Resident #1 would enter the facility with a lit cigarette. -If she saw Resident #1, she stopped him from taking the lit cigarette to his room. -The room was swept that morning. -The cigarettes and lighters were collected by the staff at 7:00 P.M. -When daylight savings time changed, the residents kept their cigarettes and lighters longer. -The cigarettes and lighters were locked in the medication cart. -She was the only person in possession of the medication cart key. -She took the keys home with her at night. -She planned to talk with Resident #1 about smoking in his room. -The Administrator had talked with Resident #1 previously about smoking in the room. -She completed the first check on Resident #1 at 7:00 A.M. -She completed the last check on the resident at 7:15 P.M. each night. -Only one resident used oxygen in the facility. -The resident who used oxygen was hospitalized but would return to the facility when discharged. <p>Interview with Personal Care Aide on 2/21/18 at 5:10 P.M. revealed:</p> <ul style="list-style-type: none"> -She became permanent staff approximately two weeks ago. -She previously worked as relief staff at the facility three times in December 2017 and January 2018. -She was taught by the MA what to do for supervision of residents. 	D 270		

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D 270	<p>Continued From page 18</p> <ul style="list-style-type: none"> -She was taught to check Resident #1's room for cigarettes, ashes, and cigarette butts. -She was instructed there was no smoking allowed in resident rooms. -She picked up the cigarettes and lighters at 7:00 P.M. from residents. -If a resident was smoking inside their room, she was to contact the MA. -Resident #1 did not have a roommate. -She checked Resident #1 periodically every hour. -She checked Resident #1 if she performed a task near his room, happened to be down the hallway, and throughout the day. -She had not seen the ashes and cigarette butt found in Resident #1's room. -She asked the other residents who lit the cigarette for Resident #1, after the ashes were found. -Another resident must have lit a cigarette for Resident #1 during the night. -She made the last round/check on Resident #1 between 9:30 and 10:00 P.M. -If she could not sleep, she made the last round at 11:00 P.M. -Resident #1 was given one cigarette at a time by staff only. -He was given one cigar per day. -She lit the cigarettes and cigars for Resident #1. -Other residents had lit Resident #1's cigarettes in the past. -She had not seen Resident #1 smoke in his room. <p>Observation of resident room #2 on 2/22/18 at 8:20 A.M. revealed:</p> <ul style="list-style-type: none"> -The room was on the opposite side of the hallway and one room up from Resident #1's room. -The room was on a different hallway from the 	D 270		

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D 270	<p>Continued From page 19</p> <p>door leading to the front porch, a designated smoking area.</p> <ul style="list-style-type: none"> -There was a sign placed on the door indicating a warning due to oxygen. -There were three oxygen tanks/canisters were in the room. -An oxygen concentrator attached to an approximately 8 feet length of oxygen tubing with nasal cannula. -One of the oxygen canisters was attached to the oxygen concentrator. -The large canister was standing beside the chest of drawers. -The small canister was standing in a wheeled carrier and attached to oxygen tubing. <p>Observation of the front porch of the facility from 7:55 A.M. to 8:30 A.M. on 2/22/18 revealed:</p> <ul style="list-style-type: none"> -Resident #1 was sitting with another resident. -Resident #1 was smoking a cigarette and holding a green and white cigarette package. -The other resident left the front porch and entered the facility. -Resident #1 had two cigarettes in the green and white cigarette package. -Resident #1 did not have a lighter. -Staff were not present on the front porch. -Resident #1 was on porch smoking a cigarette. -A PCA was in the parking lot speaking with a person in a vehicle. -The PCA returned to the porch area at 8:50 A.M. and walked into the facility. -Resident #1 remained on the porch smoking a cigarette. <p>Interview with a second resident on 2/22/18 at 9:15 A.M. revealed:</p> <ul style="list-style-type: none"> -He had seen Resident #1 enter the building with cigarette butts. -He last saw Resident #1 enter the facility with 	D 270		

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D 270	<p>Continued From page 20</p> <p>cigarette butts on Wednesday.</p> <ul style="list-style-type: none"> -Resident #1 asked other residents to light the cigarette butts. -He had seen other residents light Resident #1's cigarette butts. <p>Interview with a third resident on 2/22/18 at 10:10 A.M. revealed:</p> <ul style="list-style-type: none"> -The staff gave Resident #1 two to three cigarettes at one time. -Resident #1 usually smoked each cigarette completely. <p>Interview with the facility Registered Nurse on 2/22/18 at 11:55 A.M. revealed:</p> <ul style="list-style-type: none"> -The staff checked the rooms for the odor of cigarette smoke, cigarette butts, and cigarettes. -She was told by the MA on 2/21/18 that ashes were found in Resident #1's room. -Resident #1 was to have one cigarette at a time. -The staff did not have to be outside to supervise Resident #1. -The staff had a camera in the office that viewed the front porch. -The staff were to watch him when he entered the facility after a cigarette was smoked. -If the staff missed seeing the resident when he entered, they were to go to his room and check him. <p>Interview with the Administrator on 2/22/18 at 3:10 P.M. revealed:</p> <ul style="list-style-type: none"> -She provided orientation to all new staff. -Staff were made aware of supervision needs for Resident #1. -Staff were told to give Resident #1 one cigarette at a time and light cigarettes for him. -Resident #1 could not have a lighter. -The staff were to remain with Resident #1 on the front porch while he smoked. 	D 270		

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D 270	<p>Continued From page 21</p> <ul style="list-style-type: none"> -Staff were to ensure Resident #1 did not bring any cigarette butts into the facility. -She knew of the hazard caused by smoking with oxygen within the facility. -There was no smoking in the facility. <p>Observation of Resident #1 on 2/22/18 at 4:30 P.M. revealed:</p> <ul style="list-style-type: none"> -Resident #1 walked into facility from the front porch with a cigarette butt between two fingers. -The PCA was made aware. -The resident was stopped in the hallway by the PCA. -The cigarette butt was given to the PCA by Resident #1. <hr/> <p>The facility's failure to implement supervision for Resident #1 with an extensive history of smoking in the facility placed all residents at a increased risk for harm due to the presence of oxygen within the facility. This noncompliance resulted in substantial risk for serious physical harm and constitutes an unabated Type A2 violation.</p> <hr/> <p>Review of the facility's Plan of Protection submitted on 2/22/18 revealed:</p> <ul style="list-style-type: none"> -All rooms will be checked today for any evidence of smoking in the rooms. -For confused/non-compliant (smoking policy) residents, they will be given 1 cigarette which will be lighted by staff. -They (residents) will be checked when ready to return to the building to ascertain they have no other cigarettes or butts on their person. -The above residents will also be monitored while smoking by a staff person. -Staff will do a walk-through at night to check for 	D 270		

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D 270	Continued From page 22 any evidence of smoking in resident rooms or bathrooms. -Confused/non-compliant (smoking policy) residents will be given one cigarette at a time which will be lighted by staff. -(Staff will) monitor confused/noncompliant (smoking policy) residents while smoking, sit with residents while smoking and returning to the building after smoking to make sure they have no lighted cigarettes or butts on them. -Continual reminders to residents who smoke not to give cigarettes or lighters to confused/non-compliant residents. -Daily check of all rooms for evidence of smoking to include drawers, and closets, and window sills. -Make sure all cigarettes and lighters are turned in every night.	D 270		
D 283	10A NCAC 13F .0904(a)(2) Nutrition and Food Service 10A NCAC 13F .0904 Nutrition and Food Service (a) Food Procurement and Safety in Adult Care Homes: (2) All food and beverage being procured, stored, prepared or served by the facility shall be protected from contamination. This Rule is not met as evidenced by: Based on observation and interviews, the facility failed to assure open packages of food in the storage area (pantry) were repackaged and labeled or in containers, frozen foods were thawed in the refrigerator, and spills in the freezer were cleaned up to protect the food supply from contamination. The findings are: Observation of kitchen and food storage area on 2/21/18 at 11:05pm revealed:	D 283		

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D 283	<p>Continued From page 23</p> <ul style="list-style-type: none"> -A white plastic bowl was setting on a table outside the dining room with pears (Resident snacks) in the bowl. The inside of the bowl was coated with a thick brownish substance. -A metal rack with shelves was near the wall on the right side of the pantry. 6 opened mesh bags of yellow onions were on the top shelf of the rack. Most of the onions had green sprouts which over 12 inches tall. The floor beneath the rack was littered with the outer skins of the onions. -A 50 pound bag of potatoes was sitting on the floor beside the metal rack and the bag was torn opened. Several potatoes were on the floor beside the bag and under the metal shelf. -On food storage shelves in the pantry were an opened 5 pound bag of sugar, an opened 5 pound bag of flour, an opened 5 pound bag of corn meal, an opened 20 pound bag of rice, opened boxes of dry cereal and opened bags of cookies and crackers. The bags were not resealed with package open dates. -On a storage shelf under the bags of flour, meal and sugar were 2empty plastic containers with spilled flour and sugar on the plastic lids. -Dark brownish grime was on the floor under the storage shelves and the metal rack. -The chest-type freezer in the facility's kitchen a thick coat of ice/frost inside with brown spills soaked in the ice/frost on the right inside of the freezer. Raw frozen meat, vegetables, bread and milk were stored in the freezer. -A gallon of frozen milk was in the hand washing sink, in the kitchen, near the freezer. <p>Observation of kitchen on 2/21/18 at 2:25pm revealed 2 packages of frozen raw meat were in the hand washing sink with a plastic bag of frozen rolls on top of the meat.</p> <p>Interview with the Supervisor on 2/21/18 at</p>	D 283		

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D 283	<p>Continued From page 24</p> <p>2:30pm revealed:</p> <ul style="list-style-type: none"> -She cooked the meals was not aware the hand washing sink could not be used to thaw food. -The staff did not use the hand washing sink to wash their hands but used the double sinks. -She often placed frozen foods, including containers of frozen milk, in the hand sink to thaw but was are frozen foods should be thawed in the refrigerator. -If the food to be prepared for the next meal was not taken out of the freezer early enough to thaw in the refrigerator, she would place it in the hand washing sink. -She replaced the bowl on the table with clean bowl for the residents' fruit. -The Supervisor placed the frozen meat in a bowl and placed the bowl in the refrigerator and removed the rolls out of the hand sink. -She was aware opened food packages should be resealed using zip locked bags or plastic containers with open dates documented on the packages. <p>Observation on 8/22/18 at 8:40am revealed:</p> <ul style="list-style-type: none"> -The bags of flour, sugar, corn meal and rice were sealed in zip locked plastic bags and dates were documented on the bags. -The bag of potatoes remained on the floor beside the metal rack and the opened bags of onions remained on the top shelf of the rack. <p>Interview with the facility's nurse on 2/22/18 at 11:50am revealed:</p> <ul style="list-style-type: none"> -She was aware all packages of opened food must be resealed with open date documented on package or container. -The potatoes and onions should be stored in an opened container and not on the floor. The facility will obtain open containers for the potatoes and onions and store the containers off the floor. 	D 283		

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D 283	Continued From page 25 -She would assure the staff reseal open packages with open dates documented on the packages and the flour, meal, sugar, rice were stored in plastic containers with lids. -All outdated foods will be thrown out. Interview with the Administrator on 2/22/18 revealed: -The Supervisor was responsible for properly storing all of the facility's food. -The Supervisor was aware of the proper procurement of food to prevent contamination.	D 283		
D 306	10A NCAC 13F .0904(d)(3)(H) Nutrition and Food Service 10A NCAC 13F .0904 Nutrition and Food Service (d) Food Requirements in Adult Care Homes: (3) Daily menus for regular diets shall include the following: (H) Water and Other Beverages: Water shall be served to each resident at each meal, in addition to other beverages. This Rule is not met as evidenced by: Based on observation and interviews, the facility failed to assure water was served to all residents at 2 observed meals. The findings are: Observation of the dinner meal on 2/21/18 from 5:00pm to 5:30pm revealed: -Eight residents were in dining room eating dinner. -Each resident was served fruit punch with their meal. -There was no water served to any of the residents throughout the meal.	D 306		

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D 306	<p>Continued From page 26</p> <p>Resident interview on 2/21/18 at 5:15pm revealed: -Water was never served with meals. -The only water they served was the water in the Kool Aide.</p> <p>Observation of the breakfast meal on 2/22/18 from 8:00am to 8:30am revealed: -Eight residents were in dining room eating dinner. -Each resident was served coffee with their meal. -There was no water served to any of the residents throughout the meal.</p> <p>Interviews with 2 residents on 2/22/18 at 8:10am revealed: - Water was never served with meals unless someone had to ask for it. There was only 1 resident who asked for water during meals. -If water was served at each meal, they would drink the water.</p> <p>Interview with the Supervisor on 2/22/18 at 8:40am revealed: -Water was not served with meals because the residents got water from the water cooler outside of the dining room at any time. -She thought it was okay not to serve water since the facility provided a water cooler for the residents. -Except for 1 resident, the other residents never asked for water during meals.</p> <p>Interview with the facility's nurse on 2/22/18 at 5:45pm revealed: -Staff should be serving water to the residents at each meal. -Even though the facility had enough glasses and cups to serve water, she purchased more cups to use for serving water to all of the residents at</p>	D 306		

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D 306	Continued From page 27 each meal. -The staff was made aware the cups were to be used to serve water at meal times to all of the residents.	D 306		
D 317	10A NCAC 13F .0905 (d) Activities Program 10A NCAC 13F .0905 Activities Program (d) There shall be a minimum of 14 hours of a variety of planned group activities per week that include activities that promote socialization, physical interaction, group accomplishment, creative expression, increased knowledge and learning of new skills. Homes that care exclusively for residents with HIV disease are exempt from this requirement as long as the facility can demonstrate planning for each resident's involvement in a variety of activities. Examples of group activities are group singing, dancing, games, exercise classes, seasonal parties, discussion groups, drama, resident council meetings, book reviews, music appreciation, review of current events and spelling bees. This Rule is not met as evidenced by: Based on observations, interviews and record reviews the facility failed to assure a minimum of 14 hours of scheduled activities were provided each week for 9 residents currently residing at the facility. The findings are: Observations of a dry erase calendar board on the wall of the facility on 2/21/18 at 10:16 A.M. revealed: -The board was displayed in the entrance hallway	D 317		

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D 317	<p>Continued From page 28</p> <p>across from the medication window.</p> <ul style="list-style-type: none"> -An activity was written on each day of the week. -Some activities had scheduled times and some activities did not have scheduled times. -An older schedule of activities could be viewed as faint markings underneath the current schedule. -The schedule of activities for the week of 2/18/18 through 2/24/18 totaled 12 hours. -The scheduled activity at 10:15 A.M. on 2/21/18 was bible study. <p>Observations of the facility dining room and dayroom on 2/21/18 at 10:20 A.M. revealed:</p> <ul style="list-style-type: none"> -No activities were occurring in the dayroom. -No activities were occurring in the dining room. -Residents were in and out of the dayroom area. -Three residents were sitting in the dayroom watching the television. -The scheduled activity during this time was bible study. <p>Interview with a resident on 2/21/18 at 10:50 A.M. revealed:</p> <ul style="list-style-type: none"> -The staff took residents out into the community to shop and to eat at local restaurants on or around payday. -Payday was on the 10th of the month. -A bible study was not done this day. -The bible study occurred on Sunday. -A family member came to the facility to conduct the church service for the facility. <p>Interview with a second resident on 2/21/18 at 10:52 revealed:</p> <ul style="list-style-type: none"> -He stayed to himself the majority of the time. -He left his room to smoke, eat, and attend outings with staff. -The residents were allowed to leave the facility if they signed out. 	D 317		

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D 317	<p>Continued From page 29</p> <ul style="list-style-type: none"> -He and other residents would walk to local stores. -The staff took them to local restaurants, shops and the park. -The residents did not do activities daily at the facility. <p>Interview with a third resident on 2/21/18 at 11:26 A.M. revealed:</p> <ul style="list-style-type: none"> -She stayed to herself in the room most days. -The staff took the residents out to restaurants and shopping on pay day. -Payday was once a month on the 10th of the month. -She did not recall any bible study occurring on this day. -She thought maybe the bible study would be held the next day. <p>Interview with the Medication Aide (MA) on 2/21/18 at 3:45 P.M. revealed:</p> <ul style="list-style-type: none"> -She had worked for the company and owner for six years. -The residents did activities at the facility. -Residents did activities in their rooms. -A religious group came in on Thursdays. -One of the resident's family member came on Sundays to conduct bible study. -She or the registered nurse took residents to a local store to shop on payday monthly. <p>Observations of the facility dining room and dayroom on 2/22/18 at 9:00 A.M. revealed:</p> <ul style="list-style-type: none"> -No activities were occurring in the dayroom. -No activities were occurring in the dining room. -The scheduled activity for this time and date was workout. <p>Interview with the Personal Care Aide (PCA) on 2/22/18 at 10:00 A.M. revealed:</p>	D 317		

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D 317	<p>Continued From page 30</p> <ul style="list-style-type: none"> -The staff usually conducted the activity that was posted on the board. -The residents played the toss game in the dayroom. -She would conduct the activity for 30 minutes to one hour. -She was told the length of time to hold an activity by the registered nurse. -She did not take the residents out for outings. -The MA or the registered nurse took residents out for outings. -The calendar was completed by the MA monthly. <p>Interview with a resident on 2/22/18 at 10:10 A.M. revealed:</p> <ul style="list-style-type: none"> -He did not see an activity being held in the facility on that day. -He was not offered to attend an activity. <p>Observation of the facility dining room and dayroom on 2/22/18 at 10:16 A.M. revealed no activities were occurring.</p> <p>Interview with the MA on 2/22/18 at 11:04 A.M. revealed:</p> <ul style="list-style-type: none"> -Activities were usually offered during the day and sometimes in the afternoon. -The residents would play Bingo and went out for outings to local stores monthly. -The residents did not want to participate in activities. -The registered nurse purchased prizes from the local store to give to residents for participation. -She was keeping a log of residents who participated in activities. -She completed the activities calendar for February. -She called another MA at another facility to ask questions about how to prepare the activity calendar. 	D 317		

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D 317	<p>Continued From page 31</p> <ul style="list-style-type: none"> -There were supposed to be 12 to 16 hours of activities per week. -Each activity was conducted for 2 to 3 hours. -She was told this by the other MA. -She was not the activity director. -There was an activity director and shedid not know the person's name. <p>Interview with facility Registered Nurse on 2/22/18 at 12:00 noon revealed:</p> <ul style="list-style-type: none"> -She tried to supervise the activity calendar. -She purchased games for the residents to play. -The residents did not want to participate in activities. -The residents watched movies in their rooms. -She would walk around and "talk to them about the movie they watched to help stimulate the brain." -She purchased prizes to give to residents for participating. -A religious group came to the facility to speak with residents on Thursdays. -One of the resident's family member came to conduct bible study on Sundays when she was available. -The Administrator had an activity director. -She had only met the activity director once at another facility. -She did not know the name of the activity director. <p>Interview with the Administrator on 2/22/18 at 3:10 P.M. revealed:</p> <ul style="list-style-type: none"> -The staff were to offer activities based on the activity calendar. -The staff was to document who participated. -She prepared the last calendar and the MA was to prepare the February calendar. -She had an activity director for the facility. -The activity director had not been to the facility in 	D 317		

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D 317	<p>Continued From page 32</p> <p>"a while".</p> <ul style="list-style-type: none"> -The activity director only came to the facility when needed. -The activity director came when there was a new resident, a specific age group had a need or to get residents involved with activities. -She did not know the date of the activity director's last visit to the facility. -Some residents played cards but most "didn't do much of anything". -The MA was to supervise the calendar and activities. -The MA was in charge of the facility. -The staff has been told to offer activities, do the activities based on the calendar, and sign the book that an activity has been done. <p>Observation of the facility dayroom on 2/22/18 at 3:45 P.M. revealed the PCA played toss with the five residents.</p> <p>Review of the participation log kept by the MA revealed:</p> <ul style="list-style-type: none"> -The log was maintained in a spiral notebook. -The first date entered was October 3rd with no indication of the year. -Each date listed contained the name of an activity and the name of the residents who participated. -The final date of the log was 1/3/18. -The final date had no activity or participant names listed beside it. 	D 317		
D912	<p>G.S. 131D-21(2) Declaration of Residents' Rights</p> <p>G.S. 131D-21 Declaration of Residents' Rights Every resident shall have the following rights: 2. To receive care and services which are adequate, appropriate, and in compliance with</p>	D912		

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D912	<p>Continued From page 33</p> <p>relevant federal and state laws and rules and regulations.</p> <p>This Rule is not met as evidenced by: Based on observations, interviews and record reviews, the facility failed to assure residents received care and services which were adequate, appropriate, and in compliance with relevant federal and state laws and rules and regulations as related to supervision for residents who had a history of smoking inside the facility.</p> <p>The findings are:</p> <p>Based on observations, interviews and record reviews the facility failed to assure supervision was provided for 1 of 1 sampled residents (Resident #1) with a history of smoking in the facility [Refer to Tag D270, 10A NCAC 13F .0901(b) Personal Care and Supervision (Unabated Type A2 Violation)].</p>	D912		