Division of Health Service Regulation STATEMENT OF DEFICIENCIES (X1) PROVIDER/SUPPLIER/CLIA AND PLAN OF CORRECTION IDENTIFICATION NUMBER:				CONSTRUCTION		(X3) DATE SURVEY COMPLETED	
FCL017026			A. BUILDING:				
		B. WING			R 01/02/2024		
NAME OF F	PROVIDER OR SUPPLIER	STREET A	DDRESS, CITY, STATE, ZIP CODE				
L & L FA	MILY CARE		ANDLER MILL I, NC 27311	ROAD			
(X4) ID PREFIX TAG	(EACH DEFICIENC)	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)		(EACH CORRECTIVE ACT CROSS-REFERENCED TO	DER'S PLAN OF CORRECTION RRECTIVE ACTION SHOULD BE FERENCED TO THE APPROPRIATE DEFICIENCY)		
C 000	Initial Comments		C 000				
		ensure Section conducted an Ip survey on January 2, 2024.					
C 269	10A NCAC 13G .0904 (c)(6) Nutrition And Food Service		C 269				
	 10A NCAC 13G .0904 Nutrition And Food Service Menus in Family Care Homes: (6) Menus for all therapeutic diets shall be planned or reviewed by a licensed dietitian/nutritionist. The facility shall maintain verification of the licensed dietitian/nutritionist's approval of the therapeutic diets. 						
	failed to ensure the	et as evidenced by: ions and interviews, the facility rapeutic menus were planned egistered Dietician (RD).					
		kitchen on 01/02/24 at 9:00am no menu available for staff to	1				
	9:03am revealed: -There were three r room table. -Each resident was	eal preparation. breakfast meal on 01/02/24 at residents seated at the dining served scrambled eggs, ham rits, water, and coffee or hot					
	Interview with 2 res 9:45 and 10:15am	idents on 01/02/24 between revealed:					

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NAME OF	PROVIDER OR SUPPLIER	STREET A	DDRESS, CITY, ST	TATE, ZIP CODE			
L & L FA	MILY CARE		ANDLER MILL I, NC 27311	ROAD			
(X4) ID PREFIX TAG	(EACH DEFICIENC)	TEMENT OF DEFICIENCIES / MUST BE PRECEDED BY FULL SC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF (EACH CORRECTIVE AC CROSS-REFERENCED TO DEFICIENC	FION SHOULD BE THE APPROPRIATE	N SHOULD BE COMPLE	
C 269	Continued From page 1		C 269				
	each meal. -She enjoyed the m -Another resident w was served. -He ate all his food Interview with the M 11:00am revealed: -The facility did not review menus for th -He did not know a review menus for th -He knew there was that was all the faci -He knew the menu were being prepare Interview with the A 11:12am revealed: -She had a hand-w she had received fr -The menu was not meals. -She did not have a for her facility.	RD was needed to prepare or he facility. s a menu for one week, but lity had. was not followed when meals ed. dministrator on 01/02/24 at ritten menu for one week that om another family care home. t posted in the kitchen. t followed when preparing a RD prepare or review menus e she needed a RD to prepare	5				

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