

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: FCL092299	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 12/14/2023
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NAME OF PROVIDER OR SUPPLIER AVENDELLE FUQUAY	STREET ADDRESS, CITY, STATE, ZIP CODE 709 MINEVA DALE DRIVE FUQUAY VARINA, NC 27526
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C 000	Initial Comments	C 000		
C 078	<p>10A NCAC 13G .0315(a)(5) Housekeeping and Furnishings</p> <p>10A NCAC 13G .0315 Housekeeping and Furnishings (a) Each family care home shall: (5) be maintained in an uncluttered, clean and orderly manner, free of all obstructions and hazards; This Rule shall apply to new and existing homes.</p> <p>This Rule is not met as evidenced by: Based on observations and interviews, the facility failed to maintain an environment free of hazards including medications, personal care items, and cleaning solution in residents' rooms and bathrooms that were accessible to residents.</p> <p>The findings are:</p> <p>Observation of Resident #2's bedroom on 12/14/23 at 11:00am revealed: - Anasep .057% spray was observed on a dresser - Medicated body powder and wound cleaner was observed on a dresser.</p> <p>Observation of the hallway bathroom on 12/14/23 at 11:05am revealed: -Bleach cleaner was located under the sink in a plastic bin. -There was a plastic bin which contained 17</p>	C 078	<p>All Medications were locked in med closet. as of 12/15/23. Cleaners have been locked in laundry closet as of 12.15.23. Nurse and Administrator will monitor house and do check in visits to insure they remain locked up. All bathroom supplies like shampoo and body wash have been out in individual containers labeled with residents name on them and locked in laundry closet.</p>	

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE _____ TITLE _____ (X6) DATE _____

Deshaun Sellers

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Reviewed and Acknowledged 02/19/24

Jamaal Willis

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C 078	<p>Continued From page 1</p> <p>bottles of nail polish. -There was a bottle of hairspray in a drawer under sink.</p> <p>Observation of the bathroom in a resident room on 12/14/23 at 11:10am revealed: - Zinc oxide skin protectant and wound cleaner was located in an unlocked cabinet. - Body powder, aftershave, and personal care items were located in a sink drawer.</p> <p>Interview with a personal care aide (PCA) on 12/14/23 at 11:20am revealed: -Personal care items were not locked away and available to residents. -The medicated wound care anaccept and body powder should have been locked in the closet with resident medications. -She did not know that bleach cleaner and personal care items should not be accessible to residents. -All of the residents were diagnosed with dementia and Alzheimer's. -One of the residents in the facility had a history of wandering into other residents' rooms and seeking food to eat.</p> <p>Interview with the Administrator on 12/14/23 at 2:20pm revealed: -He was aware that cleaning supplies needed to be locked up and not accessible to residents. -He was aware that all medication should be locked away at all times and not accessible to residents. -Staff had been trained to lock cleaning supplies away in the cabinet in the laundry room when not in use. -Staff had been trained to lock medication in the closet in the living room when not in use. -He did not have an answer as to why cleaning</p>	C 078		

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C 078	Continued From page 2 supplies and medication were accessible to residents. -Staff was expected to keep hazards locked up and not accessible to residents.	C 078		
C 257	<p>10A NCAC 13G .0904(a)(1) Nutrition and Food Service</p> <p>10A NCAC 13G .0904 Nutrition and Food Service (a) Food Procurement and Safety in Family Care Homes: (1) Food services shall comply with Rules Governing the Sanitation of Residential Care Facilities set forth in 15A NCAC 18A .1600 which are hereby incorporated by reference, including subsequent amendments, assuring storage, preparation, and serving food under sanitary conditions.</p> <p>This Rule is not met as evidenced by: Based on observations and interviews, the facility failed to ensure that food items being stored and served to residents were dated and labeled and that the refrigerator was clean.</p> <p>The findings are:</p> <p>Observation of the refrigerator on 12/14/23 at 9:04 am revealed: -Food crumbs and stains were at the bottom of the refrigerator and inside drawers. The dining room table was not clean after serving</p>	C 257		

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C 257	<p>Continued From page 3</p> <p>the residents morning breakfast at 9:00 am. -There were two food items in the refrigerator that were not labeled with the dates or what the items were. -Two sausage links were open sitting on a shelf, not stored in a plastic bag, dated, or labeled. -There was a fruit cup not dated or labeled. -There were three food items in the refrigerator in its original packaging not dated. -There was smoked ham labeled but not dated. -There was turkey breast labeled but not dated. -There was Swiss cheese labeled but not dated.</p> <p>Observation of the chest freezer on 12/14/23 at 9:04 am revealed: -There were two food items in the chest freezer that were not labeled with the dates or what the items were. -A plastic container with meat in red juice was not labeled or dated. -A store bought pizza was not labeled or dated.</p> <p>Observation of the pantry on 12/14/23 at 9:04 am revealed: -There were penne noodles and spaghetti noodles opened in their original packaging, not sealed or dated. -There were grits in their original packaging opened, not sealed or dated. -There was flour in its original packaging, opened, not sealed or dated. - There were two bags of cereals opened; not sealed, labeled, or dated.</p> <p>Interview with the Medication Aide (MA) on 12/14/23 at 9:45 am revealed: -The day shift staff was responsible for resident care, which included showers, meals, and supervising the residents (including wanderers). -She prepared and served the meals to the</p>	C 257	<p>Refrigerator has been cleaned and will be cleaned every night on 3rd shift. Food will be stored in original container labeled with date opened. If original container is not available after opening staff will store food in container or storage bag with date and time labeled on bag. 3rd shift will clean and check fridge for items expiring and discard of items.</p>	

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C 257	Continued From page 4 residents. -She was unaware that food in the refrigerator, chest freezer, and pantry should have been dated and labeled. -She treated the home like she would her home, so she did not know she was to add dates and labels to open food packages. Interview with the Administrator on 12/14/23 at 2:10 pm revealed: -He was aware that the items should be dated and labeled. -He purchased clear containers to store and seal unused food in the refrigerator. -He was unaware that food in the pantry must be sealed with labels and dates. -He would provide containers to reseal food.	C 257		
C 265	10A NCAC 13G .0904(c)(2) Nutrition And Food Service 10A NCAC 13G .0904 Nutrition And Food Service (c) Menus in Family Care Homes: (2) Menus shall be maintained in the kitchen and identified as to the current menu day for guidance of food service staff. This Rule is not met as evidenced by: Based on observations, record reviews, and interviews, the facility failed to maintain a current menu day for the guidance of food service staff.	C 265		

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C 265	<p>Continued From page 5</p> <p>The findings are:</p> <p>Observation in the facility's kitchen on 12/14/23 at 9:04 am revealed:</p> <ul style="list-style-type: none"> -There was no menu posted in the kitchen area for review. -There was no alternate menu provided to Residents prior to the meal. <p>Observation of the regular diet menu for the lunch meal on the facility's computer on 12/14/23 at 10:12 am revealed:</p> <ul style="list-style-type: none"> -There was an entry for pepper steak (the facility substituted chicken salad sandwiches) -There was an entry for delicious rice (the facility substituted chips) -There was an entry for vegetable medley (the facility substituted a Pickle) -There was an entry for baked roll (the facility did not substitute) -There was an entry for a frosted zucchini bar (the facility did not substitute) <p>Interview with the MA on 12/14/23 at 9:45 am revealed:</p> <ul style="list-style-type: none"> -She prepared and served the meals to the residents. -The menu was usually on the refrigerator, but the printer broke three days earlier, and she could not make a copy for the week. -She told the residents verbally what was on the menu and had an alternative replacement if the residents did not like or want said menu. -She was unaware that she should have documented the substitution meal or food replaced in the records. <p>Telephone Interview with the Administrator on 12/14/23 at 2:10 pm revealed:</p>	C 265	<p>Residents diets are posted in kitchen were staff can clearly see diets.</p> <p>Daily menu and alternate menu will be posted in kitchen daily. House manager to post and insure this is done daily.</p>	

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C 265	Continued From page 6 -He was aware that the menu should be posted in the facility. -The printer went out, and the staff was unable to print the menu. -He was aware that the staff should record the food replacement.	C 265		
C 270	<p>10A NCAC 13G .0904 (c)(7) Nutrition And Food Service</p> <p>10A NCAC 13G .0904 Nutrition And Food Service Menus in Family Care Homes: (7) The facility shall have a matching therapeutic diet menu for any resident's physician-ordered therapeutic diet for guidance of food service staff.</p> <p>This Rule is not met as evidenced by: Based on observations, record reviews, and interviews, the facility failed to ensure there was a correspondent therapeutic or modified menu was available for guidance for 1 of 3 sampled residents (#3) who were on a regular and chopped diet.</p> <p>The findings are:</p> <p>Review of Resident #3' current FL 2, dated 12/14/23, revealed: -Diagnoses included dementia, hypertension, and hyperlipidemia. -Ther was an order for a regular diet, chopped food</p> <p>Review of Resident #3's electronic chart revealed there was no diet order found.</p>	C 270		

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C 270	<p>Continued From page 7</p> <p>Observation of the lunch meal on 12/14/23 at 11:30 am revealed: -Resident #3 was served a chicken salad sandwich on toast cut in half, chips, a pickle, tea, and no water offered with the meal. -He ate 100% of his chicken salad sandwich served on toast and chips, with a second helping of a chicken salad sandwich, and he ate 50% of his pickle and drank 50% of his tea. -He was served the regular diet menu.</p> <p>Observation of the kitchen on 12/14/23 at 9:04 am revealed: -There was no menu posted for a regular diet for the week of 12/11/23. -There was no corresponding menu posted for residents on a chopped diet.</p> <p>Observation of the regular diet menu for the lunch menu on the facility's computer on 12/14/23 at 10:12 am revealed: -There was an entry for pepper steak (the facility substituted chicken salad sandwiches) -There was an entry for delicious rice (the facility substituted chips) -There was an entry for vegetable medley (the facility substituted a Pickle) -There was an entry for baked roll (the facility did not substitute) -There was an entry for a frosted zucchini bar (the facility did not substitute)</p> <p>Interview with the MA on 12/14/23 at 1:54 pm revealed: -She prepared and served the meals to the residents. -She knew Resident #3 was on a regular chopped diet. -No one at the facility taught her how to prepare</p>	C 270		

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C 270	<p>Continued From page 8</p> <p>"chop food" for the resident on a modified chopped diet. -She was unaware that a corresponding menu should be posted in the kitchen for the residents on modified diets to provide guidance.</p> <p>Telephone Interview with the Administrator on 12/14/23 at 2:10 pm revealed: -He was not looking at the resident's records and could not say which residents were on special diets. -He was unaware that the diet extension should be posted in the facility. -He was unaware that a list should be posted in the facility. -He was not an expert, but a chopped diet meant that all food should be chopped to help with swallowing.</p>	C 270		
C 280	<p>10A NCAC 13G .0904(d)(4) Nutrition and Food Service</p> <p>10A NCAC 13G .0904 Nutrition and Food Service (d) Food Requirements in Family Care Homes: (4) Water shall be served to each resident at each meal, in addition to other beverages.</p> <p>This Rule is not met as evidenced by: Based on observations, record reviews, and interviews, the facility failed to serve water during the lunch meal.</p> <p>The findings are:</p> <p>Observation during the lunch meal on 12/14/23 at 11:30 am revealed:</p>	C 280		

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C 280	<p>Continued From page 9</p> <p>-There was no water served to any residents. -A sign on the daily meal schedule was posted on a cabinet in the kitchen stating that all meals are to have water and juice/milk.</p> <p>Interview with the MA on 12/14/23 at 1:54 pm revealed: -She prepared and served the meals to the residents. -She knew to offer and serve water at each meal. -She usually offered water but forgot because she was busy and so much was going on.</p> <p>Telephone Interview with the Administrator on 12/14/23 at 2:10 pm revealed that he knew water should be offered but was unsure if it had to be at each meal.</p>	C 280		
C 283	<p>10A NCAC 13G .0904 (e)(3) Nutrition And Food Service</p> <p>10A NCAC 13G .0904 Nutrition And Food Service Therapeutic Diets in Family Care Homes: (3) The facility shall maintain a current listing of residents with physician-ordered therapeutic diets for guidance of food service staff.</p> <p>This Rule is not met as evidenced by: Based on observations, record reviews, and interviews, the facility failed to maintain a current list with physician-order therapeutic or modified diets for guidance for 1 of 3 sampled residents (#3) who were on a regular and chopped diet.</p> <p>The findings are:</p>	C 283		

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C 283	<p>Continued From page 10</p> <p>Review of Resident #3, current FL 2, dated 12/14/23, revealed: -Diagnoses included dementia, hypertension, and hyperlipidemia. -Regular diet, chopped food Review of Resident #3's electronic chart; no diet order was found.</p> <p>Observation of the lunch meal on 12/14/23 at 11:30 am revealed: -Resident #3 was served a chicken salad sandwich on toast cut in half, chips, and a pickle. -He ate 100% of his chicken salad sandwich served on toast and chips, with a second helping of a chicken salad sandwich, and he ate 50% of his pickle and drank 50% of his tea. -He was served a regular diet menu.</p> <p>Observation of the regular diet menu for the lunch menu on 12/14/23 at 10:12 am revealed: -There was an entry for pepper steak (the facility substituted chicken salad sandwiches) -There was an entry for delicious rice (the facility substituted chips) -There was an entry for vegetable medley (the facility substituted a Pickle) -There was an entry for baked roll (the facility did not substitute) -There was an entry for a frosted zucchini bar (the facility did not substitute)</p> <p>Observation of the kitchen on 12/14/23 at 9:04 am revealed there was no list of residents on therapeutic or modified diets available.</p> <p>Interview with the medication aide (MA) on 12/14/23 at 1:54 pm revealed: -She knew Resident #3 was on a regular and chopped diet.</p>	C 283		

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C 283	Continued From page 11 -She was unaware there needed to be a list of residents posted in the kitchen who were on therapeutic or modified diets and what the diet was. Telephone Interview with the Administrator on 12/14/23 at 2:10 pm revealed he was unaware there needed to be a list of residents posted in the kitchen who were on therapeutic or modified diets and what the diet was.	C 283		
C 292	10A NCAC 13G .0905 (d) Activities Program 10A NCAC 13G .0905 Activities Program (d) There shall be at least 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. This Rule is not met as evidenced by: Based on observations and interviews the facility failed to ensure residents were offered at least 14 hours of a variety of planned group activities per week. The findings are: Observation of the facility during initial tour on 12/14/23 at 8:45am revealed there was no activities calendar posted in the facility. Observation of the facility residents on 12/14/23 from 8:30am until 12:30pm revealed there were no activities being offered to residents.	C 292	Activity calendar is to be displayed on TV screen daily. Activity log to be completed by staff daily of what activity they performed with residents and which residents attended the activity. House manager and Administrator will monitor to make sure it is done.	

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C 292	<p>Continued From page 12</p> <p>Observation of facility residents on 12/14/23 from 1:30pm until 3:30pm revealed there were no activities being offered to residents.</p> <p>Attepmnt to interview residents #1 and #2 were unsuccessful.</p> <p>Interview with a personal care aide (PCA) on 12/14/23 at 10:40am revealed: -The facility did not have an activity calendar. -She played catch with residents 30 minutes each day after lunch. -She occasionally did trivia questions with residents after lunch. -There were no other activities being provided to residents in the facility. -Staff provided about 3 to 4 hours of activities a week to residents.</p> <p>Interview with the Administrator on 12/14/23 at 11:45am revealed: -There should have been an activity calendar on the television screen in the living room. -He was aware that residents needed to be provided with 14 hours of activities per week. -He was not aware that the residents were not being offered 14 hours of activities per week. -He expected his staff members to provide 14 hours of activities to residents each week.</p>	C 292		