

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 345078	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 02/06/2014
NAME OF PROVIDER OR SUPPLIER HIGHLAND FARMS			STREET ADDRESS, CITY, STATE, ZIP CODE 200 TABERNACLE ROAD BLACK MOUNTAIN, NC 28711	
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F 242 SS=D	<p>483.15(b) SELF-DETERMINATION - RIGHT TO MAKE CHOICES</p> <p>The resident has the right to choose activities, schedules, and health care consistent with his or her interests, assessments, and plans of care; interact with members of the community both inside and outside the facility; and make choices about aspects of his or her life in the facility that are significant to the resident.</p> <p>This REQUIREMENT is not met as evidenced by: Based on resident and staff interviews and record reviews, the facility failed to provide residents with the amount or type of baths/showers that they had previously requested each week for one of three residents (#34).</p> <p>Findings Included:</p> <p>1. Resident #34 was admitted with diagnoses including dementia, diabetes, and dysphasia. The latest quarterly Minimum Data Set (MDS) dated 11/08/13 assessed the resident as cognitively intact and able to understand and make herself understood. The MDS also assessed Resident #34 as requiring physical help in bathing by one staff person.</p> <p>Interview with Nursing Assistant (NA) #1 on 02/05/14 at 10:33 AM revealed showers were provided for residents twice weekly.</p> <p>Interview with Resident Care Coordinator on 02/05/14 at 2:11 PM revealed each resident was scheduled for 2 regular showers per week and residents and family members were allowed to verbalize special requests if they wanted</p>	F 242	<p>Givens Highland Farms Retirement Community wishes to have this plan of correction stand as its allegation of compliance. Our date of alleged compliance is March 2, 2014. Preparation and execution of this plan of correction does not constitute admission to nor agreement with either the existence of or scope and severity of any cited deficiencies or conclusion set forth in the statement of deficiencies. This plan is prepared and executed to ensure continuing compliance with regulatory requirements.</p> <p>F242 Resident #34 was interviewed by DON and ADON to determine frequency and type of bathing preferences. Resident preferences have been accommodated.</p> <p>All residents or responsible parties as appropriate were interviewed regarding choice of type and frequency of bathing. Resident choices were honored related to</p>	3/6/14

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

TITLE

(X6) DATE

Electronically Signed

02/21/2014

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 242	<p>Continued From page 1 something different.</p> <p>Interview with Resident #34 on 02/06/14 at 9:04 AM revealed she had been told by staff the rule at the facility was residents could only be provided with two showers each week. Resident #34 stated because she had asked for more than two showers per week, staff had recently begun to bring her a pan of water and washcloth each morning so that she could clean herself daily. Resident #34 stated she was grateful to be able to clean herself daily with the pan of water and washcloth but would certainly prefer to be showered more frequently than twice weekly if she had the choice. Resident #34 stated she got hot easily in the facility and tended to sweat profusely which is why she preferred daily showers.</p> <p>Interview with Shower Team Nursing Assistant (STNA) #1 on 02/06/14 at 10:36 AM revealed the shower schedule was set to allow each resident 2 showers a week, based on the location of their room in the facility. STNA #1 stated if a resident requested an extra shower, the shower team made an effort to work them in on their unassigned day. STNA #1 stated Resident #34 was always extremely eager to get her shower and waiting on the shower team when they arrived on the two mornings per week her showers were scheduled. STNA #1 stated she had never asked Resident #34 if she was happy with her scheduled showers or if she wanted to be provided additional showers.</p> <p>Follow up interview with the Resident Care Coordinator on 02/06/14 at 10:45 AM revealed the responsibility to assess resident preferences for frequency of showers fell to nurse aides on</p>	F 242	<p>interviews.</p> <p>Newly admitted residents will be interviewed on admission regarding frequency and type of bathing preferences by the social worker. Resident bathing choices will be reviewed quarterly during interdisciplinary care plan meetings and documented.</p> <p>Resident bathing choices and how to request changes will be addressed in the resident council at least quarterly with minutes recorded.</p> <p>All nursing staff will be educated regarding resident choices about types and frequency of bathing by the staff development coordinator and Licensed Nurse. Any staff not available will be educated prior to returning to work. All new employees will be educated during orientation.</p> <p>DON or ADON will conduct resident interviews for compliance with bathing preferences on 5 random residents weekly X4 then 5 residents monthly x 3. Results of the monitoring will be reviewed monthly at QA Meetings and adjustments to plan of correction made as needed to achieve compliance.</p>		

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PRINTED: 11/12/2014
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F 242	Continued From page 2 the shower team, who got to know the residents' shower preferences through experience with them. Interview with Admissions Coordinator on 02/06/14 at 10:53 AM revealed residents and families were not asked specifically about their shower frequency preference during the admission process. The Admissions Coordinator stated the floor nurse reviewed with admitting residents their existing shower schedule based on their room's location. Interview with MDS Coordinator on 02/06/14 at 11:04 AM revealed residents and families were informed by the nurses during the admissions process which two days the resident's showers were scheduled each week. The MDS Coordinator stated that other than being asked at care plans how things were going, she was not aware of any part of the process when residents and families were asked about preferences for shower types or frequency, and expressed her thoughts that to initiate a preference assessment would be a good idea for the facility.	F 242			
F 312 SS=D	483.25(a)(3) ADL CARE PROVIDED FOR DEPENDENT RESIDENTS A resident who is unable to carry out activities of daily living receives the necessary services to maintain good nutrition, grooming, and personal and oral hygiene. This REQUIREMENT is not met as evidenced by: Based on observations, record review, and staff	F 312	Givens Highland Farms Retirement	3/6/14	

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F 312	<p>Continued From page 3</p> <p>and family interviews, the facility failed to thoroughly cleanse the eyes of 1 of 3 dependent residents sampled for hygiene and grooming issues. (Resident #54).</p> <p>The findings included:</p> <p>Resident #54 was admitted to the facility on 12/25/13. Diagnoses included diabetes, urinary tract infection, dysphagia, muscle weakness, and hypertension.</p> <p>The admission Minimum Data Set dated 01/01/14 coded him as having intact cognition, no behaviors, having adequate vision with glasses and requiring extensive assistance for hygiene. The Care Area Assessment for activities of daily living skills dated 01/07/14 indicated he required one to two persons to assist him with dressing and grooming and a care plan would be developed to meet his hygiene needs.</p> <p>The current care plan developed 01/14/14 identified the problem that Resident #54 needed assistance with bathing, hygiene and toileting. The goal was for Resident #54 to be well groomed and appropriately dressed with limited to extensive assistance daily with him participating as able. Interventions included: *encouraging and assisting in maintenance of good grooming and dressing with giving verbal reminders and verbal cues while bathing, dressing and grooming; *providing assist for brushing teeth and dressing and telling the resident when/if he looked unkempt and assist with dressing, grooming and oral hygiene as needed.</p> <p>Review of the medical record revealed no nursing</p>	F 312	<p>Community wishes to have this plan of correction stand as its allegation of compliance. Our date of alleged compliance is March 2, 2014. Preparation and execution of this plan of correction does not constitute admission to nor agreement with either the existence of or scope and severity of any cited deficiencies or conclusion set forth in the statement of deficiencies. This plan is prepared and executed to ensure continuing compliance with regulatory requirements.</p> <p>Resident #54 eyes were cleaned on 2/5/2014 and are cleaned daily by nursing staff.</p> <p>All residents were assessed for eye drainage/matter. Any residents found with eye drainage/matter were cleaned thoroughly by nursing staff.</p> <p>All nursing staff will be educated regarding thorough cleaning of the eyes by the staff development coordinator or licensed nurse. Any staff not available will be educated prior to returning to work. All new employees will be educated during orientation.</p> <p>DON, ADON or licensed nurse will monitor for eye drainage/matter on 5 random residents weekly X4 then 5 residents monthly x 3.</p> <p>Results of the monitoring will be reviewed monthly at QA Meetings and adjustments to plan of correction made as needed to</p>		

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F 312	<p>Continued From page 4</p> <p>notes, no physician notes and no medical orders were written regarding problems with Resident #54 having eye drainage or matting.</p> <p>Observations on 02/03/14 at 3:38 PM revealed Resident #54 sitting in his chair reading. He was well dressed but had a large amount of eye matter in his right eye with a little eye matter in the left eye. On 02/04/14 at 8:59 AM, Resident #54 was again observed sitting in his room. His eyes had a large amount of crusty eye matter in the corner of his right eye. His family who was visiting at the time stated the resident's eyes had matter in them a lot and staff didn't seem to be able to get it out of his eyes. She stated staff could be more attentive to this need. Another observation on 02/04/14 at 3:34 PM revealed the resident's eyes appeared cleaner although there was noticeable crust in the right eye on the outer edge. On 02/05/14 at 8:39 AM as he was eating breakfast, dressed for the day, both eyes were observed to have wet matter in them. The left eye was less matted than the right. The right eye had wet matter inside both edges and across the bottom eyelid. There was so much matter, only a small clearing was observed in the center of his eye. He stated no one had cleaned his eyes this morning.</p> <p>On 02/05/14 at 8:58 AM, Nursing Assistant (NA) #1 was interviewed about his care. NA #1 stated she had wiped his eyes out this morning and was able to get "some crumbs" out of his eyes but because the matter was so moist it was very difficulty to remove it all as she did not want to scrub too hard. She also stated he tried to remove it himself.</p> <p>On 02/05/14 at 10:09 AM Resident #54's family</p>	F 312	achieve compliance.		

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F 312	<p>Continued From page 5</p> <p>stated she has had to ask staff to clean his eyes before because the amount of residue she had found in his eyes. She stated that staff had come in this morning and cleaned them although she could not recall who did the cleaning. His eyes were observed much cleaner and free of any matter at this time.</p> <p>Interview with Nurse #1 on 02/05/14 at 10:12 AM revealed she last worked on this hall last Sunday and his eyes were not bad. She stated she was unaware of any problems with eye matter. She stated she cleaned his eyes this date. She stated she was able to clean them with a warm wash cloth.</p> <p>Interview with NA #2 on 02/05/14 at 3:56 PM revealed there was matter in his eyes but it was easily removed with a wet wash cloth.</p> <p>On 02/06/14 at 9:17 AM, Resident #54 was eating breakfast and was clean well groomed and with no eye matter. Interview with family at this time revealed she was happy with his eye care this morning. She stated she has had to ask staff to clean his eyes almost every day when she visited. She thought it was better to clean them in the morning before the matter began to dry.</p> <p>On 02/6/14 at 9:20 AM, NA #3 stated Resident #54's eyes got matted often and were especially matted in the mornings. She described his eyes as red, watery and the matter was very sticky. She stated the nurses were aware of this problem and she had asked them about eye scrubs and was told he did not have any ordered.</p> <p>On 02/06/14 at 9:48 AM the medical physician was interviewed and stated that he could not</p>	F 312			

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F 312	<p>Continued From page 6</p> <p>recall anyone mentioning Resident #54 having problems with excessive eye matter.</p> <p>On 02/06/14 at 9:51 AM, Nurse #2 stated she had noticed Resident #54's eye matter lately. She stated nurse aides had not asked her to help clean this matter from his eyes and she planned on requesting the physician to order eyes scrubs for Resident #56. She further stated eye scrubs should work better at cleaning Resident #54's eyes.</p> <p>On 02/06/14 at 12:08 PM the Resident Care Coordinator stated that he was not aware of problems with Resident #54's eye matter. He stated the nurses are usually good at contacting the physican or the physician assist (they each come in once a week) for those types of issues.</p>	F 312			