

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

PRINTED: 04/24/2018
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 345194	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED C 03/22/2018
NAME OF PROVIDER OR SUPPLIER GLENFLORA			STREET ADDRESS, CITY, STATE, ZIP CODE 5701 FAYETTEVILLE ROAD LUMBERTON, NC 28360		
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F 561 SS=D	<p>Self-Determination CFR(s): 483.10(f)(1)-(3)(8)</p> <p>§483.10(f) Self-determination. The resident has the right to and the facility must promote and facilitate resident self-determination through support of resident choice, including but not limited to the rights specified in paragraphs (f) (1) through (11) of this section.</p> <p>§483.10(f)(1) The resident has a right to choose activities, schedules (including sleeping and waking times), health care and providers of health care services consistent with his or her interests, assessments, and plan of care and other applicable provisions of this part.</p> <p>§483.10(f)(2) The resident has a right to make choices about aspects of his or her life in the facility that are significant to the resident.</p> <p>§483.10(f)(3) The resident has a right to interact with members of the community and participate in community activities both inside and outside the facility.</p> <p>§483.10(f)(8) The resident has a right to participate in other activities, including social, religious, and community activities that do not interfere with the rights of other residents in the facility. This REQUIREMENT is not met as evidenced by: Based on staff interviews, resident interviews, and record review the facility failed to allow residents the choice to take a whirlpool bath or shower as often as desired or scheduled for 3 of 11 residents, (Residents #12, #17 and #21).</p> <p>Findings included:</p>	F 561	<p>The facilities, during periods when the Shower Aide was used for other duties, bathing schedule for the residents with a bath or whirlpool scheduled may have been moved to another day or the resident received a bed bath. This was the basis for the deficiency F561.</p>	4/19/18	

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

TITLE

(X6) DATE

Electronically Signed

04/12/2018

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 561	<p>Continued From page 1</p> <p>1. Resident #12 was admitted to the facility on 10/24/16 with diagnoses that included Parkinson's disease. A quarterly Minimum Data Set Assessment dated 01/01/18 documented intact cognition, no moods or behaviors and he was not resistant to care. He was dependent for toileting and bathing.</p> <p>In an interview conducted on 03/22/18 at 10:05 AM with Resident #12 he stated that he was not getting enough showers. He said he would prefer to have a shower every other day. He commented that he would at least like to have 2 showers every week if he could not have one every other day.</p> <p>Review of the facility Hygiene Roster revealed that Resident #12 received a total of (2) showers between 01/01/18 and 03/20/18. He did receive a bed bath on the other days. Review of the Whirlpool/Shower Roster revealed that Resident #12 was scheduled to receive a whirlpool bath or a shower on every Monday and Wednesday each week.</p> <p>In an interview with Nurse Aide #1 on 03/22/18 at 11:46 AM she stated that she worked as the facility Transporter, Restorative Aide, Certified Nurse Aide I and II, and Medication Technician. She said that she got pulled to an assignment on the floor when there was a call out and the shower aide had already been pulled to an assignment. She said that she was able to complete her assignment but was not able to complete all the showers that were scheduled. She stated that she tried to make up the showers on the weekends because there were only showers scheduled Monday through Friday. She</p>	F 561	<p>The plan for implementing a correction for this, the facility has individually interviewed the residents capable of expressing their wishes for a W/P or shower and the time of day that is preferred. For new admissions new residents will be asked their preference for a W/P or bath and preferred time of day. The Director of Nursing and Administrator will have staff meetings with the CNA's on April 11, 2018 to discuss the expectations that residents receive the W/P or shower of choice at roughly the time requested by the resident.</p> <p>The Director of Nursing will audit new admissions and current resident bathing schedules to measure whether the residents are receiving the preferred W/P or bath at their preferred time of day. The Director of Nursing will audits the current residents records for documentation of the residents preferred procedure and time period of choice and that the bathing schedule reflects the resident choice. The Director of Nursing will also audit new admissions to assure resident bathing preference is met as closely as possible and that they are scheduled on the bathing schedule as closely as possible to their wishes, such as a resident request for a morning shower will be scheduled for a morning time. The Director of Nursing will audit the resident bathing choices and schedule and completion each week for 10 weeks. Following the 10 weeks the Director of Nursing will randomly will review and audit the bathing completion and resident choices.</p>		

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F 561	<p>Continued From page 2</p> <p>said she was aware whenever a whirlpool or shower was given to a resident on her assignment by the shower aide because she assisted with preparing the resident for the shower and took the resident to the shower room for the shower aide. She commented that she was responsible for charting that the activity occurred.</p> <p>In an interview with Nurse Aide #2 on 03/22/18 at 12:10 PM she said that she worked as a Certified Nurse Aide I, usually on the 100 Hall. She stated that if there was no shower aide that she could usually give 2 of 3 showers scheduled and would tell the shower aide to make up the missed showers on the next day. She stated that other resident care prevented her from giving showers to residents as they were scheduled. She revealed that she was aware when a whirlpool or shower was given by the shower aide because she got the resident ready to go and took the resident to the shower room. She said she charted each shift whether a resident on her assignment received a bed bath, a whirlpool or a shower for that day.</p> <p>In an interview with Nurse Aide #3 on 03/22/18 at 12:50 PM she reported that she was the shower aide for the facility. She stated that she would get pulled first to an assignment if there was a call out. She stated that when she was pulled to an assignment no one else was assigned to give showers. She commented that it was not the responsibility of the Nurse Aides to give the scheduled showers unless a resident requested one. She reported that when she was pulled to the floor all the residents received a bed bath unless a resident requested to take a shower. She said that she was pulled to the floor to work</p>	F 561	<p>The Director of Nursing will be the responsible individual for monitoring the plans implementation and will report to the Administrator any deviations from residents choices and correction to the plan. The Director of Nursing will also report at the next Quality Assurance meeting (June 2018) the success of the plan implemented and adjustments that may be required.</p> <p>The expected completion for the plan which includes a resident audit, schedule adjustment, staff meeting to be completed by April 19, 2018.</p>		

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F 561	<p>Continued From page 3</p> <p>an assignment approximately twice a week because other staff members called out. She stated that when she was working as the shower aide that she was not responsible for charting when a whirlpool bath or shower was given. She said the aide assigned to the resident was responsible for all charting.</p> <p>In an interview with the Director of Nursing on 03/22/18 at 9:10 AM she stated that residents were scheduled to receive a whirlpool bath or shower twice a week. She stated that she expected the nurse aides on each assignment to complete the whirlpool baths or showers if the shower aide was pulled to cover an assignment on the floor.</p> <p>2. Resident #17 was admitted to the facility on 02/17/17 with diagnoses that included cerebral vascular accident with hemiplegia. An annual Minimum Data Set Assessment dated 01/21/18 documented that he had intact cognition, no behaviors, and did not resist care. He was dependent for bathing.</p> <p>In an interview conducted on 03/21/18 with Resident #17 he stated that he was only getting one shower a week, but would like and should be getting two showers weekly. He reported he was on the shower schedule to receive two showers weekly. He commented that he would ask staff why he could not get his showers when they were scheduled, but no staff members would provide an explanation. He stated showers made him feel cleaner and more alert.</p> <p>Review of the facility Hygiene Roster revealed that Resident #17 received a total of (1) whirlpool bath and (1) shower between the dates of</p>	F 561			

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F 561	<p>Continued From page 4</p> <p>01/01/18 and 03/20/18. He did receive a bed bath on the other days. Review of the Whirlpool/Shower Roster revealed that Resident #17 was scheduled to receive a whirlpool bath or a shower every Wednesday.</p> <p>In an interview with Nurse Aide #1 on 03/22/18 at 11:46 AM she stated that she worked as the facility Transporter, Restorative Aide, Certified Nurse Aide I and II, and Medication Technician. She said that she got pulled to an assignment on the floor when there was a call out and the shower aide had already been pulled to an assignment. She said that she was able to complete her assignment but was not able to complete all the showers that were scheduled. She stated that she tried to make up the showers on the weekends because there were only showers scheduled Monday through Friday. She said she was aware whenever a whirlpool or shower was given to a resident on her assignment by the shower aide because she assisted with preparing the resident for the shower and took the resident to the shower room for the shower aide. She commented that she was responsible for charting that the activity occurred.</p> <p>In an interview with Nurse Aide #2 on 03/22/18 at 12:10 PM she said that she worked as a Certified Nurse Aide I, usually on the 100 Hall. She stated that if there was no shower aide that she could usually give 2 of 3 showers scheduled and would tell the shower aide to make up the missed showers on the next day. She stated that other resident care prevented her from giving showers to residents as they were scheduled. She revealed that she was aware when a whirlpool or shower was given by the shower aide because</p>	F 561			

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F 561	<p>Continued From page 5</p> <p>she got the resident ready to go and took the resident to the shower room. She said she charted each shift whether a resident on her assignment received a bed bath, a whirlpool or a shower for that day.</p> <p>In an interview with Nurse Aide #3 on 03/22/18 at 12:50 PM she reported that she was the shower aide for the facility. She stated that she would get pulled first to an assignment if there was a call out. She stated that when she was pulled to an assignment no one else was assigned to give showers. She commented that it was not the responsibility of the Nurse Aides to give the scheduled showers unless a resident requested one. She reported that when she was pulled to the floor all the residents received a bed bath unless a resident requested to take a shower. She said that she was pulled to the floor to work an assignment approximately twice a week because other staff members called out. She stated that when she was working as the shower aide that she was not responsible for charting when a whirlpool bath or shower was given. She said the aide assigned to the resident was responsible for all charting.</p> <p>In an interview with the Director of Nursing on 03/22/18 at 9:10 AM she stated that residents were scheduled to receive a whirlpool bath or shower twice a week. She stated that she expected the nurse aides on each assignment to complete the whirlpool baths or showers if the shower aide was pulled to cover an assignment on the floor.</p> <p>3. Resident #21 was admitted to the facility on 11/19/14 with a re-admission date of 08/25/16. Diagnoses included cerebral vascular accident</p>	F 561			

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F 561	<p>Continued From page 6 and Parkinson's disease. A quarterly Minimum Data Set Assessment dated 01/26/18 documented that she had intact cognition, and no behaviors. She was not resistant to care. She was dependent for bathing.</p> <p>In an interview conducted on 03/21/18 at 2:20 PM with Resident #21 she revealed that for the last three months she was only getting one shower or whirlpool a week. She commented when she asked why she could not get showers she was told the shower aide was pulled to work on the floor, and the facility was short of staff. She reported she would really like to have showers every other day, but would be satisfied with two weekly. She stated two showers a week helped her feel cleaner and her hair looked better.</p> <p>Review of the facility Hygiene Roster revealed that Resident #21 received a total of (5) whirlpool baths and (3) showers between the dates of 01/01/18 and 03/20/18. She did receive a bed bath on the other days. Review of the Whirlpool/Shower Roster revealed that Resident #17 was scheduled to receive a whirlpool bath or a shower every Tuesday and Thursday.</p> <p>In an interview with Nurse Aide #1 on 03/22/18 at 11:46 AM she stated that she worked as the facility Transporter, Restorative Aide, Certified Nurse Aide I and II, and Medication Technician. She said that she got pulled to an assignment on the floor when there was a call out and the shower aide had already been pulled to an assignment. She said that she was able to complete her assignment but was not able to complete all the showers that were scheduled. She stated that she tried to make up the showers on the weekends because there were only</p>	F 561			

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F 561	<p>Continued From page 7</p> <p>showers scheduled Monday through Friday. She said she was aware whenever a whirlpool or shower was given to a resident on her assignment by the shower aide because she assisted with preparing the resident for the shower and took the resident to the shower room for the shower aide. She commented that she was responsible for charting that the activity occurred.</p> <p>In an interview with Nurse Aide #2 on 03/22/18 at 12:10 PM she said that she worked as a Certified Nurse Aide I, usually on the 100 Hall. She stated that if there was no shower aide that she could usually give 2 of 3 showers scheduled and would tell the shower aide to make up the missed showers on the next day. She stated that other resident care prevented her from giving showers to residents as they were scheduled. She revealed that she was aware when a whirlpool or shower was given by the shower aide because she got the resident ready to go and took the resident to the shower room. She said she charted each shift whether a resident on her assignment received a bed bath, a whirlpool or a shower for that day.</p> <p>In an interview with Nurse Aide #3 on 03/22/18 at 12:50 PM she reported that she was the shower aide for the facility. She stated that she would get pulled first to an assignment if there was a call out. She stated that when she was pulled to an assignment no one else was assigned to give showers. She commented that it was not the responsibility of the Nurse Aides to give the scheduled showers unless a resident requested one. She reported that when she was pulled to the floor all the residents received a bed bath unless a resident requested to take a shower.</p>	F 561			

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F 561	Continued From page 8 She said that she was pulled to the floor to work an assignment approximately twice a week because other staff members called out. She stated that when she was working as the shower aide that she was not responsible for charting when a whirlpool bath or shower was given. She said the aide assigned to the resident was responsible for all charting. In an interview with the Director of Nursing on 03/22/18 at 9:10 AM she stated that residents were scheduled to receive a whirlpool bath or shower twice a week. She stated that she expected the nurse aides on each assignment to complete the whirlpool baths or showers if the shower aide was pulled to cover an assignment on the floor.	F 561			
F 725 SS=D	Sufficient Nursing Staff CFR(s): 483.35(a)(1)(2) §483.35(a) Sufficient Staff. The facility must have sufficient nursing staff with the appropriate competencies and skills sets to provide nursing and related services to assure resident safety and attain or maintain the highest practicable physical, mental, and psychosocial well-being of each resident, as determined by resident assessments and individual plans of care and considering the number, acuity and diagnoses of the facility's resident population in accordance with the facility assessment required at §483.70(e). §483.35(a)(1) The facility must provide services by sufficient numbers of each of the following types of personnel on a 24-hour basis to provide nursing care to all residents in accordance with resident care plans:	F 725		4/19/18	

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F 725	<p>Continued From page 9</p> <p>(i) Except when waived under paragraph (e) of this section, licensed nurses; and</p> <p>(ii) Other nursing personnel, including but not limited to nurse aides.</p> <p>§483.35(a)(2) Except when waived under paragraph (e) of this section, the facility must designate a licensed nurse to serve as a charge nurse on each tour of duty.</p> <p>This REQUIREMENT is not met as evidenced by:</p> <p>Based on staff interviews, resident interviews and record review the facility failed to provide adequate staffing to accommodate the needs of the residents to have a whirlpool bath or shower as often as desired or scheduled for 3 of 11 residents, (Residents #12, #17 and #21).</p> <p>Findings Included:</p> <p>This citation is cross-referenced to:</p> <p>F561: Self Determination: Based on staff interviews, resident interviews, and record review the facility failed to allow residents the choice to take a whirlpool bath or shower as often as desired or scheduled for 3 of 11 residents, (Residents #12, #17 and #21).</p> <p>Review of the daily staffing schedules for 01/01/18 through 03/20/18 revealed that the facility had not scheduled or had reassigned the whirlpool/shower aide to different duties 35 times.</p> <p>In an interview with the Director of Nursing on 03/22/18 at 9:10 AM she stated that the normal staffing schedule for day shift included (2) Licensed Practical Nurses, (4) administrative Registered Nurses, and (9) nurse aides including</p>	F 725	<p>The issue of sufficient staff to complete resident requested W/P or showers was the outcome of the shower aide being utilized for other duties and confusion amongst staff as to completion of W/P's and showers. Bed baths were given in place of a shower or W/P.</p> <p>The facility averages 40-44 SNF residents per day. That facility staffs with 5 floor CNA's, a CNA as the ward clerk, a rehab CNA aide, a treatment aid/CNA, and a shower CNA aide. When the shower aide would be pulled for other duties there was confusion as to completion of W/P's and showers by the staff. The facility has implemented that the shower aide position is a "no pull" position and that the shower aide is not to be pulled for other duties until all showers are completed and documented for the day. On April 11, 2018 the Director of Nursing and the Administrator will have a staff meeting and discuss the expectations that the shower aide is not to be pulled for other duties until all W/P or showers are completed. The shower aide is to document the W/P or shower given. The floor CNA that has the resident is to check</p>		

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F 725	Continued From page 10 the ward clerk. On second shift the facility normally scheduled (4) nurse aides. The nurses worked 12 hour shifts. On third shift (3-4) nurse aides were normally scheduled. She said the facility did not use agency staff. If there were a nurse aide call out, she said the shower aide was pulled to the floor first, then the ward clerk followed by the restorative aide. She stated she would also offer overtime to staff on duty or try to call staff in who were not scheduled.	F 725	that the shower aide has documented the W/P or shower. The Director of Nursing will be responsible to assure the shower aide is not utilized for other duties until all daily scheduled W/P or showers are completed. The Director of Nursing will monitor weekly for 10 weeks the completion of the scheduled W/P and showers. The Director of Nursing will report weekly to the Administrator for 10 weeks and then report on random checks there after. Following the 10 weeks the Director of Nursing will still be responsible to managing the shower aide staffing and the schedule and will report to the Administrator any issues that interrupt residents from receiving their W/P or shower of choice. The Director of Nursing will monitor the completion of the scheduled showers and that Monday through Friday there is an assigned shower aide. The Director of Nursing will report to the Administrator any deviations or issues. The Director of Nursing will report to the Quality Assurance committee (June 2018) the success of the plan or if adjustments to the plan are required. the plan will be in place by April 19, 2018.		
F 838 SS=F	Facility Assessment CFR(s): 483.70(e)(1)-(3) §483.70(e) Facility assessment. The facility must conduct and document a facility-wide assessment to determine what resources are necessary to care for its residents competently during both day-to-day operations	F 838		4/19/18	

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

PRINTED: 04/24/2018
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 345194	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED C 03/22/2018
NAME OF PROVIDER OR SUPPLIER GLENFLORA			STREET ADDRESS, CITY, STATE, ZIP CODE 5701 FAYETTEVILLE ROAD LUMBERTON, NC 28360		
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F 838	<p>Continued From page 11</p> <p>and emergencies. The facility must review and update that assessment, as necessary, and at least annually. The facility must also review and update this assessment whenever there is, or the facility plans for, any change that would require a substantial modification to any part of this assessment. The facility assessment must address or include:</p> <p>§483.70(e)(1) The facility's resident population, including, but not limited to,</p> <ul style="list-style-type: none"> (i) Both the number of residents and the facility's resident capacity; (ii) The care required by the resident population considering the types of diseases, conditions, physical and cognitive disabilities, overall acuity, and other pertinent facts that are present within that population; (iii) The staff competencies that are necessary to provide the level and types of care needed for the resident population; (iv) The physical environment, equipment, services, and other physical plant considerations that are necessary to care for this population; and (v) Any ethnic, cultural, or religious factors that may potentially affect the care provided by the facility, including, but not limited to, activities and food and nutrition services. <p>§483.70(e)(2) The facility's resources, including but not limited to,</p> <ul style="list-style-type: none"> (i) All buildings and/or other physical structures and vehicles; (ii) Equipment (medical and non- medical); (iii) Services provided, such as physical therapy, pharmacy, and specific rehabilitation therapies; (iv) All personnel, including managers, staff (both employees and those who provide services under 	F 838			

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F 838	<p>Continued From page 12</p> <p>contract), and volunteers, as well as their education and/or training and any competencies related to resident care;</p> <p>(v) Contracts, memorandums of understanding, or other agreements with third parties to provide services or equipment to the facility during both normal operations and emergencies; and</p> <p>(vi) Health information technology resources, such as systems for electronically managing patient records and electronically sharing information with other organizations.</p> <p>§483.70(e)(3) A facility-based and community-based risk assessment, utilizing an all-hazards approach.</p> <p>This REQUIREMENT is not met as evidenced by:</p> <p>Based on record review and staff interview the facility failed to conduct and document a facility-wide assessment to determine what resources were necessary to care for its residents competently during day-to-day operations.</p> <p>Findings included:</p> <p>In an interview conducted with the Administrator on 03/20/18 at 9:13 AM he stated that he was not aware that he needed to complete a facility assessment because he was not part of a corporation. He stated that the facility was a stand-alone facility and he did not have the support that a corporation would offer. He reported that he was scheduled to attend a meeting with other administrators in May 2018 and would consult his peers at that time regarding the completion of a facility assessment. During the interview the Administrator demonstrated that he had access to Regulation 483.70(e), Facility</p>	F 838	<p>The facility completed the emergency operations plan, emergency policy and procedures and training by November 2017. In the plan was a facility assessment of potential risks such as weather related or other. The facility did not put into the plan the facility assessment related to daily staffing, facility capacity, equipment requirements, and resident care types or needs. The facility will complete a facility operations assessment by April 19, 2018. In the assessment will be the requirements of 483.70(e). An assessment of resident population, types of care rendered, staffing requirements pertaining to resident population, physical environment needs, and resident needs. The facility Administrator will continue to monitor changes to the facility requirements and updates to the assessment as needed. The Administrator</p>		

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F 838	Continued From page 13 Assessment.	F 838	will report to the QA committee and the Board of GlenFlora any changes or updates to the assessment of the facility services, staffing or other needs. The Administrator will be responsible to maintaining an assessment of facility resources and notifying the facilities Board of any changes. The assessment will be completed by April 19, 2018 and monitored there after by the facility Administrator. The Administrator will update the assessment as needed.		