PRINTED: 07/27/2023 FORM APPROVED OMB NO. 0938-0391

	OF DEFICIENCIES CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULT A. BUILDI	IPLE CONSTRUCTION NG		(X3) DATE SURVEY COMPLETED	Y
		345558	B. WING			R-C	
	ROVIDER OR SUPPLIER			STREET ADDRESS, CITY, STATE, ZIP CO 62 LAKE EDEN ROAD BLACK MOUNTAIN, NC 28711	DDE	07/12/202	
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F 000	INITIAL COMMENTS	3	F	000			
F 761 SS=D	Repeat tags were cit as a result of the con that was conducted a revisit. The facility is Label/Store Drugs ar		F7	761			
	Drugs and biological labeled in accordanc professional principle appropriate accessor						
	§483.45(h) Storage o	of Drugs and Biologicals					
	Federal laws, the factoriologicals in locked	ordance with State and illity must store all drugs and compartments under proper , and permit only authorized cess to the keys.					
	locked, permanently storage of controlled the Comprehensive I Control Act of 1976 a abuse, except when package drug distributed quantity stored is mir be readily detected. This REQUIREMENT by: Based on observation	cility must provide separately affixed compartments for drugs listed in Schedule II of Drug Abuse Prevention and and other drugs subject to the facility uses single unit ution systems in which the nimal and a missing dose can I is not met as evidenced ons and staff interviews the re medication cart keys for 2					
ADODATODY		CURRULER REPRESENTATIVES SIGNATUR	<u> </u>	TITLE		(Y6) DATI	

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

TITLE (X6) DAT

Electronically Signed

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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					LAKE EDEN ROAD		
NC STATE VETERANS HOME-BLACK MOUNTAIN (X4) ID SUMMARY STATEMENT OF DEFICIENCIES				LACK MOUNTAIN, NC 28711			
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F 761	Continued From pag	e 1	F	761			
	medication carts) an medication carts obsunattended by nursir medication cart).	s (Charlie Unit and Delta Unit d failed to secure 1 of 3 served to be unlocked and ng staff (Bravo Unit					
	Findings included:						
	9:02 AM revealed sh 6:00 PM shift on 06/2 She stated she agred 7:00 PM and 9:00 Pl Unit due to a staffing 7:30 PM the night of the Director of Health to leave the Charlie of the Director of Health copier room when shadministration if she stated she knocked of Services #1's office of leave and did not gethe keys in Director of mailbox in the copier there was no lock on #1's mailbox and the locked or closed. She Director of Health Semedication cart keys #2 stated she wrote	ith Nurse #2 on 07/06/23 at the worked the 6:00 AM to 26/23 on the Charlie Unit. The edition of the charlie of the stay and administer the edition of the charlie of the shortage and left around 06/26/23. Nurse #2 stated of Services (DHS) #1 told her Unit medication cart keys in the secompleted the medication was not in her office. She on Director of Health door when she was ready to the aresponse, so she placed of Health Services #1's froom. Nurse #2 stated in Director of Health Services which is stated she thought the shortly after she left. Nurse out report on a report sheet es' station for the oncoming					
	PM revealed she wo PM shift on 06/26/23 PM the evening of 0	rse #1 on 07/05/23 on 2:55 rked the 3:00 PM to 11:00 s. She stated around 8:30 6/26/23 a nurse aide (NA) n the Charlie Unit was					

	OF DEFICIENCIES CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULT A. BUILDI		CONSTRUCTION	(X3) DATE COMP	SURVEY PLETED
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		345558	B. WING _			07/	12/2023
NAME OF PI	ROVIDER OR SUPPLIER				REET ADDRESS, CITY, STATE, ZIP CODE		
NC STATE VETERANS HOME-BLACK MOUNTAIN				LAKE EDEN ROAD			
			BL	ACK MOUNTAIN, NC 28711			
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F 761	Continued From pag	e 2	F	761			
	#1 stated she could medication to the resbecause she was the not have the keys to	needed) medication. Nurse not administer the prn sident on the Charlie Unit e only nurse in the facility, did the Charlie Unit medication w where to find the Charlie keys.					
	07/12/23 at 4:17 PM 06/26/23 she told Nu Unit medication cart Bravo Unit before sh stated she expected medication cart keys	ector Health Services #1 on revealed the evening of larse #3 to take the Charlie keys to Nurse #1 on the eleft for the evening. She all nursing staff to hand off to another nursing staff to gethe facility rather than insecured location.					
	12:41 PM revealed s 6:00 PM on 06/26/23 stated she agreed to PM and 9:00 PM me due to a staffing sho PM the night of 06/20 Director of Health Se permission to leave to keys with Director of the keys in Director of the keys in Director of mailbox in the copier the medication admit knocked on Director office door when she not get a response, s Director of Health Se copier room. Nurse on Director of Health the copier room door	n Nurse #3 on 07/05/23 at the worked the 6:00 AM to 8 on the Delta Unit. She stay and administer the 7:00 dications on the Delta Unit rtage and left around 7:30 6/23. Nurse #3 stated ervices #1 gave her the Delta Unit medication cart. Health Services #1 or place of Health Services #1's room when she completed inistration. She stated she of Health Services #1's was ready to leave and did so she placed the keys in ervices #1's mailbox in the #3 stated there was no lock a Services #1's mailbox and rwas not locked or closed.					

	OF DEFICIENCIES F CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULT A. BUILDIN	IPLE CONSTRUCTION IG	COMF	SURVEY PLETED
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	ROVIDER OR SUPPLIER			STREET ADDRESS, CITY, STATE, ZIP CODE 62 LAKE EDEN ROAD BLACK MOUNTAIN, NC 28711	•	112/2025
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F 761	in an unlocked are. Health Services #1 cart keys shortly af she did not give retthe facility the ever the facility the ever An interview with E on 07/12/23 at 4:13 06/26/23 she told for medication cart key Unit before she left she expected all numedication cart key member when leaved leaving them in an 2. A continuous of medication cart on PM revealed the moutside room 212, shut, and the lock of the unlocked positione staff member when leaved the unlocked positione staff member when the unlocked positione staff member when leaved to the medication cart. Note that the unlocked position cart is an interview 3:45 PM he confirm medication cart unlocked positions while he was should have locked the should ha	tion cart keys unattended and a, but she thought Director of would pick up the medication for she left. Nurse #3 stated port to a nurse before leaving ning of 06/26/23. Director of Health Services #1 7 PM revealed the evening of Nurse #3 to take the Delta ys to Nurse #1 on the Bravo of for the evening. She stated pursing staff to hand off ys to another nursing staff fring the facility rather than unsecured location. Discription of the Bravo Unit 07/05/23 from 3:42 PM to 3:44 redication cart was parked the door to room 212 was mechanism was observed in on. During the observation walked by the unlocked urse #4 exited room 212 and	F 7	,		
	on 07/12/23 at 4:17	Director of Health Services #1 7 PM revealed she expected be locked any time they were s line of sight.				

	OF DEFICIENCIES CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	1 ' '	PLE CONSTRUCTION IG		TE SURVEY MPLETED
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{F 812} SS=E	CFR(s): 483.60(i)(1)(1)(1)(1)(1)(2)(1)(2)(1)(1)(1)(2)(1)(1)(1)(1)(1)(1)(1)(1)(1)(1)(1)(1)(1)	re food from sources red satisfactory by federal, ties. food items obtained directly subject to applicable State ulations. The ses not prohibit or prevent produce grown in facility compliance with applicable ad-handling practices. The ses not procured by the facility. The prepare, distribute and ance with professional ervice safety. The is not met as evidenced one and staff interviews the opened food and beverage in cooler, failed to ensure curely stored for 1 of 1 to label, date, and cover walk-in freezer. The deficient ential to affect food served to the revealed an opened and reverse revealed an opened and reverse revealed an opened revealed re	{F 81			

	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	1 ' '			E SURVEY IPLETED
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An interview with the PM revealed the bar been dated when it will did not know where but it should not be it. An interview with the 07/12/23 at 8:49 AM sauce should have be opened, and whoever responsible for datin bottle of soda was postaff in the activitia asked them repeated items they placed in everyone's responsidated items and the were overlooked. An interview with Ad 4:17 PM revealed he beverage items to be appropriately. 2. An observation of 07/06/23 at 3:15 PM barbecue, a metal pametal pan of greens metal pans were parplastic wrap and dat the plastic wrap and dat the plastic wrap on e back, exposing the fappeared dried out it to air. No condensa plastic wrap.	e Cook on 07/06/23 at 3:11 becue sauce should have was opened. He stated he the bottle of soda came from n the reach-in cooler. e Dietary Manager (DM) on revealed the barbecue been dated at the time it was er opened an item was g the item. He explained the laced in the reach-in cooler es department and he had dly to label and date any the cooler. He stated it was bility to check for labeled and items in the reach-in cooler ministrator #1 on 07/12/23 at e expected all food and e labeled and dated f the walk-in cooler on revealed a metal pan of an of green beans, and a were sitting on a shelf. The rially covered with clear ed 07/05/23. The corner of each metal pan was pulled bood to air. The barbecue in the area that was exposed tion was noted to the clear	{F 81			
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	SUMMARY S (EACH DEFICIENT REGULATORY OR SEQUEATORY OR SUMMARY OR SEQUEATORY OR SEQUEATORY OR SEQUEATORY OR SEQUEATORY OR SEQUEATORY OR SUMMARY OR SUMA	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION) Continued From page 5 An interview with the Cook on 07/06/23 at 3:11 PM revealed the barbecue sauce should have been dated when it was opened. He stated he did not know where the bottle of soda came from but it should not be in the reach-in cooler. An interview with the Dietary Manager (DM) on 07/12/23 at 8:49 AM revealed the barbecue sauce should have been dated at the time it was opened, and whoever opened an item was responsible for dating the item. He explained the bottle of soda was placed in the reach-in cooler by staff in the activities department and he had asked them repeatedly to label and date any items they placed in the cooler. He stated it was everyone's responsibility to check for labeled and dated items and the items in the reach-in cooler were overlooked. An interview with Administrator #1 on 07/12/23 at 4:17 PM revealed he expected all food and beverage items to be labeled and dated appropriately. 2. An observation of the walk-in cooler on 07/06/23 at 3:15 PM revealed a metal pan of barbecue, a metal pan of green beans, and a metal pan of greens were sitting on a shelf. The metal pans were partially covered with clear plastic wrap and dated 07/05/23. The corner of the plastic wrap on each metal pan was pulled back, exposing the food to air. The barbecue appeared dried out in the area that was exposed to air. No condensation was noted to the clear	ROVIDER OR SUPPLIER E VETERANS HOME-BLACK MOUNTAIN SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION) Continued From page 5 An interview with the Cook on 07/06/23 at 3:11 PM revealed the barbecue sauce should have been dated when it was opened. He stated he did not know where the bottle of soda came from but it should not be in the reach-in cooler. An interview with the Dietary Manager (DM) on 07/12/23 at 8:49 AM revealed the barbecue sauce should have been dated at the time it was opened, and whoever opened an item was responsible for dating the item. He explained the bottle of soda was placed in the reach-in cooler by staff in the activities department and he had asked them repeatedly to label and date any items they placed in the cooler. He stated it was everyone's responsibility to check for labeled and dated items and the items in the reach-in cooler were overlooked. 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An interview with the Kitchen Supervisor on 07/06/23 at 3:19 PM revealed the metal pans of	ROUNDER OR SUPPLIER 2 VETERANS HOME-BLACK MOUNTAIN SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REQUIATORY OR LSC IDENTIFYING INFORMATION) Continued From page 5 An interview with the Cook on 07/06/23 at 3:11 PM revealed the barbecue sauce should have been dated when it was opened. He stated he did not know where the bottle of soda came from but it should not be in the reach-in cooler. An interview with the Dietary Manager (DM) on 07/12/23 at 8:49 AM revealed the barbecue sauce should have been dated when it was opened. He stated he bottle of soda was placed in the reach-in cooler by staff in the activities department and he had asked them repeatedly to label and date any items they placed in the cooler. He stated it was everyone's responsibility to check for labeled and dated items and the items in the reach-in cooler were overlooked. 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An interview with the Kitchen Supervisor on 07/06/23 at 3:19 PM revealed the metal pans of	A BUILDING SUPPLIER INTERIANS HOME-BLACK MOUNTAIN SUMMANY STATEMENT OF DEPICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION) COntinued From page 5 An interview with the Cook on 07/06/23 at 3:11 PM revealed the barbecue sauce should have been dated when it was opened, and whoever opened an item was responsible for dating the litem. He explained the bottle of soda came from but it should not be in the reach-in cooler by staff in the activities department and he had asked them repeatedly to label and date any items they placed in the cooler. He stated it was everyone's responsibility to check for labeled and dated ditems and the items in the reach-in cooler were overlooked. An interview with Administrator #1 on 07/12/23 at 4:17 PM revealed the expected all food and beverage items to be labeled and dated and garden in the cooler. 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FREFIX TAG (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION) PREFIX TAG (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY) F 812 Continued From page 6 Was unsure of the exact time) and the corner of the plastic wrap was pulled back to allow the food to cool and the corners of the plastic wrap should have been put back in place once the food had cooled. An interview with the Dietary Manager (DM) on 07/12/23 at 8:49 AM revealed the food in the walk-in cooler should have been tightly covered when it was placed in the cooler and not left open to air. He stated the person who placed the food in the cooler was responsible for ensuring the food was properly covered and it was an oversight that the food was not stored correctly.				BLA	CK MOUNTAIN, NC 28711			
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4:17 PM revealed he expected all food to be stored correctly. 3. An observation of the walk-in freezer on 07/06/23 at 3:18 PM revealed a cart containing a metal pan of oatmeal, a metal pan containing scrambled eggs and 2 fried eggs, and a metal pan containing sausage patties, bacon, and chopped ham. All of the pans of food were open to air, unlabeled, and undated. The fried eggs appeared to have dry edges. An interview with the Kitchen Supervisor on 07/06/23 at 3:19 PM revealed the foods in the metal pan were from breakfast on 07/06/23 were placed in the walk-in freezer around 9:30 AM on 07/06/23 to cool down. She stated the food should have been covered and dated. The Kitchen Supervisor stated the food should only have been left in the freezer for 4 hours.	{F 812}	was unsure of the exthe plastic wrap was to cool and the corne have been put back it cooled. An interview with the 07/12/23 at 8:49 AM walk-in cooler should when it was placed in to air. He stated the in the cooler was res food was properly cooversight that the food An interview with Adr 4:17 PM revealed he stored correctly. 3. An observation of 07/06/23 at 3:18 PM metal pan of oatmea scrambled eggs and pan containing sausa chopped ham. All of to air, unlabeled, and appeared to have dry An interview with the 07/06/23 at 3:19 PM metal pan were from placed in the walk-in 07/06/23 to cool dow should have been cookitchen Supervisor s	act time) and the corner of pulled back to allow the food ers of the plastic wrap should in place once the food had Dietary Manager (DM) on revealed the food in the lawe been tightly covered in the cooler and not left open person who placed the food ponsible for ensuring the vered and it was an of was not stored correctly. The walk-in freezer on revealed a cart containing a law a metal pan containing 2 fried eggs, and a metal age patties, bacon, and the pans of food were open a undated. The fried eggs of edges. Kitchen Supervisor on revealed the foods in the breakfast on 07/06/23 were freezer around 9:30 AM on m. She stated the food wered and dated. The tated the food should only	{F 8	12}	DEFICIENCY)		

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{F 812}	the walk-in freezer we breakfast meal on 07, should have been lab when it was placed in who placed the food i Manager stated the foin the freezer for long the food in the freeze dated, and being left hours was an oversig	ere leftovers from the //06/23. He stated the food reled, covered, and dated the freezer by the person in the freezer. The Dietary rood should not have stayed er than 4 hours. He stated in not being covered, labeled, in the freezer longer than 4 ht.	{F 8	12}			