STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	34G028	A. BUILDING _____ B. WING _____	R 09/09/2021

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
LIFE, INC WILLIAM STREET HOME	**407 NORTH WILLIAM STREET GOLDSBORO, NC 27530**

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETION DATE
W 000	INITIAL COMMENTS A revisit was conducted on 9/9/21/2021 for all previous deficiencies cited on 6/2/21. The following deficiencies have been corrected; W125, W217, W263 and W441. The facility remained out of compliance in W460.	W 000		
{W 460}	FOOD AND NUTRITION SERVICES CFR(s): 483.480(a)(1) Each client must receive a nourishing, well-balanced diet including modified and specially-prescribed diets. This STANDARD is not met as evidenced by: Based on observations, record reviews and staff interviews, the facility failed to ensure 3 of 6 audit clients (#1, #4 and #6) received specially-prescribed diets as indicated. The findings are: A. During lunch observations in the home on 9/9/21 at 12:15 PM, Staff A served clients #1 and #6 from one serving bowl with the same size cut up pieces of pizza. The size of the chopped pizza was between 1/2" and 3/4" pieces. Review on 9/9/21 of client #1's Individual Program Plan (IPP) dated 9/24/20 revealed a regular diet and food should be cut into 1/2" pieces. Review on 9/9/21 of client #6's IPP dated 6/4/20 revealed a finely chopped 1/4" bite-pieces diet. Interview on 9/9/21 with Staff A revealed that she chopped all the pizza into the same size pieces.	{W 460}		

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

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.

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	34G028	A. BUILDING _____ B. WING _____	R 09/09/2021

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
LIFE, INC WILLIAM STREET HOME	**407 NORTH WILLIAM STREET GOLDSBORO, NC 27530**

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETION DATE
{W 460}	Continued From page 1 Interview on 9/9/21 with the Nurse revealed that staff have been trained to not mix all the food together when chopping into pieces. The nurse stated that food for 1/4" bite pieces should be in one bowl and food for 1/2" bite pieces should be in another bowl. B. During lunch observations in the home on 9/9/21 at 12:15 PM, Staff A served client #4 a serving of chopped, lumpy pizza in a cream sauce and chopped green beans. Review on 9/9/21 of client #4's undated diet orders that posted in the kitchen read: Regular pureed diet. All foods pureed like pudding. Interview on 9/9/21 with Staff A revealed that she chopped the pizza into small pieces and mixed it with ranch dressing, like she was trained. The green beans she boiled until they were soft and chopped into small pieces. Interview on 9/9/21 with the Regional Director regarding the appearance of client #4's food texture; she went to look up the diet order, then said the food was pureed. The Regional Director acknowledged that the appearance of client #4's plate, looked like the other clients plates. The Regional Director then told Staff A to remove client #4's plate and to blend the food until smooth. Interview on 9/9/21 with the Nurse revealed that staff have been trained how to prepare pureed food. The nurse stated that pureed food should be like pudding and the only way to puree it is in a food processor.	{W 460}		