

Division of Health Service Regulation

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| STATEMENT OF DEFICIENCIES<br>AND PLAN OF CORRECTION                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | (X1) PROVIDER/SUPPLIER/CLIA<br>IDENTIFICATION NUMBER:<br><br><b>FCL011311</b>                   | (X2) MULTIPLE CONSTRUCTION<br>A. BUILDING: _____<br><br>B. WING _____                                                    | (X3) DATE SURVEY<br>COMPLETED<br><br><b>R</b><br><b>03/03/2016</b> |
| NAME OF PROVIDER OR SUPPLIER<br><br><b>SERENITY HEART FAMILY CARE HOMES # 23'</b> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | STREET ADDRESS, CITY, STATE, ZIP CODE<br><b>231 COUNTRY TIME CIRCLE<br/>LEICESTER, NC 28748</b> |                                                                                                                          |                                                                    |
| (X4) ID<br>PREFIX<br>TAG                                                          | SUMMARY STATEMENT OF DEFICIENCIES<br>(EACH DEFICIENCY MUST BE PRECEDED BY FULL<br>REGULATORY OR LSC IDENTIFYING INFORMATION)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | ID<br>PREFIX<br>TAG                                                                             | PROVIDER'S PLAN OF CORRECTION<br>(EACH CORRECTIVE ACTION SHOULD BE<br>CROSS-REFERENCED TO THE APPROPRIATE<br>DEFICIENCY) | (X5)<br>COMPLETE<br>DATE                                           |
| {C 000}                                                                           | Initial Comments<br><br>The Adult Care Licensure Section and the Buncombe County Department of Social Services conducted a follow-up survey and complaint investigation on March 3, 2016.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | {C 000}                                                                                         |                                                                                                                          |                                                                    |
| {C 059}                                                                           | 10A NCAC 13G .0310 (b) Storage Areas<br><br>10A NCAC 13G .0310 Storage Areas<br><br>(b) There shall be separate locked areas for storing cleaning agents, bleaches, pesticides, and other substances which may be hazardous if ingested, inhaled or handled. Cleaning supplies shall be supervised while in use.<br><br>This Rule is not met as evidenced by:<br>Based on observation and interviews, the facility failed to keep locked the laundry room and the kitchen where cleaning chemicals were stored, for a total of 11 cleaning products.<br><br>The findings are:<br><br>Observation of the kitchen on 3/3/16 at 9:05am revealed:<br>-The kitchen door was closed and unlocked.<br>-In the cabinet under the sink were bottles of various cleaning chemicals, all within arm's reach.<br><br>Continued observation of the kitchen cleaning chemicals on 3/3/16 at 9:05am revealed:<br>-A transparent quart size plastic bottle with no trigger sprayer or cap, approximately 1/4 full of a clear liquid (the liquid had no odor) with no label identifying the contents (a partial illegible handwritten word with permanent marker was on the bottle). | {C 059}                                                                                         |                                                                                                                          |                                                                    |

Division of Health Service Regulation

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

TITLE

(X6) DATE

Division of Health Service Regulation

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| {C 059}                                                                          | <p>Continued From page 1</p> <ul style="list-style-type: none"> <li>-Three 16 ounce spray cans (one of which was not as heavy as the other two) of a brand-named heavy duty oven cleaner with the listed warning in capital letters "KEEP OUT OF REACH OF CHILDREN," "DANGER: CAUSES BURNS TO SKIN AND EYES. HARMFUL IF SWALLOWED."</li> <li>-A full 1 gallon jug of a brand-named all-purpose cleaner containing bleach, with the listed warnings in capital letters "KEEP OUT OF REACH OF CHILDREN" and "WARNING: EYE AND SKIN IRRITANT."</li> <li>-A full 1 quart spray bottle of the brand-named all-purpose cleaner containing bleach with similar listed warnings.</li> <li>-A transparent gallon sized jug of a brand-named lemon-scented disinfectant and cleaner, approximately half full of a yellow colored clear liquid, with listed warnings in capital letters of "KEEP OUT OF REACH OF CHILDREN," "DANGER" and on a side label "Corrosive. Causes irreversible eye damage and skin burns" and "Harmful if swallowed."</li> </ul> <p>Observation of the laundry room on 3/3/16 at 9:20am revealed:</p> <ul style="list-style-type: none"> <li>-The door to the laundry room was closed and unlocked.</li> <li>-There was a shelf to the left of the doorway in the laundry room.</li> <li>-One 39.2 ounce opened cardboard box of a brand-named septic tank treatment product was placed on shelf that was 3 feet from floor area.</li> <li>-The septic tank treatment product had approximately 1/16 of powder remaining with listed warnings of "Keep out Of Reach of Children, avoid contact with eyes, avoid breathing dust. If irritation develops, get medical attention."</li> <li>-One full 32 ounce bottle of an oven/grill/fryer cleaner with listed warnings of "Wash skin thoroughly after handling, wear protective gloves/</li> </ul> | {C 059}                                                                                         |                                                                                                                          |                                                                    |

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| {C 059}                                                                           | <p>Continued From page 2</p> <p>protective clothing/ eye protection/ face protection, keep locked up during storage."<br/>-One 40 ounce plastic spray bottle of a brand-named cleaner and degreaser approximately 1/12th full with the listed warnings including "eye burns may occur" and "harmful if swallowed or inhaled."<br/>-One full gallon of paint primer with the listed warnings of "Harmful is swallowed, ethylene glycol, may cause eye, throat and nose irritations. KEEP OUT OF REACH OF CHILDREN-DO NOT TAKE INTERNALLY."</p> <p>Interview with the Supervisor In Charge (SIC) on 3/3/16 at 9:25am revealed:<br/>-He "normally keeps the laundry room locked at all times."<br/>-He had gone into the laundry room earlier this morning to get the mop and bucket and failed to lock the door.<br/>-The kitchen was normally kept locked when meals were not being prepared.<br/>-Breakfast had been served and he did not know why the kitchen door was not locked.</p> <p>Interview with the Administrator on 3/3/16 at 12:05pm revealed cleaning chemicals were to be kept locked up "at all times."</p> <p>Confidential interviews with 5 of 6 residents on 3/3/16 revealed:<br/>-The laundry room was always locked.<br/>-3 of 5 residents did their own laundry and had to ask the SIC to unlock the laundry room before doing laundry.<br/>-They never saw any chemicals sitting out or unsupervised in the facility.</p> | {C 059}                                                                                         |                                                                                                                          |                                                                    |

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| {C 074}                                                                          | Continued From page 3                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | {C 074}                                                                       |                                                                                                                          |  |                                                                    |
| {C 074}                                                                          | <p>10A NCAC 13G .0315(a)(1) Housekeeping and Furnishings</p> <p>10A NCAC 13G .0315 Housekeeping And Furnishings</p> <p>(a) Each family care home shall:</p> <p>(1) have walls, ceilings, and floors or floor coverings kept clean and in good repair;</p> <p>This Rule shall apply to new and existing homes.</p> <p>This Rule is not met as evidenced by:</p> <p>Based on observation and interviews, the facility failed to keep walls, floors, ceilings and fixtures attached to them repaired and clean for 2 of 6 resident rooms, 2 of 3 resident bathrooms, the dining room and the resident room hallway.</p> <p>The findings are:</p> <p>Observation of the dining room on 3/3/16 at 9:20am revealed:</p> <ul style="list-style-type: none"> <li>-A ceiling fan in the vicinity of the dining tables, in operation.</li> <li>-When shut off, the fan blades were noted to have a thick layer of dust on their leading edges.</li> </ul> <p>Observation of room #3 on 3/3/16 at 9:30am revealed:</p> <ul style="list-style-type: none"> <li>-The baseboard heater covered with a painted metal cover with an approximately 6 inch long by 3 inch wide rusted spot on top of the the cover.</li> <li>-Dust covering the top of two television sets in the room.</li> </ul> <p>Interview with the resident residing in room #3 on 3/3/16 at 9:30am revealed staff helped him clean his room and he had no further comments to make.</p> | {C 074}                                                                       |                                                                                                                          |  |                                                                    |

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| {C 074}                                                                           | <p>Continued From page 4</p> <p>Observation of the floor in room #6 on 3/3/16 at 9:50am revealed it to be covered with dust and bits of debris along the baseboards and under the bed.</p> <p>Interview with the resident residing in room #6 was not attempted (the resident was not available).</p> <p>Observation of the common bathroom across from room #2 on 3/3/16 at 9:50am revealed:</p> <ul style="list-style-type: none"> <li>-Two missing rubber feet from the metal legs of a shower chair with wide scuff marks on the floor of the shower due to contact from the bare metal legs.</li> <li>-When facing the toilet, the metal armrest (used by wheelchair bound residents to transfer to and from the toilet) on the right side of the bowl was not attached and laying between the toilet and the wall.</li> <li>-One bulb of a two bulb ceiling light fixture was not illuminated.</li> <li>-The inner trim surrounding the doorframe was marred and paint was scraped away from it.</li> </ul> <p>Observation of the common bathroom next to room 2 on 3/3/16 at 10:00am revealed:</p> <ul style="list-style-type: none"> <li>-A low pitched hum from the ceiling exhaust fan but no movement of air (the cobwebs on the fan cover were not moving).</li> <li>-One bulb of a two bulb ceiling light fixture was not illuminated.</li> <li>-Scattered stained washcloths in the cabinet under the sink.</li> <li>-The entire bottom of the tub enclosure had a grey stained appearance.</li> <li>-A black mark approximately 3 feet long across the wall.</li> <li>-The inner trim surrounding the doorframe was marred and paint was scraped away from it.</li> </ul> | {C 074}                                                                       |                                                                                                                          |  |                                                                    |

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| {C 074}                                                                           | <p>Continued From page 5</p> <p>Observation of resident hallway outside the common bathrooms on 3/3/16 at 10:05am revealed:</p> <ul style="list-style-type: none"> <li>-A ceiling light fixture that was not illuminated (the other ceiling light fixtures were on).</li> <li>-Two electrical outlets that did not have covers.</li> <li>-Three recessed nightlights that did not have covers.</li> </ul> <p>Interview with the Supervisor-In-Charge (SIC) on 3/3/16 at 11:20am revealed:</p> <ul style="list-style-type: none"> <li>-If he saw anything broken in the facility he would tell the Maintenance staff person.</li> <li>-Showers were cleaned every day.</li> <li>-The Maintenance staff person changed light bulbs that are blown.</li> </ul> <p>A tour of the facility with the SIC on 3/3/16 at 11:30am revealed observations similar to those noted previously on the morning of 3/3/16.</p> <p>Interview with the SIC during the facility tour on 3/3/16 at 11:30am revealed he did not know that the bathroom exhaust fan was not pulling air and that the armrest to the toilet was not attached.</p> <p>Interview with the administrator on 3/3/16 at 12:05pm revealed:</p> <ul style="list-style-type: none"> <li>-Bathrooms were to be cleaned daily.</li> <li>-Staff were expected to follow the calendar to know what required cleaning on a particular day in the month.</li> </ul> <p>Review of an undated calendar posted in the office revealed:</p> <ul style="list-style-type: none"> <li>-Ceiling fans and light fixtures were scheduled for cleaning every Wednesday.</li> <li>-Bathroom and laundry room vents were scheduled for cleaning every Wednesday.</li> </ul> | {C 074}                                                                                         |                                                                                                                          |                                                                    |

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| {C 074}                                                                           | Continued From page 6<br><br>-Resident rooms were scheduled for cleaning every Monday, Wednesday and Saturday.<br><br>Interview with the Maintenance staff person on 3/3/16 at 12:45pm revealed:<br>-He worked on site at this facility and other sister facilities on the property.<br>-He marked repairs to the facility as they were made known to him and as parts and time were available.<br>-The hallway was recently painted requiring the removal of electric outlet and nightlight covers, but the paint had been dry for about a week.                                                                                                                                                                                                                                                                                                                                                                              | {C 074}                                                                                         |                                                                                                                          |                                                                    |
| C 112                                                                             | 10A NCAC 13G .0318(a) Outside Premises<br><br>10A NCAC 13G .0318 Outside Premises<br>(a) The outside grounds of new and existing family care homes shall be maintained in a clean and safe condition.<br><br>This Rule is not met as evidenced by:<br>Based on observation, record review and interviews, the facility failed to maintain screens in 2 of 6 resident room windows, remove debris placed outside, pick up cigarette butts, repair rotted wood siding, cover a dryer exhaust and remove piles of dead leaves.<br><br>The findings are:<br><br>Observation of the outside perimeter of the facility on 3/3/16 at 10:20am revealed:<br>-An approximately 8 inch deep pile of dead leaves along the back of the building from the staff quarters' window to the kitchen door.<br>-Placed to the right of the kitchen door on the concrete pad behind the building was an oven/range, a wheelchair, and an oval wood | C 112                                                                                           |                                                                                                                          |                                                                    |

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| NAME OF PROVIDER OR SUPPLIER<br><br><b>SERENITY HEART FAMILY CARE HOMES # 23'</b> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | STREET ADDRESS, CITY, STATE, ZIP CODE<br><b>231 COUNTRY TIME CIRCLE<br/>LEICESTER, NC 28748</b> |                                                                                                                          |                                                                    |
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| C 112                                                                             | <p>Continued From page 7</p> <p>dining table, with piles of leaves gathered under the table.</p> <ul style="list-style-type: none"> <li>-An approximately 8 inch deep pile of leaves directly under and to the level of the dryer exhaust, which had no vent cover.</li> <li>-An approximately 5 foot long section of sheet plywood type wood siding behind room #5, pulled away from the foundation and with the widest rotted section (approximately 1 foot wide) exposing wood framing from the interior wall.</li> <li>-Rotted sheets of plywood lying to the left of the resident hallway exit.</li> <li>-Cigarette butts too numerous to count in the grass off the concrete pad at the resident hallway exit.</li> <li>-The screen and screen frame completely missing from the window to room #3.</li> <li>-The screen in the window to room 4 pushed out of the bottom of the frame and peeled back approximately 3 inches up, with a piece of rubber gasket (used to hold the screen in the frame) lying on the ground.</li> </ul> <p>Interview with the Supervisor-in-Charge (SIC) on 3/3/16 at 11:20am revealed:</p> <ul style="list-style-type: none"> <li>-He had "no idea" who was responsible to maintain the outside of the building.</li> <li>-There was a Maintenance staff person who kept the houses on the property fixed.</li> </ul> <p>Interview with the Administrator on 3/3/16 at 12:05pm revealed:</p> <ul style="list-style-type: none"> <li>-She expected staff to "refer to the schedule" to know when job responsibilities needed completing.</li> <li>-This schedule referred to the outside of the building as well.</li> <li>-Window screens had just been replaced or repaired in windows the previous fall.</li> </ul> | C 112                                                                                           |                                                                                                                          |                                                                    |

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| C 112                                                                             | Continued From page 8<br><br>Review of an undated calendar posted in the office revealed the task of "clean yard around house and porches and outside light fixtures" every Sunday of the month.<br><br>Interview with the Maintenance staff person on 3/3/16 at 12:45pm revealed:<br>-He worked on site at this facility and other sister facilities on the property.<br>-He marked repairs to the facility as they were made known to him and as parts and time were available.<br>-He was not sure who was responsible for raking leaves.<br>-He was aware of the objects left behind the building by the kitchen door, but due to an injury he was unable to move them.<br>-He would require assistance to do repairs to the wood siding.<br>-Residents had been told to smoke in their designated area and not throw cigarette butts in the grass.<br><br>A tour of the outside perimeter of the facility with the Maintenance staff person on 3/3/16 at 12:45pm revealed findings similar to those observed earlier on 3/3/16. | C 112                                                                         |                                                                                                                          |  |                                                                    |
| {C 256}                                                                           | 10A NCAC 13G .0904(a)(1) Nutrition and Food Service<br><br>10A NCAC 13G .0904 Nutrition and Food Service (a) Food Procurement and Safety in Family Care Homes:<br>(1) The kitchen, dining and food storage areas shall be clean, orderly and protected from contamination.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | {C 256}                                                                       |                                                                                                                          |  |                                                                    |

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| {C 256}                                                                           | <p>Continued From page 9</p> <p>This Rule is not met as evidenced by:<br/>Based on observation, record review and interviews, the facility failed to keep clean in the kitchen the oven, the range hood, lower cabinet shelves and the floor.</p> <p>The findings are:</p> <p>Observation of the kitchen on 3/3/16 at 9:05am revealed:</p> <ul style="list-style-type: none"> <li>-Inside the oven, the entire bottom and door was covered in grease and burnt-on material.</li> <li>-On the underside of the range exhaust hood was a heavy build-up of grease (the right hood light cover removed and lying on counter to the left of the range, which was covered inside and out with grease).</li> <li>-The flooring surrounding the base of the refrigerator had a build-up of grime and debris along the baseboard and in the corner where the countertop cabinet made contact with the wall.</li> <li>-Lower cabinets to the right and left of the range had dirty shelving and debris (in these cabinets were stored pots, pans and plastic containers, all of which were clean).</li> </ul> <p>Interview with the Supervisor-in-Charge (SIC) on 3/3/16 at 11:20am revealed:</p> <ul style="list-style-type: none"> <li>-He had worked at the facility for two months.</li> <li>-The Administrator expected the kitchen to be cleaned after meals were prepped, or three times a day.</li> <li>-He had cleaned the range hood the week prior.</li> <li>-The oven had not been cleaned that week but was due.</li> <li>-To clean the floor along the baseboards and in corners would require a scraper.</li> <li>-The cleaning of cabinet shelving had not been done since he had worked there.</li> </ul> | {C 256}                                                                                         |                                                                                                                          |                                                                    |

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| {C 256}                                                                          | Continued From page 10<br><br>Interview with the Administrator on 3/3/16 at 12:05pm revealed:<br>-The kitchen was expected to be cleaned daily.<br>-She expected staff to follow the monthly schedule she had posted in the office.<br><br>Review of the undated monthly schedule revealed:<br>-Various staff tasks assigned for each day of the week for 4 weeks.<br>-On the Thursday in the 1st and 4th weeks was the assignment "Clean oven."<br>-On the Tuesday in the 3rd week was the assignment "Wipe down cabinets inside and out."                                                                                                                                                                                                                                                                                                                                                                                                                 | {C 256}                                                                                         |                                                                                                                          |                                                                    |
| {C 292}                                                                          | 10A NCAC 13G .0905 (d) Activities Program<br><br>10A NCAC 13G .0905 Activities Program<br><br>(d) There shall be a minimum of 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. Homes that care exclusively for residents with HIV disease are exempt from this requirement as long as the facility can demonstrate planning for each resident's involvement in a variety of activities. Examples of group activities are group singing, dancing, games, exercise classes, seasonal parties, discussion groups, drama, resident council meetings, book reviews, music appreciation, review of current events and spelling bees.<br><br>This Rule is not met as evidenced by:<br>Based on observation, interview and record review, the facility failed to assure a minimum of | {C 292}                                                                                         |                                                                                                                          |                                                                    |

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| {C 292}                                                                           | <p>Continued From page 11</p> <p>14 hours of activity were offered for 6 of 6 male residents residing at the facility.</p> <p>The findings are:</p> <p>Observation of the facility on 3/3/16 from 9:10am to 1:15pm revealed:</p> <ul style="list-style-type: none"> <li>-No activities were offered nor facilitated by the Supervisor-In-Charge (SIC).</li> <li>-Residents sitting outside and smoking.</li> <li>-Residents sitting in the living room without the television on.</li> <li>-Residents in their rooms watching their own televisions.</li> </ul> <p>Observation of the activity calendar posted in the dining room on 3/3/16 revealed:</p> <ul style="list-style-type: none"> <li>-There was no month or year listed on the calendar.</li> <li>-The calendar did show one day as being "Thanksgiving Day."</li> <li>-There were at least 14 hours of scheduled weekly activities.</li> <li>-Examples of the scheduled activities were: card games, board games, morning exercise, football, walks and Sunday worship service on television.</li> </ul> <p>Observation of the bookcase located in the dining room revealed a large selection of puzzles, a Tic Tac Toe game and a chess set.</p> <p>Confidential interviews revealed:</p> <ul style="list-style-type: none"> <li>-"Staff never offers activities."</li> <li>-"Sometimes we will get together and maybe play cards, but not often."</li> <li>-"Maybe if staff organized activities more residents might do them."</li> <li>-"I walk a lot and watch TV in my room."</li> <li>-"I am not really interested in any activities."</li> <li>-"I get bored up here with nothing to do;</li> </ul> | {C 292}                                                                       |                                                                                                                          |  |                                                                    |

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| {C 292}                                                                           | <p>Continued From page 12</p> <p>especially with the cold weather and we do not walk as much."</p> <p>- "No activities" and "nothing to do but watch TV and sit around."</p> <p>- "I feel bored."</p> <p>- The response "nothing" when asked about activities.</p> <p>- When asked if the residents enjoyed working puzzles, 5 of 5 interviewed stated "no."</p> <p>Review of 6 resident records revealed:</p> <p>- 4 of 6 resident records had an Activity Evaluation Form that had not been completed.</p> <p>- 4 of 6 resident records had an Activity Log Section with nothing documented in the section.</p> <p>Interview with the SIC on 3/3/16 at 11:15am revealed:</p> <p>- He was responsible for offering activities.</p> <p>- He offered activities daily but no one wanted to do anything but smoke cigarettes.</p> <p>- Some residents walked outside.</p> <p>- Some residents would watch television.</p> <p>- "I try to get them to exercise and go outside, but all they want to do is go outside and smoke."</p> <p>- He was not sure who was responsible for posting the monthly Activity Calendar.</p> <p>Interview with the Administrator on 3/3/16 at 11:55am revealed:</p> <p>- There should be a monthly Activity Calendar in the facility.</p> <p>- She sent the calendars at the beginning of each month.</p> <p>- She had failed to send a calendar for March.</p> <p>- When asked why the last calendar posted in the dining room was November 2015, the Administrator looked on the office wall stated found the February 2016 calendar.</p> <p>- She was unsure why the updated calendars</p> | {C 292}                                                                       |                                                                                                                          |  |                                                                    |

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| {C 292}                                                                          | Continued From page 13<br><br>were not posted in the dining room.<br>-The SICs were supposed to document offering activities and to document if the residents refused to participate.<br>-Staff had a calendar scheduled with daily tasks they were responsible to complete.<br><br>Review of an undated calendar of staff responsibilities revealed completion of "activity logs" every day of the month.<br><br>Interview with the SIC on 3/3/16 at 1:15pm revealed he was not aware he was supposed to document offering activities to the residents.                                                                                                                                                                                                                                                  | {C 292}                                                                       |                                                                                                                          |  |                                                                    |
| C 294                                                                            | 10A NCAC 13G .0905(f) Activities Program<br><br>10A NCAC 13G .0905 Activities Program<br>(f) Each resident shall have the opportunity to participate in at least one outing every other month. Residents interested in being involved in the community more frequently shall be encouraged to do so.<br><br>This Rule is not met as evidenced by:<br>Based on observation, interview and record review, the facility failed to assure that each resident had the opportunity to participate in at least one outing every other month.<br><br>The findings are:<br><br>The census of the facility on 3/3/16 was six male residents.<br>Confidential interviews with the residents during tour of the facility related to scheduled outings revealed:<br>-"Maybe since November (2015) or December (2015)." | C 294                                                                         |                                                                                                                          |  |                                                                    |

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| (X4) ID<br>PREFIX<br>TAG                                                         | SUMMARY STATEMENT OF DEFICIENCIES<br>(EACH DEFICIENCY MUST BE PRECEDED BY FULL<br>REGULATORY OR LSC IDENTIFYING INFORMATION)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | ID<br>PREFIX<br>TAG                                                                             | PROVIDER'S PLAN OF CORRECTION<br>(EACH CORRECTIVE ACTION SHOULD BE<br>CROSS-REFERENCED TO THE APPROPRIATE<br>DEFICIENCY) | (X5)<br>COMPLETE<br>DATE                                           |
| C 294                                                                            | <p>Continued From page 14</p> <p>- "They did say they were going to schedule something when the weather warmed up."<br/>- "Several months, not this year (2016)."<br/>- "We sometimes go out to eat, but it has been several months."<br/>- "Nothing to do up here, so I would really like to do something away from here."<br/>- "I think the van is broken down again."<br/>- "It would depend on the outing or if I had money if I would go or not."<br/>- "I would like to go to [fast food restaurant] for coffee or somewhere just to get out and off the hill."<br/>- It had "been months since I left the house."<br/>- "Two months ago" a resident went shopping which was "about the average."<br/>- A resident wanted to eat out more frequently.</p> <p>Interview with the Supervisor-in-Charge (SIC) on 3/3/16 at 11:15am revealed:<br/>- He was not sure who is responsible for planning outings.<br/>- He had been at the facility for "about a month or so" and did not recall the residents going on an outing.</p> <p>Interview with a Lead SIC on 3/3/16 at 11:20am revealed:<br/>- The Administrator was responsible for scheduling and organizing resident outings away from the facility.<br/>- She could not recall if there was a scheduled outing for this facility in 2016 or not.</p> <p>Interview with the Administrator on 3/3/16 at 12:05pm revealed:<br/>- There had been no group outings this calendar year.<br/>- The facility van had been broken "a couple of weeks" but her car could seat six passengers.</p> | C 294                                                                                           |                                                                                                                          |                                                                    |

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| C 294                                                                             | Continued From page 15<br><br>-"I think this house went on an outing to [buffet restaurant] for dinner in January of this year."<br>-"We do offer outings but sometimes the residents do not want to go."<br><br>Second interviews with 5 of 6 resident revealed they did not recall going to a buffet restaurant to eat in January 2016.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | C 294                                                                                           |                                                                                                                          |                                                                    |
| C 911                                                                             | G.S 131D 21(1) Declaration of Resident's Rights<br><br>G.S. 131D-21 Declaration of Resident's Rights<br>Every resident shall have the following rights:<br>(1) To be treated with respect, consideration, dignity, and full recognition of his or her individuality and right to privacy.<br><br>This Rule is not met as evidenced by:<br>Based on observation and interviews, the facility failed to assure 6 of 6 residents living in the facility were treated with respect, consideration and dignity, related to watching television in the common area of the facility.<br><br>The findings are:<br><br>Observation on 3/3/16 from 9:15am until 12:00pm revealed:<br>-The television in the living room was not turned on.<br>-The residents were sitting in the living room at different times and did not turn the television on.<br><br>Confidential interviews on 3/3/16 revealed:<br>- [Named staff] Supervisor-in-Charge (SIC) restricted use of the television in the common area.<br>-The SIC would "turn the TV off while I am | C 911                                                                                           |                                                                                                                          |                                                                    |

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| C 911                                                                             | <p>Continued From page 16</p> <p>watching a program."</p> <p>"Can staff prohibit us from watching TV?"</p> <p>"I have my own TV but like watching TV in the living room."</p> <p>"Often [named staff] will not allow us to turn the TV on at all."</p> <p>"He acts like he is the boss of us."</p> <p>"He acts like it is his TV and not ours."</p> <p>"He restricts which programs we are allowed to turn on."</p> <p>When asked if it were late hours that the SIC required the television to be turned off, two residents responded, "no, it is all the time."</p> <p>Interview with the SIC on 3/3/16 at 10:20am revealed:</p> <p>-He never limits the residents television time.</p> <p>-There was a situation a week or so ago when the residents argued about one resident watching news station all the time.</p> <p>-He spoke with the Administrator and was told to allow each resident a set amount of time to watch their preferred television show and to not allow one resident to control all the program choices.</p> <p>"I know who called in the complaint [named resident], and he is the one that always controls television."</p> <p>"I am not sure where that is coming from [regarding resident reports of not being able to watch any television]."</p> <p>Interview with the Administrator on 3/3/16 at 11:55am revealed:</p> <p>-She was not aware that the SIC was restricting the use of the common room television.</p> <p>-The SIC had reported to her recently that some residents were watching only what they wanted to and other residents had been upset about that.</p> <p>-She had suggested to the SIC to give each</p> | C 911                                                                         |                                                                                                                          |  |                                                                    |

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| C 911                                                                             | Continued From page 17<br><br>resident a certain amount of time to watch their<br>preferred television programs.<br>-She had not received any resident concerns<br>related to the SIC not allowing them to use the<br>common television in the living room.<br>-She visited the facility weekly and sometimes<br>more often, and was always available by<br>telephone to the SIC and residents. | C 911                                                                         |                                                                                                                          |  |                                                                    |