

Division of Health Service Regulation



PRINTED: 12/22/2016
FORM APPROVED

Burkhardt Co.

STATEMENT OF DEFICIENCIES
AND PLAN OF CORRECTION

(X1) PROVIDER/SUPPLIER/CLIA
IDENTIFICATION NUMBER:

HAL011005

(X2) MULTIPLE CONSTRUCTION

A. BUILDING:

B. WING:

(X3) DATE SURVEY
COMPLETED

12/21/2016

NAME OF PROVIDER OR SUPPLIER

STREET ADDRESS, CITY, STATE, ZIP CODE

FLESHER'S FAIRVIEW REST HOME

3016 CANE CREEK ROAD

FAIRVIEW, NC 28730

(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)
COMPLETE
DATE

D 000 Initial Comments

The Adult Care Licensure Section conducted an annual survey on December 20, 2016 and December 21, 2017.

D 000

① We feel this requirement is met since we have a person (Adm-in-charge) within 500ft and have always had a person on call in the house next to the Rest Home.

D 177 10A NCAC 13F .0601 (b) Management Of Facilities With A Capacity Or

10A NCAC 13F .0601 Management Of Facilities With A Capacity Or Census Of Seven To Thirty Residents

D 177

(b) At all times there shall be one administrator or administrator-in-charge who is directly responsible for assuring that all required duties are carried out in the home and for assuring that at no time is a resident left alone in the home without a staff member. Except for the provisions in Paragraph (c) of this Rule, one of the following arrangements shall be used to manage a facility with a capacity or census of 7 to 30 residents:

(1) The administrator is in the home or within 500 feet of the home with a means of two-way telecommunication with the home at all times;

(2) An administrator-in-charge is in the home or within 500 feet of the home with a means of two-way telecommunication with the home at all times; or

(3) When there is a cluster of licensed homes, each with a capacity of 7 to 12 residents, located adjacently on the same site, there shall be at least one staff member, either live-in or on a shift basis in each of these homes. In addition, there shall be at least one administrator or administrator-in-charge who is within 500 feet of each home with a means of two-way telecommunication with each home at all times and directly responsible for assuring that all required duties are carried out in each home.

② We have a RN employed by the nursing home that lives within 500 ft and is on call for the Rest Home.

③ We have a Nursing Home within 500 ft with 2 Nurses and above minimum staffing requirements. The extra staff is available to assist the Rest Home if needed without interrupting with the care of the Nursing home residents.

④ We have attempted to obtain staff since October 2016 and have not had success due to drugs and criminal background checks.

⑤ We have never been in violation of this rule in the past. We have operated with this arrangement of staff for 26 years. We have only needed the Nursing Homes assistance twice in the last 26 years.

⑥ My Administrator did not mention the two people within 500 ft since the surveyor stated those people would have to be on our payroll. I cannot find this

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

TITLE

(X6) DATE

STATE FORM

5899

4HG711

If continuation sheet 1 of 4

NOTE: Report is signed on page 2 by Provider's representative
Reviewed: accepted Casey Fitzgerald 2/2/2017

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NAME OF PROVIDER OR SUPPLIER FLESHER'S FAIRVIEW REST HOME		STREET ADDRESS, CITY, STATE, ZIP CODE 3016 CANE CREEK ROAD FAIRVIEW, NC 28730		
(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) COMPLETE DATE
D 177	Continued From page 1 This Rule is not met as evidenced by: Based on observation, interviews and record reviews the facility failed to ensure there was an administrator or administrator-in-charge in the facility or within 500 feet of the facility with a means of two-way telecommunication with the facility at all times during third shift. The findings are: Review of the facility's staffing schedule for 12/20/16 and 12/21/16 there was only one staff listed on the schedule to cover third shift. Interview with the Resident Care Coordinator (RCC) on 12/21/16 at 10:30am revealed: -She had worked as the Medication Aide on third shift in the past. -Third shift was always staffed with a Medication Aide. -Staff had access to a cordless phone on third shift. -If a fire occurred on third shift, she could call the fire department and the skilled nursing facility located a short distance below the facility. -The facility had used the skilled nursing facility to meet the staffing requirement of an Administrator within 500 feet for third shift "As long as I can remember." -"We usually have two staff on third shift." -They were in the process of trying to hire additional third shift staff. -"It's been a couple months since we have just had one person on third shift." -Third shift staff were responsibilities included 2-hour hall checks, incontinence rounds, and	D 177	requirement in the rules. We feel under these circumstances that we have more than complied with this regulation D177. ① In addition to what we have stated, the person next door will have a file in our office and will get continuing education hours. <i>R. C. Flemer</i> Adm 1-25-17	

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D 177	Continued From page 2 administering 6:00am medications. Interview with a Medication Aide (MA) on 12/21/16 at 10:40am revealed: -She had worked on third shift when she was "on call" when "someone calls out." -In an emergency, "I would call the nursing home." -If it's a fall or medical emergency I would also call 911." -There was always one staff on third shift "unless someone is training on third." -All staff were certified to perform CPR. -If she were working third shift and had to evacuate the current 23 residents, there was only 1 of the 23 residents that would need transfer assistance and that resident could not ambulate alone. -All the other residents were able to ambulate independently. -All the residents here can follow directions." -We practice fire drills." -The residents know to come out in the hall" when the fire alarm has been activated. -She had never had to contact the "nursing home" for assistance since she had come to work at the facility. -There were no bed bound residents in the facility. Interview with the Administrator on 12/21/16 at 9:51am revealed: -The third shift staff listed on the staffing schedule was a MA. -They "always" staff third shift with a MA. Second interview with the Administrator on 12/21/16 at 11:00am revealed: -We try to have two staff [on third shift] as much as possible."	D 177		

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D 177	Continued From page 3 -The RCC lived 5 minutes away from the facility. -The Administrator lived 10 minutes away from the facility. -She had been told "the nursing home meets the 500 ft. requirement." -The skilled nursing facility was staff with nurses and certified nursing assistants. -She had staffed third shift with two staff "until one of the staff quit with no notice" which had occurred on 10/14/16. -"We have been hunting another staff to replace her since then." -"Most of the time we had two people" on third shift, but "one day out of the week we would only have one staff."	D 177		