STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL011151	A. BUILDING: _____ B. WING _____	R 11/09/2017

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
HEATHER GLEN AT ARDENWOODS	103 APPLACHIAN BLVD ARDEN, NC 28704

(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 and the Buncombe County Department of Social Services conducted an annual survey, a follow-up survey and a complaint investigation November 6, 2017 through November 9, 2017. The complaint investigation was initiated by the Buncombe County Department of Social Services on November 8, 2017.	D 000		
D 280	10A NCAC 13F .0903(c) Licensed Health Professional Support 10A NCAC 13F .0903 Licensed Health Professional Support (c) The facility shall assure that participation by a registered nurse, occupational therapist or physical therapist in the on-site review and evaluation of the residents' health status, care plan and care provided, as required in Paragraph (a) of this Rule, is completed within the first 30 days of admission or within 30 days from the date a resident develops the need for the task and at least quarterly thereafter, and includes the following: (1) performing a physical assessment of the resident as related to the resident's diagnosis or current condition requiring one or more of the tasks specified in Paragraph (a) of this Rule; (2) evaluating the resident's progress to care being provided; (3) recommending changes in the care of the resident as needed based on the physical assessment and evaluation of the progress of the resident; and (4) documenting the activities in Subparagraphs (1) through (3) of this Paragraph.	D 280		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
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D 280	Continued From page 1	D 280		

This Rule is not met as evidenced by:
Based on observations, interviews, and record reviews, the facility failed to assure a registered nurse completed an on-site Licensed Health Professional Support (LHPS) review and evaluation within 30 days of admission for 2 of 5 sampled residents by performing a physical assessment for required tasks of clean dressing changes, care for pressure ulcers up to and including a Stage II pressure (which is a superficial ulcer presenting as an abrasion, blister or shallow crater), transferring semi-ambulatory residents, collecting and testing of fingerstick blood samples, and medications administration through injection for Resident #2 and administration of suppositories and transferring non-ambulatory residents for Resident #5.

The findings are:

A. Review of Resident #2's current FL2 dated 9/15/17 revealed:
-Diagnoses included type 2 diabetes mellitus, major depressive disorder, general anxiety disorder, cognitive communicative deficit, essential (primary) hypertension and arteriosclerotic heart disease.
-A physician's order for finger stick blood sugar testing daily.
-The resident was semi-ambulatory.

Continued review of Resident #2's current FL2 dated 9/15/17 revealed medication orders from the physician included:
-Buspirone 7.5mg twice a day (decreases anxiety).
-Amlodipine Besylate 5mg every morning (decreases chest pain and lowers blood

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL011151	A. BUILDING: _____ B. WING _____	R 11/09/2017

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
HEATHER GLEN AT ARDENWOODS	103 APPLACHIAN BLVD ARDEN, NC 28704

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D 280	Continued From page 2	D 280		

pressure).
-Duloxetine 60mg every morning (decreases anxiety).
-Lisinopril 5mg every morning (lowers blood pressure).
-Metoprolol SUCC ER 25mg every morning (lowers blood pressure and heart rate).
-Furosemide 20mg every morning (decreases peripheral edema and lowers blood pressure).
-Potassium Chloride ER 10meq daily (prevents and treats low blood potassium levels).
-Prostat Liquid Protein 30ml by mouth twice a day for 30 days.
-Lantus insulin 12 units every night at bedtime (long acting insulin used to decrease blood sugar levels).
-Memantine 10mg daily (used to treat moderate to severe dementia in Alzheimer's disease).
-Lorazepam 0.5mg, 1/2 tablet every 6 hours as needed (decreases anxiety).
-Tramadol 50mg, 1/2 tablet three times a day as needed (used to manage moderate to severe pain, chronic pain).
-NitroStat 0.4mg SL (under the tongue) every 5 minutes as needed for 3 doses. If pain unrelieved, call MD (treatment of chest pain).

Review of Resident #2's Resident Register revealed an admission date of 9/17/17.

Review of Resident #2's record revealed:
-On 9/25/17, an order to "off load bilateral heels while on recliner and in bed".
-On 10/8/17, the facility had faxed a clarification request to the resident's primary care physician regarding continuing one time daily blood sugar testing and B12 injections monthly.
-On 10/18/17, a physician's order for blood sugar to be checked every mornng.
-On 10/24/17 a physician's order for

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	HAL011151	A. BUILDING: _____ B. WING _____	R 11/09/2017

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
HEATHER GLEN AT ARDENWOODS	103 APPLACHIAN BLVD ARDEN, NC 28704

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D 280	Continued From page 3 Cyanocobalamin, inject 1000 mcg/ml, intramuscular injectable solution every 4 weeks (Cyanocobalamin or Vitamin B12 administered to residents with mild cognitive impairment slows the rate of brain deteriation and cognitive decline). -On 11/2/17, an order (for Home Health) to "apply kerlix, medium roll, to leg ulcers three times a week after silver foam (optifoam Ag). Review of Resident #2's electronic Medication Administration Records (eMAR) for November 2017 revealed: -There was an entry to check the resident's blood sugar every day at 8:00am. Results ranged from 160 to 247. -There was an entry for Cyanocobalamin , inject 1000 mcg/ml, intramuscular injectable solution every thirty (30) days. (Cyanocobalamin or Vitamin B12 is needed for adequate nerve function, protein and carbohydrate metabolism, cell reproduction and red blood cell development). There was no documentation this had been administered. -There was an entry for Lantus insulin, inject 12 units subcutaneously at bedtime. (Lantus solostar is a pre-filled disposable syringe containing long acting insulin used to decrease blood sugar levels.) Documentation in -There was an entry for staff to "off load bilateral heels while on recliner and in bed". -There was an entry for EPC (Extra Protective Cream) Cream, apply to ulcer/periwound on toe as directed. -There was an entry for Kerlix (a gauze bandage roll that provides loft and bulk, fast-wicking, superior aeration and absorbency) medium roll, apply to leg ulcers three times weekly after silver foam (done by the Home Health nurse).	D 280		

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	HAL011151	A. BUILDING: _____ B. WING _____	R 11/09/2017

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
HEATHER GLEN AT ARDENWOODS	103 APPLACHIAN BLVD ARDEN, NC 28704

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D 280	Continued From page 4 Observation of Resident #2's medications on hand available for administration revealed: -Three 1ml vials of cyanocobalamin, 1000 mcg/ml, solution in the medication room refrigerator. -A partially used 7.75 ounce tube of EPC cream. -Lantus solostar 100 units/ml, prefilled syringe. Review of Resident #2's record revealed no Licensed Health Profession Support review or evaluation for any tasks. Observations on 11/7/17 at 9:15am of Resident #2 revealed: -He was sitting in a wheelchair in his room. -There were bandages from his toes to his knees, bilaterally. -The dressing on his left leg had slipped toward his ankle, and a nickel sized open sore was visible on his shin. -There was no drainage noted from the open sore. -Both lower legs, knees to toes, were extremely edematous. Interview with Resident #2 on 11/7/17 at 9:20am revealed: -He had diabetes and the facility checked his blood sugar every morning. -His blood sugars were usually in the 200's. -He received 12 units of Lantus insulin every night at bedtime. -He has multiple diabetic ulcers on his right foot, one with the bone exposed. -His right heel was red and sore but it was not open. -Yesterday (11/6/17), he had been told by his physician he could lose one toe, multiple toes, his right foot or right lower leg due to poor circulation. -"I will probably lose my foot from what the doctor	D 280		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL011151	A. BUILDING: _____ B. WING _____	R 11/09/2017

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
HEATHER GLEN AT ARDENWOODS	103 APPLACHIAN BLVD ARDEN, NC 28704

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D 280	Continued From page 5	D 280		

told me and (a family member) yesterday.
-He could "shuffle" a few steps but it was difficult for him to walk.
-He had been using a wheelchair to "get around".
-"The staff helps me into the wheelchair and on/off the toilet, and in and out of my recliner."

Interviews with four facility staff regarding Resident #2 revealed:
-They had been assisting the resident with transfers to/from his wheelchair since he came back to the facility from the skilled nursing facility in September 2017.
-They had not been elevating his heels while he was in the bed since he spent all of his time in his recliner with his feet up.
-A Medication Aide (MA) tested his blood sugar every morning.
-A MA administered Lantus insulin each night at bedtime.
-The MA's had not been applying the EPC (Extra Protective Cream) Cream to the ulcer/periwound on his right toe due to the bandages the Home Health nurse had been applying.
-The MA's had been re-applying or re-positioning the Kerlix as needed.

Interview with the Director of Health Services (DOHS), a registered nurse, on 11/8/17 at 4:10pm revealed:
-She was responsible for completing the LHPS assessments and reviews.
-The LHPS assessment had not been done within 30 days of admission for Resident #2 because she had "just not done it".
-She was not aware it was difficult for Resident #2 to walk and he could only "shuffle" a few steps.
-She thought he was ambulatory and only used the wheelchair when he went to doctor

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL011151	A. BUILDING: _____ B. WING _____	R 11/09/2017

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
HEATHER GLEN AT ARDENWOODS	103 APPLACHIAN BLVD ARDEN, NC 28704

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D 280	Continued From page 6	D 280		

appointments.
-She was aware he had his blood sugar tested every morning and received insulin at bedtime.
-She was aware the resident had an order for Vitamin B12 monthly.
-The Home Health nurse came three times each week to change the dressings on the resident's legs.
-The staff was not responsible for any wound care for Resident #2's or dressing changes on the resident feet and legs.
-She was not aware if the staff had been elevating the resident's heels when in bed or in his recliner.
-She was not aware the staff was assisting the resident with transfers.
-She was not aware the resident had difficulty getting in and out of his bed and was sleeping in his recliner.
-She would complete Resident #2's LHPS assessment and file it in his record.

B. Review of Resident #5's current FL2 dated 4/13/17 revealed:
-Diagnoses included failure to thrive, history of hypertension, and history of recurrent rectal impaction.
-Resident #5 was designated as ambulatory.
-Medication orders included hydrocortisone AC 25 mg suppositories, insert 1 rectally every 6 hours as needed for hemorrhoids/pain.

Review of Resident #5's Resident Register revealed she was admitted to the facility on 7/21/14.

Observation of medications on hand available for administration for Resident #5 revealed a full box of 12 suppositories available for administration.

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL011151	A. BUILDING: _____ B. WING _____	R 11/09/2017

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
HEATHER GLEN AT ARDENWOODS	103 APPLACHIAN BLVD ARDEN, NC 28704

(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 280	Continued From page 7 Review of Resident #5's November 2017 electronic Medication Administration Records revealed an entry for the hydrocortisone AC 25 mg suppositories, insert 1 rectally every 6 hours as needed for hemorrhoids/pain but staff had not documented any administrations. Review of Resident #5's record revealed no Licensed Health Profession Support review for any tasks. Interview with Resident #5's family member on 11/9/17 at 2:20pm revealed: -Resident #5 had been using a wheel chair "about 8 months." -Resident #5 required assistance with transfers since she started using the wheel chair, exact date not known. -He was aware of Resident #5's physician order for hemorrhoid suppositories. Interview with the Director of Health Services (DOHS), a registered nurse, on 11/8/17 at 3:15pm who was responsible for completing the LHPS reviews revealed: -Resident #5 had not been requiring the use of the wheel chair and assistance with transfers very long. -She was not aware Resident #5 had an order for hydrocortisone AC 25 mg suppositories, insert 1 rectally every 6 hours as needed for hemorrhoids/pain. Confidential interviews with 3 facility staff revealed: -Resident #5 had been using a wheel chair for at least 3 months. -Resident #5 required a 1 person assist for transferring from the bed to chair, for toileting, and chair to bed.	D 280		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL011151	A. BUILDING: _____ B. WING _____	R 11/09/2017

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
HEATHER GLEN AT ARDENWOODS	103 APPLACHIAN BLVD ARDEN, NC 28704

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D 280	Continued From page 8 Interview with the Administrator on 11/8/17 at 3:10pm revealed the LHPS nurse worked there full time, knew the residents, and was responsible for tracking and assessing residents who had an LHPS task.	D 280		
D 296	10A NCAC 13F .0904(c)(7) Nutrition And Food Service 10A NCAC 13F .0904 Nutrition And Food Service (c) Menus in Adult Care Homes: (7) The facility shall have a matching therapeutic diet menu for all physician-ordered therapeutic diets for guidance of food service staff. This Rule is not met as evidenced by: TYPE B VIOLATION Based on observations, interviews, and record reviews, the facility failed to assure matching therapeutic menus were available for the guidance of food service staff for 6 of 6 Residents sampled as evidenced by no Vegetarian menus for Resident #6, no Mechanical Soft menus for Residents #3 and #4, no Heart Healthy Diabetic Consistent Carbohydrate Mechanical Soft menus for Resident #5, and no complete Controlled Carbohydrate menus for Residents #1 and #2. The findings are: Review of the facility menus on 11/6/17 revealed: -There were Week at a Glance Regular and Controlled Carbohydrate (CCHO) menus signed by a Registered Dietitian. (A carbohydrate controlled diet is a diet in which carbohydrate intake is either limited or set at a particular value,	D 296		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL011151	A. BUILDING: _____ B. WING _____	R 11/09/2017

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
HEATHER GLEN AT ARDENWOODS	103 APPLACHIAN BLVD ARDEN, NC 28704

(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 296	Continued From page 9	D 296		

with portion sizes to assure appropriate carbohydrate intake, and can be used to stabilize blood glucose levels in diabetics.)
-The CCHO menus had each breakfast food listed including beverages but without portion sizes except for the 8 ounces of milk.
-The lunch menus had 2 choices and each choice included an entree, 1 or 2 vegetables/soup, some choices had a fruit, some choices had a bread, but desserts and beverages were not listed.
-There were no portion sizes for any of the foods listed on the lunch menu choices.
-The dinner menus had 2 choices and each choice listed an entree, 1 or 2 vegetables/soup, 8 ounces milk, some choices had a bread, but fruits/desserts were not listed.
-There were no portions listed on the dinner choices except for the milk.
-There were no therapeutic menus available for the guidance of food service staff for residents with a Mechanical Soft diet order, a Vegetarian diet order, and a Heart Healthy Diabetic Consistent Carbohydrate Mechanical Soft diet order.

Interview with the Dietary Manager on 11/8/17 at 12:12pm revealed:
-He would like to have clarification of the menus and to know exactly what foods all the residents were allowed to have.
-He did not have any therapeutic menus except for the CCHO menus.
-He had completed the food service orientation training and had worked there for more than 3 years.
-The Food and Beverage Director was responsible for acquiring all the menus.

Telephone interview on 11/8/17 at 2:55pm with the Dietitian who signed the facility menus

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL011151	A. BUILDING: _____ B. WING _____	R 11/09/2017

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
HEATHER GLEN AT ARDENWOODS	103 APPLACHIAN BLVD ARDEN, NC 28704

(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 296	Continued From page 10	D 296		

revealed:
-She did not have her files with her but thought she had provided complete menus with all allowable foods listed for the CCHO menus.
-She would contact the Food and Beverage Director and discuss what the facility needed to be in compliance.

Interview with the Administrator on 11/8/17 at 3:15pm revealed:
-They would contact the residents' physician for clarification of diet orders.
-The Food and Beverage Director was responsible for assuring therapeutic diets were available and he would contact the dietitian.

A. Review of Resident #1's current FL2 dated 2/16/17 revealed:
-Diagnoses included diabetes, hypertension, cardiomyopathy, and congestive heart failure.
-Physician orders for a "Regular" diet on the first page of the FL2 under nutrition status but had "Regular chopped solids into small bite size pieces" on the third page with the medication orders.

Review of the undated therapeutic diet list posted in the kitchen Resident #1 was to receive a "Regular CCHO" diet.

Observation of the noon meal on 11/6/17 revealed he did not eat lunch.

Review of Resident #1's record revealed no clarification of diet orders.

Review of the facility CCHO dinner menus for 11/6/17 revealed:
-Rice Pilaf, steamed broccoli, and 8 ounces milk were to be served with the choice of crab stuffed

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL011151	A. BUILDING: _____ B. WING _____	R 11/09/2017

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
HEATHER GLEN AT ARDENWOODS	103 APPLACHIAN BLVD ARDEN, NC 28704

(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 296	Continued From page 11	D 296		

flounder.
-Rice Pilaf, steamed broccoli, and 8 ounces milk were to be served with sweet and sour chicken.
-No other foods or beverages were listed.

Observation of the evening meal on 11/6/17 at 5:00pm revealed he was served sweet and sour chicken pieces at least 2 by 2 by 1 inch sizes, broccoli, roll rice tea, and coffee.

Review of the facility CCHO breakfast menus for 11/6/17 revealed fried or scrambled eggs, bacon or sausage, waffle, watermelon, orange juice, and milk were to be served.

Observation of the breakfast meal on 10/7/17 at 9:10am revealed he received 2 slices whole strips of bacon, 1 slice toasted raisin bread, 5 one-half orange slices, 6 ounces orange juice, and coffee.

Interview with Resident #1's family on 11/6/17 at 10:45 revealed:
-He was having increasing pain and not eating as much.
-They were not sure about what type of diet the physician had ordered.

Telephone interview with Resident #1's physician on 11/9/17 at 1:45pm revealed:
-She would expect Resident #1 to receive a diabetic diet and solids finely chopped.
-She also had requested Resident #1 to be served fruit in place of desserts.

B. Review of Resident #2's current FL2 dated 9/15/17 revealed:
-Diagnoses included type 2 diabetes and arteriosclerotic heart disease.
-No physician orders for any therapeutic diet or regular diet.

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL011151	A. BUILDING: _____ B. WING _____	R 11/09/2017

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
HEATHER GLEN AT ARDENWOODS	103 APPLACHIAN BLVD ARDEN, NC 28704

(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 296	Continued From page 12 Review of Resident #2's Resident Register revealed he was admitted to the facility on 9/17/17. Review of a subsequent physician order, dated 10/3/17, revealed an order for a Regular diet finely chopped. Review of the undated therapeutic diet list posted in the kitchen revealed Resident #2 was on a "Regular CCHO" diet. Review of Resident #2's record revealed no clarification of diet orders. Interview with Resident #2 on 11/7/17 at 8:15am revealed: -He was on a "diabetic" diet. -The physician discontinued the ground meat diet but served meat finely chopped like "hamburger." -Staff have reminded him of his diabetic diet order when choosing desserts at mealtime. Review of the facility CCHO lunch menus for 11/6/17 revealed: -Mashed potatoes and fried okra were to be served with the choice of an open face turkey sandwich with gravy. -Vegetable soup, roll fresh fruit were to be served with the choice of a Steak Caesar salad. -No other foods or beverages were listed. Observation of the noon meal on 11/6/17 at 12:00 noon revealed: -He received a bowl of vegetable soup, chipped beef and gravy on a slice of toast, fried okra, mashed potatoes, sweet iced tea, coffee, and water. -Facility staff verbally offered the residents a	D 296		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL011151	A. BUILDING: _____ B. WING _____	R 11/09/2017

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
HEATHER GLEN AT ARDENWOODS	103 APPLACHIAN BLVD ARDEN, NC 28704

(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 296	Continued From page 13	D 296		

choice of desserts, but Resident #1 did not want any dessert.

Review of the facility CCHO breakfast menus for 11/6/17 revealed fried or scrambled eggs, bacon or sausage, waffle, watermelon, orange juice, and milk were to be served.

Observation of the breakfast meal meal on 11/7/17 at 7:45am revealed Resident #2 received scrambled eggs and and 1 cup cornflakes and 5 ounces of milk, and 5 ounces orange juice.

Interview with the Dietary Manager on 11/8/17 at 12:12pm revealed they offered the residents whatever was on the menu and the residents did not always choose all the items on the menu.

Attempted telephone with Resident #2's primary care physician on 11/8/17 at 1:15pm was not successful.

C. Review of Resident #3's current FL2 dated 9/16/16 revealed:
-Diagnoses included dementia, hypertension, and fractured neck,
-There was a physician order for a "Regular Chopped Solids" diet.

Review of previous physician orders dated 6/13/17 revealed a diet order for a nectar thickened liquid except for water.

Review of the diet list for residents on therapeutic diets revealed Resident #3 was to receive a "Regular, Mechanical Soft diet order and Nectar to thicken soft liquids, except water, no fish, dairy, or caffeine...".

Review of Resident #3's record revealed no

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL011151	A. BUILDING: _____ B. WING _____	R 11/09/2017

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
HEATHER GLEN AT ARDENWOODS	103 APPLACHIAN BLVD ARDEN, NC 28704

(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 296	Continued From page 14 clarification of diet orders. Review of the facility menus revealed they had no Mechanical Soft menus. Observation of the noon meal on 10/6/17 revealed: -Resident #3 received a Caesar salad (lettuce in approximately 2 by 2 inch pieces with 1 by 1 by 1 pieces fried chicken with dressing, fresh pineapple pieces in 1 by 1/2 by 3/4/ inch pieces and strawberry pieces, crackers, and regular Boston cream pie. -Resident #3 was served thickened flavored water and unthickened plain water. Observation of the dinner meal on 10/6/17 revealed: -Resident #3 received chopped chicken, broccoli, rice, roll and regular chocolate cake. -Resident #3 was served thickened flavored water and unthickened plain water. Observation of the breakfast meal on 10/7/17 revealed Resident #3 received received a bowl of oatmeal topped with melted brown sugar, scrambled eggs, 2 whole strips bacon, a slice toasted raisin bread, thickened milk, and unthickened water. Interview with Resident #3 on 10/7/17 at 8:15 am revealed the bacon was "good." Interview with Resident #3's family member on 11/9/17 at 11:15am revealed Resident #3 was supposed to be on a regular with solids chopped finely and nectar thickened liquids except for water. Telephone interview on 11/8/17 at 2:55pm with	D 296		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL011151	A. BUILDING: _____ B. WING _____	R 11/09/2017

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
HEATHER GLEN AT ARDENWOODS	103 APPLACHIAN BLVD ARDEN, NC 28704

(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 296	Continued From page 15	D 296		

the Dietitian who signed the facility regular and CCHO menus revealed:
-She would contact the dining services manager and discuss what menus the facility required.
-She would not put raw vegetables on a mechanical soft diet.
-She would have to research to determine what size pieces of meat, bacon, and other foods would be appropriate for a mechanical soft diet.

Interview on 11/9/17 at 11:15am with the family of Resident of Resident #3 revealed Resident #3 was supposed to be on a Regular and solids chopped finely diet and all liquids nectar thick except for water.

D. Review of Resident #4 current FL2 dated 3/24/17 revealed:
-Diagnoses included dysphagia, pneumonia, and encephalopathy.
-Physician orders for a Mechanical Soft diet.

Review of the undated therapeutic diet list for residents revealed Resident #3 was to receive a Mechanical Soft diet.

Review of the facility menus revealed they had no Mechanical Soft menus.

Observation of the noon meal on 10/6/17 at 12 noon revealed:
-Resident #4 received vegetable soup, chipped beef on toast, and mashed potatoes.
-She ate in her room and was assisted by a family member.

Observation of the breakfast meal on 10/7/17 at 7:30am revealed Resident #4 did not eat breakfast.

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL011151	A. BUILDING: _____ B. WING _____	R 11/09/2017

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
HEATHER GLEN AT ARDENWOODS	103 APPLACHIAN BLVD ARDEN, NC 28704

(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 296	Continued From page 16	D 296		

Interview with Resident #4's family member 11/8/17 at 9:15am revealed Resident #4 usually received chopped meats and a nutritional supplement if she refused to eat.

Telephone interview on 11/8/17 at 2:55pm with the Dietitian who signed the facility menus revealed:
-She would contact the dining services manager and discuss what menus the facility required.
-She would have to research to determine what size pieces of meat and other foods would be appropriate for a mechanical soft diet.

Attempted telephone with Resident #2's primary care physician group on 11/8/17 at 1:15pm was not successful

E. Review of Resident #5 current FL2 dated 4/13/17 revealed:
-Diagnoses included failure to thrive and history of hypertension.
-Physician orders for a heart healthy diabetic consistent carbohydrate mechanical soft diet.

Review of the diet list revealed Resident #5 was to receive a Regular, Mechanical Soft, Puree meat."

Review of the facility menus revealed they did not have a Heart Healthy Diabetic Consistent Carbohydrate Mechanical Soft diet.

Review of Resident #5's record revealed no clarification of diet orders.

Observation of the noon meal on 10/6/17 revealed Resident #5 received she received vegetable soup, chipped beef (corned beef in 1/2 by 1/4 inch strips) and gravy on toast, mashed

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL011151	A. BUILDING: _____ B. WING _____	R 11/09/2017

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
HEATHER GLEN AT ARDENWOODS	103 APPLACHIAN BLVD ARDEN, NC 28704

(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 296	Continued From page 17 potatoes, and fried okra. Observation of the evening meal on 10/6/17 revealed: -She received chopped chicken, rice, broccoli, roll, and water. -She ate 1/2 the chicken and all the other foods. Observation of the breakfast meal on 10/7/17 at 7:30am revealed: -She was served an omelet, orange juice, and 2 and 1/2 slices bacon strips with no texture medications and not crispy. -She ate 2/3 of the omelet, 1/2 the bacon, and 1/2 of her orange juice. Interview with Resident #5 at 7:45am revealed she liked her bacon crispy, but only "spots" of the bacon was crispy. Interview with Resident #5's family member on 11/8/17 at 12:20pm revealed: -Resident #5's diet was supposed to be pureed meat with all the other foods soft. -Resident #5 refused to wear dentures. Telephone interview on 11/8/17 at 2:55pm with the dietitian who signed the facility menus revealed: -She would contact the dining services manager and discuss what menus the facility required. -She would have to research to determine what size pieces of meat and other foods would be appropriate for a mechanical soft diet. Telephone interview on 11/9/17 at 2:43pm with a nurse at Resident #5's physician office revealed the physician wanted Resident #5 to be on "textured soft foods" and meats finely chopped.	D 296		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL011151	A. BUILDING: _____ B. WING _____	R 11/09/2017

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
HEATHER GLEN AT ARDENWOODS	103 APPLACHIAN BLVD ARDEN, NC 28704

(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 296	Continued From page 18 F. A. Review of Resident #6's current FL2 dated 5/21/17 revealed: -Diagnoses included hypertension, cognitive impairment, and diabetes. -There were physician orders for a Vegetarian Diet. Review of the undated therapeutic diet list in the kitchen revealed Resident #1 was on a "Regular CCHO" diet. Review of a Diet Communication Sheet dated 10/31/17 revealed Resident #1 was on a Regular diet. Review of a previous Diet Communication Sheet dated 10/22/17 revealed Resident #1 was on a Vegetarian/Diabetic diet. Review of Resident #6's record revealed no clarification of diet orders. Review of the facility therapeutic menus revealed no Vegetarian and no Vegetarian/Diabetic menus were available for the guidance of food service staff. Observation of the noon meal on 11/6/17 at 12 noon revealed: -She was served a Caesar Salad with fried chicken pieces, crackers, water, and sugar free chocolate cream pie. -She ate all 3/4 of the Caesar Salad and all the pie. Observation of the dinner meal on 11/6/17 at 5:00pm revealed: -She was served sweet and sour chicken pieces, rice, broccoli, roll, Boston cream pie, and water. -She ate all the meal.	D 296		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL011151	A. BUILDING: _____ B. WING _____	R 11/09/2017

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
HEATHER GLEN AT ARDENWOODS	103 APPLACHIAN BLVD ARDEN, NC 28704

(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 296	Continued From page 19 Interview with Resident #6's family member on 11/7/17 at 8:40am revealed: -Resident #6 did eat some meat except for pork. -He would discuss Resident #6's diet with the physician and suggest some type of diabetic diet with no pork. Interview with Resident #6 on 11/6/17 at 10:33am revealed: -She was on a "Vegetarian" diet but she ate some meat except for pork and she did not care for fish. -The facility had been serving her meat and she had not discussed her diet with her physician or with facility staff. Attempted telephone with Resident #6's primary care physician on 11/8/17 at 1:15pm was not successful. The facility failed to assure 6 of 6 residents with physician orders for a therapeutic diet were available for the guidance of food service staff placed the residents at risk as follows: No Mechanical Soft Menus were available for Resident #4 with a diagnosis of dysphagia, for Resident #5 with a diagnosis of failure to thrive and refusing to wear dentures, and for Resident # 3 with a diagnosis of dementia. No Carbohydrate Controlled menus were available for Resident # 1 and #2 with a diagnosis of diabetes. No Vegetarian or no Vegetarian/Diabetic menus were available for Resident #6 with a diagnosis of diabetes and hypertension. The facility's failure to assure staff had menu guidance to serve residents with chewing and swallowing problems with the appropriate modified textures increased the risk of residents choking (food getting stuck in the upper airway) and/or aspirating (food entering	D 296		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL011151	A. BUILDING: _____ B. WING _____	R 11/09/2017

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
HEATHER GLEN AT ARDENWOODS	103 APPLACHIAN BLVD ARDEN, NC 28704

(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 296	Continued From page 20 the lungs). The failure to assure staff had menu guidance to serve residents with diabetes increased the risks of the residents' blood sugar levels increasing. This failure was detrimental to the health, safety, and welfare of the affected residents and constitutes a Type B Violation. _____ The Plan of Protection provided by the facility on 11/8/17 revealed: -The Dietitian is working on completing matching therapeutic menus fall all diet orders. -Immediately, the dietary staff will monitor the meals when serving food to residents to assure the residents are served the correct diet that matches the diet the physician has ordered. -The facility Nurse will consult with the residents' physicians for the correct therapeutic diet order. -The The Food and Beverage Director will observe a meal delivery 2 times a month for 3 months and document what foods are served. -The cooks will conduct weekly audits through the Meal Monitor to assure all therapeutic diets are served correctly and turn the documentation into the Food And Beverage director. -After February 2018, quarterly audits will be done by the Food And Beverage Director and cooks, indefinitely. CORRECTION FOR THE TYPE B VIOLATION SHALL NOT EXCEED December 24, 2017.	D 296		
D 309	10A NCAC 13F .0904(e)(3) Nutrition and Food Service 10A NCAC 13F .0904 Nutrition and Food Service (e) Therapeutic Diets in Adult Care Homes: (3) The facility shall maintain an accurate and current listing of residents with physician-ordered	D 309		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL011151	A. BUILDING: _____ B. WING _____	R 11/09/2017

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
HEATHER GLEN AT ARDENWOODS	103 APPLACHIAN BLVD ARDEN, NC 28704

(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 309	Continued From page 21	D 309		

therapeutic diets for guidance of food service staff.

This Rule is not met as evidenced by:
Based on observations, interviews, and record reviews, the facility failed to assure an accurate and current listing of residents with physician-ordered therapeutic diets was available for the guidance of food service staff for 5 of 6 residents sampled (#1, #2, #3, #5, and #6).

The findings are:

Interview with the Dietary Manager on 11/8/17 at 12:12pm revealed:
-He made the therapeutic diet list from the information on the diet communication sheets received from the facility nurse and the medication aides.
-He relied on the medication aides and the nurse to let dietary staff know if there were diet changes.
-He had completed the food service orientation training and had worked there for more than 3 years.

Interview with the Administrator on 11/8/17 at 3:15pm revealed:
-The 2 Medication Aides who took care of the diet communication sheets were currently out or on vacation.
-She would assure in the future the medication aides would promptly notify the dietary staff when residents had a change in diet orders and they would contact the physician to clarify any orders that were not clear.

A. Review of Resident #1 current FL2 dated 2/16/17 revealed:
-Diagnoses included diabetes, hypertension,

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL011151	A. BUILDING: _____ B. WING _____	R 11/09/2017

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
HEATHER GLEN AT ARDENWOODS	103 APPLACHIAN BLVD ARDEN, NC 28704

(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 309	Continued From page 22	D 309		

cardiomyopathy, and congestive heart failure.
-There were physician orders for a "Regular" diet on the first page of the FL2 under nutrition status but had "Regular chopped solids into small bite size pieces" on the third page with the medication orders.

Review of the undated therapeutic diet list revealed Resident #1 was to receive a "Regular CCHO" (Controlled Carbohydrate) diet.

Review of Resident #1's record revealed no clarification of diet orders.

Interview with Resident #1's family on 11/6/17 at 10:45 revealed:
-He was having increasing pain and not eating as much.
-They were not sure about what type of diet the physician had ordered.

Telephone interview with Resident #1's physician on 11/9/17 at 1:45pm revealed:
-She would expect Resident #1 to receive a CHHO diet and finely chopped.
-She also had requested Resident #1 to be served fruit in place of desserts.

B. Review of Resident #2's current FL2 dated 9/15/17 revealed:
-Diagnoses included type 2 diabetes mellitus and arteriosclerotic heart disease.
-No physician orders for a regular or therapeutic diet.

Review of Resident #2's Resident Register revealed he was admitted to the facility on 9/17/17.

Review of a physician order dated 10/3/17

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL011151	A. BUILDING: _____ B. WING _____	R 11/09/2017

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
HEATHER GLEN AT ARDENWOODS	103 APPLACHIAN BLVD ARDEN, NC 28704

(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 309	Continued From page 23	D 309		

revealed an order for a Regular diet finely chopped.

Review of a diet communication sheet, dated 9/20/17, revealed an order for CCHO diet.

Review of the undated therapeutic diet list revealed Resident #2 was on a "Regular CCHO" diet.

Review of Resident #2's record revealed no clarification of diet orders.

Interview with resident #2 on 11/7/17 at 8:15am revealed:
-He was on a "diabetic" diet.
-The physician discontinued the ground meat diet but served meat finely chopped like "hamburger".
-Staff have reminded him of his diabetic diet order when choosing desserts at mealtime.

Attempted telephone with Resident #2's primary care physician on 11/8/17 at 1:15pm was not successful

C. Review of Resident #3's current FL2 dated 9/16/16 revealed:
-Diagnoses included dementia, hypertension, and fractured neck,
-Physician orders for a "Regular Chopped Solids" diet.

Review of physician orders dated 6/13/17 revealed a previous diet order for a nectar thickened liquid except for water.

Review of the diet list for residents on therapeutic diets revealed Resident #3 was to receive a "Regular, Mechanical Soft diet order and Nectar to thicken soft liquids, except water, no fish, dairy,

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL011151	A. BUILDING: _____ B. WING _____	R 11/09/2017

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
HEATHER GLEN AT ARDENWOODS	103 APPLACHIAN BLVD ARDEN, NC 28704

(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 309	Continued From page 24 or caffeine..." Review of Resident #3's record revealed no clarification of diet orders. Review of the facility menus revealed they had no Mechanical Soft menus. Review of the diet list for residents on therapeutic diets revealed Resident #3 was to receive a Regular, Mechanical Soft, "Nectar to thicken soft liquids, except water, no fish, dairy, or caffeine..." Interview with Resident #3's family member on 11/9/17 at 11:15am revealed Resident #3 was supposed to be on a Regular solids chopped finely and nectar thickened liquids except for water. D. Review of Resident #5's current FL2 dated 4/13/17 revealed: -Diagnoses included failure to thrive and history of hypertension. -There were physician orders for a Heart Healthy Diabetic Consistent Carbohydrate Mechanical Soft diet. Review of the undated therapeutic diet list revealed Resident #5 was to receive a Regular, Mechanical Soft, Puree meat." Review of Resident #5's record revealed no clarification of diet orders. Interview with Resident #5's family member on 11/8/17 at 12:20pm revealed: -He understood Resident #5 was on a puree meat diet and for all the other foods to be soft. -Resident #5 would not wear her dentures and had trouble eating meats.	D 309		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL011151	A. BUILDING: _____ B. WING _____	R 11/09/2017

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
HEATHER GLEN AT ARDENWOODS	103 APPLACHIAN BLVD ARDEN, NC 28704

(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 309	Continued From page 25 Review of the facility therapeutic menus revealed there were no Mechanical Soft menus and no Heart Healthy Diabetic Consistent Carbohydrate Mechanical Soft menus. Telephone interview on 11/9/17 at 2:43pm with a Nurse at Resident #5's physician's office revealed the physician wanted Resident #5 to be on "textured soft foods" and meats finely chopped. E. Review of Resident #6's current FL2 dated 5/21/17 revealed: -Diagnoses included hyperextension, cognitive impairment, and diabetes. -Physician orders for a Vegetarian Diet. Review of the undated therapeutic diet list in the kitchen revealed Resident #1 was on a "Regular CCHO" diet. Review of a Diet Communication Sheet dated 10/31/17 revealed Resident #1 was on a Regular diet. Review of a previous Diet Communication Sheet dated 10/22/17 revealed Resident #1 was on a Vegetarian/Diabetic diet. Review of Resident #6's record revealed no clarification of diet orders. Interview with Resident #6's family member on 11/7/17 at 8:40am revealed: -Resident #6 did eat some meat except for pork. -He would discuss Resident #6's diet with the physician and suggest some type of diabetic diet with no pork. Interview with Resident #6 on 11/6/17 at 10:33am	D 309		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL011151	A. BUILDING: _____ B. WING _____	R 11/09/2017

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
HEATHER GLEN AT ARDENWOODS	103 APPLACHIAN BLVD ARDEN, NC 28704

(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 309	Continued From page 26 revealed: -She was on a "Vegetarian" diet but she ate some meat except for pork and she did not care for fish. -The facility had been serving her meat and she had not discussed her diet with her physician or facility staff. Attempted telephone with Resident #6's primary care physician on 11/8/17 at 1:15pm was not successful.	D 309		
D 310	10A NCAC 13F .0904(e)(4) Nutrition and Food Service 10A NCAC 13F .0904 Nutrition and Food Service (e) Therapeutic Diets in Adult Care Homes: (4) All therapeutic diets, including nutritional supplements and thickened liquids, shall be served as ordered by the resident's physician. This Rule is not met as evidenced by: TYPE B VIOLATION Based on observations, interviews, and record reviews, it could not be determined the facility served therapeutic diets as ordered for 6 of 6 Residents sampled as evidenced by no therapeutic menus available as guidance for Resident #6 with a Vegetarian diet order, no Mechanical Soft menus for Residents #3 and #4, no Heart Healthy Diabetic Consistent Carbohydrate Mechanical Soft diet for Resident #5, and no complete Controlled Carbohydrate menus for Residents #1 and #2. The findings are:	D 310		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL011151	A. BUILDING: _____ B. WING _____	R 11/09/2017

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
HEATHER GLEN AT ARDENWOODS	103 APPLACHIAN BLVD ARDEN, NC 28704

(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 310	Continued From page 27 Review of the facility menus on 11/6/17 revealed: -There were Week at a Glance Regular and Controlled Carbohydrate (CCHO) menus signed by a Registered Dietitian. (A carbohydrate controlled diet is a diet in which carbohydrate intake is either limited or set at a particular value, with portion sizes to assure appropriate carbohydrate intake, and can be used to stabilize blood glucose levels in diabetics.) -The CCHO menus had each breakfast food listed including beverages but without portion sizes except for the 8 ounces of milk. -The lunch menus had 2 choices and each choice included an entree, 1 or 2 vegetables/soup, some choices had a fruit, some choices had a bread, but no choices listed for desserts and beverages. -There were no portion sizes for any of the foods listed on the lunch menu choices. -The dinner menus had 2 choices and each choice listed an entree, 1 or 2 vegetables/soup, 8 ounces milk, some choices had a bread, but no choices had fruits/ desserts. -There were no portions listed on the dinner foods except for the milk. -There were no therapeutic menus available for the guidance of food service staff for Mechanical Soft, Vegetarian, and Heart Healthy Diabetic Consistent Carbohydrate Mechanical Soft diet orders. Interview with the Dietary Manager on 11/8/17 at 12:12pm revealed: -He would like to have clarification of the menus and to know exactly what foods all the residents were allowed to have. -He did not have any therapeutic menus except for the CCHO menus. -He had completed the food service orientation training and had worked there for more than 3	D 310		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL011151	A. BUILDING: _____ B. WING _____	R 11/09/2017

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
HEATHER GLEN AT ARDENWOODS	103 APPLACHIAN BLVD ARDEN, NC 28704

(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 310	Continued From page 28	D 310		

years.
-The Food and Beverage Director was responsible for acquiring all the menus.
-He compiled the diet list from diet communication sheets received from the facility's nurse and medication aides.

Telephone interview on 11/8/17 at 2:55pm with the Dietitian who signed the facility menus revealed:
-She did not have her files with her but thought she had provided complete menus with all allowable foods listed for the CCHO menus.
-She would contact the Food and Beverage Director and discuss what the facility needed to be in compliance.

Interview with the Executive Director on 11/8/17 at 3:15pm revealed:
-They would contact the residents' physician for clarification of diet orders.
-The Food and Beverage Director was responsible for assuring therapeutic diets were available and he would contact the dietitian.

Interview with the Food and Beverage Director on 11/8/17 at 3:15pm revealed:
-He had contacted the Dietitian for menus but would assure the physicians diet orders were clarified.
-He was responsible for the food service in the facility's independent housing and in the assisted living units.

A. Review of Resident #1's current FL2 dated 2/16/17 revealed:
-Diagnoses included diabetes, hypertension, cardiomyopathy, and congestive heart failure.
-There were physician orders for a "Regular" diet on the first page of the FL2 under nutrition status

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL011151	A. BUILDING: _____ B. WING _____	R 11/09/2017

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
HEATHER GLEN AT ARDENWOODS	103 APPLACHIAN BLVD ARDEN, NC 28704

(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 310	Continued From page 29 but had "Regular chopped solids into small bite size pieces" on the third page with the medication orders. Review of the undated therapeutic diet list posted in the kitchen Resident #1 was to receive a "Regular CCHO" diet. Review of Resident #1's record revealed no clarification for the diet order. Review of the facility CCHO dinner menus for 11/6/17 revealed: -Rice Pilaf, steamed broccoli, and 8 ounces milk were to be served with the choice of crab stuffed flounder. -Rice Pilaf, steamed broccoli, and 8 ounces milk were to be served with the choice of sweet and sour chicken. -The menus were not complete with desserts/fruits listed. Observation of the evening meal on 11/6/17 at 5:00pm revealed: -He was served sweet and sour chicken pieces at least 2 by 2 by 1 inch sizes, broccoli, roll rice tea, and coffee. -He ate 1/2 of the chicken, 3/4 of the broccoli, the rice, and the roll. Review of the facility CCHO breakfast menus for 11/6/17 revealed fried or scrambled eggs, bacon or sausage, waffle, watermelon, orange juice, and milk were to be served. Observation of the breakfast meal on 10/7/17 at 9:10am revealed: -He received 2 slices whole strips of bacon, 1 slice toasted raisin bread, 5 one-half orange slices, 6 ounces orange juice, and coffee.	D 310		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL011151	A. BUILDING: _____ B. WING _____	R 11/09/2017

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
HEATHER GLEN AT ARDENWOODS	103 APPLACHIAN BLVD ARDEN, NC 28704

(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 310	Continued From page 30	D 310		

-He ate 1/2 of the chicken, 3/4 of the broccoli, the rice, and the roll.

Interview with Resident #1's family on 11/6/17 at 10:45 revealed:
-He was having increasing pain and not eating as much.
-They were not sure about what type of diet the physician had ordered.

Telephone interview with Resident #1's physician on 11/9/17 at 1:45pm revealed:
-She would expect Resident #1 to receive a diabetic diet and solids finely chopped.
-She also had requested Resident #1 to be served fruit in place of desserts.

B. Review of Resident #2's current FL2 dated 9/15/17 revealed:
-Diagnoses included type 2 diabetes and arteriosclerotic heart disease.
-There were no physician orders for any therapeutic diet or regular diet.

Review of Resident #2's Resident Register revealed he was admitted to the facility on 9/17/17.

Review of a subsequent physician order, dated 10/3/17, revealed an order for a Regular diet finely chopped.

Review of the undated therapeutic diet list posted in the kitchen revealed Resident #2 was on a "Regular CCHO" diet.

Review of Resident #2's record revealed no clarification of the diet order.

Interview with Resident #2 on 11/7/17 at 8:15am

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL011151	A. BUILDING: _____ B. WING _____	R 11/09/2017

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
HEATHER GLEN AT ARDENWOODS	103 APPLACHIAN BLVD ARDEN, NC 28704

(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 310	Continued From page 31	D 310		

revealed:
-He was on a "diabetic" diet.
-The physician discontinued the ground meat diet but served meat finely chopped like "hamburger."
-Staff have reminded him of his diabetic diet order when choosing desserts at mealtime.

Review of the facility CCHO lunch menus for 11/6/17 revealed:
-Mashed potatoes and fried okra were to be served with the choice of an open face turkey sandwich with gravy with no dessert/fruit and beverages listed.
-Vegetable soup, roll fresh fruit were to be served with the choice of a Steak Caesar salad with no dessert and beverages listed.

Observation of the noon meal on 11/6/17 at 12:00 noon revealed:
-He received was served a bowl of vegetable soup, chipped beef and gravy on a slice of toast, fried okra, mash potatoes, sweet iced tea, coffee, and water.
-Facility staff verbally offered the residents a choice of desserts, but Resident #1 did not want any dessert.

Review of the facility CCHO breakfast menus for 11/6/17 revealed fried or scrambled eggs, bacon or sausage, waffle, watermelon, orange juice, and milk.

Observation of the breakfast meal meal on 11/7/17 at 7:45am revealed Resident #2 received scrambled eggs and and 1 cup cornflakes and 5 ounces of milk, and 5 ounces orange juice.

Interview with the Dietary Manager on 11/8/17 at 12:12pm revealed they offered the residents whatever was on the menu and the residents did

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL011151	A. BUILDING: _____ B. WING _____	R 11/09/2017

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
HEATHER GLEN AT ARDENWOODS	103 APPLACHIAN BLVD ARDEN, NC 28704

(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 310	Continued From page 32	D 310		

not always choose all the items on the menu.

Attempted telephone with Resident #2's primary care physician on 11/8/17 at 1:15pm was not successful.

C. Review of Resident #3's current FL2 dated 9/16/16 revealed:
-Diagnoses included dementia, hypertension, and fractured neck,
-There was a physician order for a "Regular Chopped Solids" diet.

Review of previous physician orders dated 6/13/17 revealed a diet order for a nectar thickened liquid except for water.

Review of the diet list for residents on therapeutic diets revealed Resident #3 was to receive a "Regular, Mechanical Soft diet order and Nectar to thicken soft liquids, except water, no fish, dairy, or caffeine...".

Review of Resident #3's record revealed no clarification for the different diet orders.

Review of the facility menus revealed they had no Mechanical Soft menus.

Observation of the noon meal on 10/6/17 revealed:
-Resident #3 received a Caesar salad (lettuce in approximately 2 by 2 inch pieces with 1 by 1 by 1 pieces of fried chicken with salad dressing, fresh pineapple pieces in 1 by 1/2 by 3/4/ inch and strawberries, crackers, and regular Boston cream pie.
-Resident #3 was served thickened flavored water and unthickened plain water.
-Resident #3 ate all the meal except for 1/2 the

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL011151	A. BUILDING: _____ B. WING _____	R 11/09/2017

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
HEATHER GLEN AT ARDENWOODS	103 APPLACHIAN BLVD ARDEN, NC 28704

(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 310	Continued From page 33	D 310		

salad.

Observation of the dinner meal on 10/6/17 revealed:
-Resident #3 received chopped chicken, broccoli, rice, roll and regular chocolate cake.
-Resident #3 was served thickened flavored water and unthickened plain water.

Observation of the breakfast meal on 10/7/17 revealed:
-Resident #3 received received a bowl of oatmeal topped with melted brown sugar, scrambled eggs, 2 whole strips bacon, a slice toasted raisin bread, thickened milk, and unthickened water.
-Resident #3 ate 1/2 of the eggs, 1/2 of the bread, 1 slice of the bacon, and all the oatmeal.

Interview with Resident #3 on 10/7/17 at 8:15am revealed the bacon was "good."

Telephone interview on 11/8/17 at 2:55pm with the dietitian who signed the facility regular and CCHO menus revealed:
-She would contact the dining services manager and discuss what menus the facility required.
-She would not put raw vegetables on a mechanical soft menu.
-She would have to research to determine what size pieces of meat, bacon, and other foods would be appropriate for a mechanical soft diet.

Interview on 11/9/17 at 11:15am with the family of Resident of Resident #3 revealed Resident #3 was supposed to be on a Regular diet and solids chopped finely diet and all liquids nectar thick except for water.

D. Review of Resident #4 current FL2 dated 3/24/17 revealed:

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL011151	A. BUILDING: _____ B. WING _____	R 11/09/2017

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
HEATHER GLEN AT ARDENWOODS	103 APPLACHIAN BLVD ARDEN, NC 28704

(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 310	Continued From page 34	D 310		

-Diagnoses included dysphagia, pneumonia, and encephalopathy.
-There were physician orders for a Mechanical Soft diet.

Review of the undated therapeutic diet list for residents revealed Resident #4 was to receive a Mechanical Soft diet.

Review of the facility menus revealed they had no Mechanical Soft menus.

Observation of the noon meal on 10/6/17 at 12 noon revealed:
-Resident #4 received vegetable soup, chipped beef on toast, and mashed potatoes.
-She ate in her room and was assisted by a family member.

Interview with Resident #4's family member 11/8/17 at 9:15 am revealed Resident #4 usually received chopped meats and a nutritional supplement if she refused to eat.

Telephone interview on 11/8/17 at 2:55pm with the Dietitian who signed the facility menus revealed:
-She would contact the dining services manager and discuss what menus the facility required.
-She would have to research to determine what size pieces of meat and other foods would be appropriate for a mechanical soft diet.

Attempted telephone with Resident #2's primary care physician on 11/8/17 at 1:15pm was not successful

E. Review of Resident #5 current FL2 dated 4/13/17 revealed:
-Diagnoses included failure to thrive and history

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL011151	A. BUILDING: _____ B. WING _____	R 11/09/2017

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
HEATHER GLEN AT ARDENWOODS	103 APPLACHIAN BLVD ARDEN, NC 28704

(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 310	Continued From page 35	D 310		

of hypertension.
-There were physician orders for a Heart Healthy Diabetic Consistent Carbohydrate Mechanical Soft diet.

Review of the undated therapeutic diet list revealed Resident #5 was to receive a "Regular, Mechanical Soft, Puree meat."

Review of the facility menus revealed they did not have a Heart Healthy Diabetic Consistent Carbohydrate Mechanical Soft diet.

Observation of the noon meal on 10/6/17 revealed Resident #5 received she received vegetable soup, chipped beef (corned beef in 1/2 by 1/4 inch strips) and gravy on toast, mashed potatoes, and fried okra.

Observation of the evening meal on 10/6/17 revealed:
-She received chopped chicken, rice, broccoli, roll, and water.
-She ate 1/2 the chicken and all the other foods.

Observation of the breakfast meal on 10/7/17 at 7:30am revealed:
-She was served an omelet, orange juice, and 2 and 1/2 slices bacon strips, not crispy.
-She ate 2/3 of the omelet, 1/2 the bacon, and 1/2 of her orange juice.

Interview with Resident #5 at 7:45am revealed she liked her bacon crispy, but only "spots" of the bacon was crispy.

Interview with Resident #5's family member on 11/8/17 at 12:20pm revealed:
-Resident #5's diet was supposed to be pureed meat with all the other foods soft.

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL011151	A. BUILDING: _____ B. WING _____	R 11/09/2017

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
HEATHER GLEN AT ARDENWOODS	103 APPLACHIAN BLVD ARDEN, NC 28704

(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 310	Continued From page 36 -Resident #5 refused to wear dentures. Telephone interview on 11/8/17 at 2:55pm with the Dietitian who signed the facility menus revealed: -She would contact the dining services manager and discuss what menus the facility required. -She would have to research to determine what size pieces of meat and other foods would be appropriate for a mechanical soft diet. Telephone interview on 11/9/17 at 2:43pm with a nurse at Resident #5's physician office revealed the physician wanted Resident #5 to be on "textured soft foods" and meats finely chopped. F. A. Review of Resident #6's current FL2 dated 5/21/17 revealed: -Diagnoses included hypertension, cognitive impairment, and diabetes. -There was a physician order for a Vegetarian Diet. Review of the undated therapeutic diet list in the kitchen revealed Resident #1 was on a "Regular CCHO" diet. Review of a Diet Communication Sheet dated 10/22/17 revealed Resident #1 was on a Vegetarian/Diabetic diet. Review of a subsequent Diet Communication Sheet dated 10/31/17 revealed Resident #1 was on a Regular diet. Review of Resident #6's record revealed no clarification of the diet order. Review of the facility therapeutic menus revealed no Vegetarian and no Vegetarian/Diabetic menu	D 310		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL011151	A. BUILDING: _____ B. WING _____	R 11/09/2017

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
HEATHER GLEN AT ARDENWOODS	103 APPLACHIAN BLVD ARDEN, NC 28704

(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 310	Continued From page 37 available for the guidance of food service staff. Observation of the lunch meal on 11/6/17 at 12 noon revealed: -She was served a Caesar Salad with fried chicken pieces, crackers, water, and sugar free chocolate cream pie. -She ate all 3/4 of the Caesar Salad and all the pie. Observation of the dinner meal on 11/6/17 at 5:00pm revealed: -She was served sweet and sour chicken pieces, rice, broccoli, roll, Boston cream pie, and water. -She ate all the meal. Observation of the breakfast meal on 11/7/17 revealed Resident #6 did not come to the dining room for breakfast. Interview with Resident #6's family member on 11/7/17 at 8:40am revealed: -Resident #6 did eat some meat except for pork. -He would discuss Resident #6's diet with the physician and suggest some type of diabetic diet with no pork. Interview with Resident #6 on 11/6/17 at 10:33am revealed: -She was on a "Vegetarian" diet but she ate some meat except for pork and she did not care for fish. -The facility had been serving her meat and she had not discussed her diet with her physician or facility staff. Attempted telephone with Resident #6's primary care physician on 11/8/17 at 1:15pm was not successful.	D 310		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL011151	A. BUILDING: _____ B. WING _____	R 11/09/2017

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
HEATHER GLEN AT ARDENWOODS	103 APPLACHIAN BLVD ARDEN, NC 28704

(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 310	Continued From page 38 Without therapeutic menus, it could not be determined the residents were served the therapeutic diets as ordered for 6 of 6 residents placing the residents at risk as follows: No Mechanical Soft menus for Resident #4 with a diagnosis of dysphasia, for Resident #5 with a diagnosis of failure to thrive and refusing to wear dentures, and for Resident # 3 with a diagnosis of dementia. No complete Carbohydrate Controlled menus for Resident # 1 and #2 with a diagnosis of diabetes; No Vegetarian or Vegetarian/Diabetic diet for Resident #6 with a diagnosis of diabetes and hypertension. The facility's failure to assure residents with chewing and swallowing problems were served appropriate modified textures increased the risk of residents choking (food getting stuck in the upper airway) and/or aspirating (food entering the lungs). The failure to assure residents with diabetes were served the appropriate diet increased the risk of the residents' blood sugar levels increasing. This failure was detrimental to the health, safety, and welfare of the affected residents and constitutes a Type B Violation. The Plan of Protection provided by the facility on 11/8/17 revealed: -The Dietitian was working on completing matching therapeutic menus for all diet orders. -Immediately, the dietary staff will monitor the meals when serving food to residents to assure the residents are served the correct diet that matches the diet the physician has ordered. -The facility Nurse will consult with the residents' physicians for the correct therapeutic diet order. -The Food and Beverage Director will observe a meal delivery 2 times a month for 3 months and document what foods are served. -The cooks will conduct weekly audits through the	D 310		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL011151	A. BUILDING: _____ B. WING _____	R 11/09/2017

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
HEATHER GLEN AT ARDENWOODS	103 APPLACHIAN BLVD ARDEN, NC 28704

(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 310	Continued From page 39 Meal Monitor to assure all therapeutic diets are served correctly and turn the documentation into the Food And Beverage director. -After February 2018, quarterly audits will be done by the Food And Beverage Director and cooks, indefinitely. CORRECTION FOR THE TYPE B VIOLATION SHALL NOT EXCEED December 24, 2017.	D 310		
D 344	10A NCAC 13F .1002(a) Medication Orders 10A NCAC 13F .1002 Medication Orders (a) An adult care home shall ensure contact with the resident's physician or prescribing practitioner for verification or clarification of orders for medications and treatments: (1) if orders for admission or readmission of the resident are not dated and signed within 24 hours of admission or readmission to the facility; (2) if orders are not clear or complete; or (3) if multiple admission forms are received upon admission or readmission and orders on the forms are not the same. The facility shall ensure that this verification or clarification is documented in the resident's record. This Rule is not met as evidenced by: Based on observation, interviews and record reviews, the facility failed to assure clarification of physician's orders for 2 of 5 sampled residents related to cyanocobalamin (Vitamin B12) injections, ProStat liquid protein and fingerstick blood sugar testing for Resident #2 and Ferrex, Skin Prep, TED (Thrombo-embolitic Deterrent) hose and red yeast rice for Resident #3.	D 344		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL011151	A. BUILDING: _____ B. WING _____	R 11/09/2017

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
HEATHER GLEN AT ARDENWOODS	103 APPLACHIAN BLVD ARDEN, NC 28704

(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 344	Continued From page 40 The findings are: A. Review of Resident #2's current FL2 dated 9/15/17 revealed: -Diagnoses included type 2 diabetes mellitus and arteriosclerotic heart disease. -Medication orders included finger stick blood sugar testing daily; Lantus insulin give 12 units every night at bedtime and ProStat liquid protein 30ml twice a day for 30 days (promotes tissue healing). Review of Resident #2's Resident Register revealed an admission date of 9/17/17. 1. Review of Resident #2's record revealed: -Discharge information from the Skilled Nursing Facility where the resident had been for rehabilitation prior to admission at this facility. -The paperwork included a September 2017 Medication Administration Record (MAR) indicating the resident had been scheduled to receive a cyanocobalamin (Vitamin B12) 1,000mcg injection on 9/9/17 (Vitamin B12 administered to residents with mild cognitive impairment slows the rate of brain deteriation and cognitive decline). -There was no documentation the injection had been administrated. -There was no documentation of why it had not been given. Review of Resident #2's September 2017 electronic Medication Administration Record (eMAR) at the current facility revealed there was no entry for "B12 1,000 mcg injections every four weeks" on the MAR. Review of Resident #2's October 2017 eMAR revealed:	D 344		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL011151	A. BUILDING: _____ B. WING _____	R 11/09/2017

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
HEATHER GLEN AT ARDENWOODS	103 APPLACHIAN BLVD ARDEN, NC 28704

(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 344	Continued From page 41	D 344		

-An entry for cyanocobalamin (Vitamin B12) 1,000mcg injections every thirty (30) days dated 10/8/17 had been entered on the MAR.
-There was a notation on the eMAR dated 10/25/17 made by theMA the Home Health nurse would be at the facility that day to give the injection.
-The Medication Aide (MA) had initialed and circled 10/25/17 indicating the medication had not been given.

Review of the physician's orders in Resident #2's record revealed:
-No order dated 10/8/17 for cyanocobalamin (Vitamin B12) 1,000mcg injections every thirty days.
-An order dated 10/24/17 for "B12 1,000mcg injection every thirty days".

Review of Resident #2's November 2017 eMAR revealed the physician's order dated 10/24/17 for "B12 1,000mcg injections every thirty days" had been entered on the MAR but did not indicate when it should be given.

Review of the Home Health skilled nursing notes in Resident #2's record revealed:
-There was no documentation the B12 injection had been administered by the Home Health nurse in September 2017.
-There was no documentation the B12 injection had been administered by the Home Health nurse in October 2017.

Interview with the Director of Health Services (DOHS) on 11/7/17 at 3:40pm revealed:
-She had been off when the resident was admitted back to the facility.
-When she returned she had found three vials of cyanocobalamin (Vitamin B12) in the medication

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL011151	A. BUILDING: _____ B. WING _____	R 11/09/2017

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HEATHER GLEN AT ARDENWOODS	103 APPLACHIAN BLVD ARDEN, NC 28704

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D 344	Continued From page 42	D 344		

room refrigerator labeled for Resident #2.
-The vials had come with the resident from the rehabilitation facility and had been placed in the refrigerator by the MA on duty at the time.
-The resident's FL2 did not have an order for the B12.
-She did not know why the physician had not been contacted regarding the B12 injection upon admission.
-She had contacted the physician and received an order on 10/8/17.
-The Home Health nurse had been scheduled to come to the facility on 10/25/17 and administer the medication but it had not been administered.
-The DOHS had been attempting to get a Home Health nurse to administer the medication but had not been successful.
-The DOHS had called earlier that day and arranged for Resident #2 to receive the Vitamin B12 injection from the Home Health nurse on 11/9/17.

Attempted telephone interview with Resident #2's physician on 11/7/17 at 11:10am was not successful.

2. Review of the physician's orders in Resident #2's record revealed
-On 10/18/17, an order had been received for "Blood sugar check every morning".
-On 10/31/17, an order had been received to "Add glipizide 5mg daily (used to decrease blood sugar) and continue twice daily blood sugar checks".

Review of Resident #2's September 2017 eMAR revealed:
-Blood sugar checks had been done daily at 8:00am on 9/7/17 through 9/30/17.
-Results ranged from 174 to 215.

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL011151	A. BUILDING: _____ B. WING _____	R 11/09/2017

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
HEATHER GLEN AT ARDENWOODS	103 APPLACHIAN BLVD ARDEN, NC 28704

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D 344	Continued From page 43 Review of Resident #2's October 2017 eMAR revealed: -Blood sugar checks had been done daily at 8:00am on 10/1/17 through 10/31/17. -Results ranged from 165 to 264. Review of Resident #2's November 2017 eMAR revealed: -The physician's order written 10/31/17 "to add glipizide 5mg daily" had been entered on the MAR and documented as administered. -The physician's order written 10/31/17, to "continue twice daily blood sugar checks" had not been entered on the MAR. -Blood sugar checks had been done daily at 8:00am from 11/1/17 through 11/6/17. -Results ranged from 160 to 247. Interview with the Director of Health Services (DOHS) on 11/7/17 at 3:40pm revealed: -She was aware Resident #2 had an order for a fingerstick blood sugar test to be done daily. -She was not aware of the order written 10/31/17 to "add glipizide 5mg daily and continue twice daily blood sugar checks". -She would call Resident #2's physician and clarify whether he wanted daily or twice daily blood sugar testing. Attempted telephone interview with Resident #2's physician on 11/7/17 at 11:10am was not successful. 3. Review of Resident #2's record revealed there was documentation by the Home Health nurse on 10/26/17 of care provided to open wounds on Resident #2's right lateral ankle, right heel, right great toe, right second toe (bone exposed), right third toe and right fourth toe.	D 344		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL011151	A. BUILDING: _____ B. WING _____	R 11/09/2017

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
HEATHER GLEN AT ARDENWOODS	103 APPLACHIAN BLVD ARDEN, NC 28704

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D 344	Continued From page 44 Review of Resident #2's September 2017 electronic Medication Administration Record (eMAR) revealed -An entry for ProStat Sugar Free (promotes tissue healing) 30ml twice daily for 30 days had been administered as ordered from 9/17 through 9/30 (Days 1-13). Review of Resident #2's October 2017 eMAR revealed: -ProStat Sugar Free 30ml had been administered at 8:00am and 9:00pm from 10/1/17 through 10/617 at 8:00am. -The doses on 10/6/17 at 9:00pm and 10/7 at 8:00am had not been administered due to the resident being at the hospital. -The dose for 10/7/17 at 9:00pm had been administered after the resident returned to the facility. -The ProStat was noted as discontinued 10/7/17 at 6:00pm. -No hospital discharge orders were available for review. Review of the physician orders in Resident #2's record revealed there was no order for the ProStat to be discontinued. Interview with the Director of Health Services (DOHS) on 11/7/17 at 3:40pm revealed: -A Home Health nurse had been proving Resident #2's wound care. -The dressings on his lower legs were changed three times a week. -The wounds on the resident's right foot had gotten progressively worse and gangrene had developed. Attempted telephone interview with Resident #2's	D 344		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL011151	A. BUILDING: _____ B. WING _____	R 11/09/2017

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D 344	Continued From page 45 physician on 11/7/17 at 11:20am was not successful.	D 344		
D 358	10A NCAC 13F .1004(a) Medication Administration 10A NCAC 13F .1004 Medication Administration (a) An adult care home shall assure that the preparation and administration of medications, prescription and non-prescription, and treatments by staff are in accordance with: (1) orders by a licensed prescribing practitioner which are maintained in the resident's record; and (2) rules in this Section and the facility's policies and procedures. This Rule is not met as evidenced by: Based on observations, interviews, and record reviews, the facility failed to assure medications were administered as ordered for 2 of 5 residents as evidenced by a vitamin B 12 injection order for Resident #2 and a lidocaine patch order for Resident #5. The findings are: A. Review of Resident #2's current FL2 dated 9/15/17 revealed: -Diagnoses included type 2 diabetes mellitus and arteriosclerotic heart disease. Review of Resident #2's Register revealed an admission date of 9/17/17. Observations on 11/7/17 at 1:30pm of Resident #2's medications on hand available for administration revealed there were three vials of	D 358		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL011151	A. BUILDING: _____ B. WING _____	R 11/09/2017

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
HEATHER GLEN AT ARDENWOODS	103 APPLACHIAN BLVD ARDEN, NC 28704

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D 358	Continued From page 46	D 358		

(in the refrigerator in the medication room Vitamin B12 is needed for adequate nerve function, protein and carbohydrate metabolism, cell reproduction and red blood cell development)

Review of Resident #2's October 2017 eMAR revealed:
-An entry for cyanocobalamin (Vitamin B12) 1,000mcg injections every thirty (30) days dated 10/8/17 had been entered on the MAR.
-The Medication Aide (MA) had initialed and circled 10/25/17 indicating the medication had not been given.
-A notation on the eMAR dated 10/25/17 made by the MA stated the Home Health nurse would be at the facility that day to give the injection.
-There was no documentation the injection had been administered.

Review of the physician's orders in Resident #2's record revealed:
-There was no order dated 10/8/17 for cyanocobalamin (Vitamin B12) 1,000mcg injections every thirty days in the record.
-An order dated 10/24/17 for "B12 1,000mcg injection every thirty days".

Review of Resident #2's November 2017 eMAR revealed the physician's order for "B12 1,000mcg injections every thirty days" had been transcribed on the MAR but did not indicate when it should be given.

Review of the Home Health skilled nursing notes in Resident #2's record revealed:
-There was no documentation the B12 injection had been administered by the Home Health nurse in September 2017.
-There was no documentation the B12 injection had been administered by the Home Health nurse

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL011151	A. BUILDING: _____ B. WING _____	R 11/09/2017

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
HEATHER GLEN AT ARDENWOODS	103 APPLACHIAN BLVD ARDEN, NC 28704

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D 358	Continued From page 47 in October 2017. Interview with the Director of Health Services (DOHS) on 11/7/17 at 3:40pm revealed: -She had found three vials of cyanocobalamin (Vitamin B12) in the medication room refrigerator labeled for Resident #2 after he had been admitted. -The vials had come with the resident from the rehabilitation facility. -The resident's FL2 did not have an order for the B12. -She did not know why the physician had not been contacted regarding the B12 injection upon admission. -She had called the physician on 10/8/17 and obtained an order for the Vitamin B12 -The resident's healthcare provider had written another order for the B12 on 10/24/17. -The Home Health nurse had been scheduled to come to the facility on 10/25/17 and administer the medication but it had not been administered.. -The DOHS had been attempting to get a Home Health nurse to administer the medication but had not been successful. -The DOHS had called earlier that day and arranged for Resident #2 to receive the Vitamin B12 injection from the Home Health nurse on 11/9/17. Attempted telephone interview with Resident #2's physician on 11/7/17 at 11:10am was not successful. B. Review of Resident #5's current FL2 dated 4/13/17 revealed: -Diagnoses included failure to thrive and history of hypertension. -There were physician orders for a lidocaine topical patch 5% daily and remove at bedtime.	D 358		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL011151	A. BUILDING: _____ B. WING _____	R 11/09/2017

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
HEATHER GLEN AT ARDENWOODS	103 APPLACHIAN BLVD ARDEN, NC 28704

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D 358	Continued From page 48 Observations of medications on hand available for administration for Resident #5 on 11/7/18 at 3:00pm revealed there were no lidocaine 5% patches. Interview with the Medication Aide on 11/7/18 at 3:00pm revealed: -Resident #5 wore the patch on her left hip because she had a hip fracture in the past. -Resident #5 ran out of lidocaine patches and had been reordered. Review of the November Medication Administration Records 2017 revealed: -There was an entry for lidocaine 5% patch every day for pain and remove old patch at 9:00pm. -Medication aides documented on 11/2, 11/3, 11/4, 11/6 that lidocaine patch was "on order from pharmacy." Interview with Resident #5's family member on 11/9/17 at 2:20pm revealed: -Resident #5 wore the lidocaine patch for left hip pain. -He was not aware lidocaine patches were not available recently. Interview with the facility nurse on 11/9/17 at 11:15am revealed: -The pharmacy said they sent lidocaine patches on 1027/17 but she had not seen any. -She did not document the pharmacy contact. -She was going to request Resident #5's physician discontinue the lidocaine patches because she did not think Resident #5 was currently experiencing pain in that hip.	D 358		

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NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
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D912	Continued From page 49	D912		
D912	G.S. 131D-21(2) Declaration of Residents' Rights G.S. 131D-21 Declaration of Residents' Rights Every resident shall have the following rights: 2. To receive care and services which are adequate, appropriate, and in compliance with relevant federal and state laws and rules and regulations. This Rule is not met as evidenced by: Based on observations, interviews, and record reviews, the facility failed to assure all residents received care and services which were adequate, appropriate, and in compliance with relevant federal and state laws and rules and regulations related to nutrition and food service. The findings are: A. Based on observations, interviews, and record reviews, the facility failed to assure matching therapeutic menus were available for the guidance of food service staff for 6 of 6 Residents sampled as evidenced by no Vegetarian menus for Resident #6, no Mechanical Soft menus for Residents #3 and #4, no Heart Healthy Diabetic Consistent Carbohydrate Mechanical Soft menus for Resident #5, and no complete Controlled Carbohydrate menus for Residents #1 and #2. [Refer to Tag 296, 10A NCAC 13F .0904(c) Nutrition And Food Service (Type B Violation).] B. Based on observations, interviews, and record reviews, it could not be determined the facility served therapeutic diets as ordered for 6 of 6 Residents sampled as evidenced by no therapeutic menus available as guidance for Resident #6 with a Vegetarian diet order, no	D912		

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HEATHER GLEN AT ARDENWOODS	103 APPLACHIAN BLVD ARDEN, NC 28704

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D912	Continued From page 50 Mechanical Soft menus for Residents #3 and #4, no Heart Healthy Diabetic Consistent Carbohydrate Mechanical Soft diet for Resident #5, and no complete Controlled Carbohydrate menus for Residents #1 and #2. [Refer to Tag 310, 10A NCAC 13F .0904(e)(4) Nutrition And Food Service (Type B Violation).]	D912		