

Division of Health Service Regulation

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| STATEMENT OF DEFICIENCIES<br>AND PLAN OF CORRECTION                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | (X1) PROVIDER/SUPPLIER/CLIA<br>IDENTIFICATION NUMBER:<br><br><b>HAL036034</b>                     | (X2) MULTIPLE CONSTRUCTION<br>A. BUILDING: _____<br><br>B. WING: _____                                                   | (X3) DATE SURVEY<br>COMPLETED<br><br><b>R</b><br><b>03/15/2018</b> |
| NAME OF PROVIDER OR SUPPLIER<br><br><b>SOMERSET COURT OF CHERRYVILLE</b> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | STREET ADDRESS, CITY, STATE, ZIP CODE<br><b>401 WEST ACADEMY STREET<br/>CHERRYVILLE, NC 28021</b> |                                                                                                                          |                                                                    |
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| D 000                                                                    | Initial Comments<br><br>The Adult Care Licensure Section conducted an annual and follow-up survey on March 14, 2018 and March 15, 2018.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | D 000                                                                                             |                                                                                                                          |                                                                    |
| D 310                                                                    | 10A NCAC 13F .0904(e)(4) Nutrition and Food Service<br><br>10A NCAC 13F .0904 Nutrition and Food Service (e) Therapeutic Diets in Adult Care Homes:<br>(4) All therapeutic diets, including nutritional supplements and thickened liquids, shall be served as ordered by the resident's physician.<br><br>This Rule is not met as evidenced by:<br>Based on observations, record reviews and interviews, the facility failed to assure therapeutic diets were served as ordered for 2 of 3 sampled residents with a physician order for a mechanical soft diet (Resident #4) and an all ground diet (Resident #5).<br><br>The findings are:<br><br>1. Review of Resident #4's current FL2 dated 4/26/17 revealed diagnoses included aphasia and cerebral infarction.<br><br>Review of Resident #4's Physician's Diet Order sheet dated 1/18/18 revealed:<br>-A physician's order for a mechanical soft diet.<br>-Documentation indicated this modification is ordered for residents who have difficulty chewing, but are able to tolerate more texture than a pureed diet offers. This diet is modified in consistency only. This modification can be limited to a portion of the meal, such as "meats only", or can apply to the "entire meal". | D 310                                                                                             |                                                                                                                          |                                                                    |

Division of Health Service Regulation

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

TITLE

(X6) DATE

Division of Health Service Regulation

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| D 310                                                                    | <p>Continued From page 1</p> <p>-The "entire meal" entry was checked.</p> <p>Review of the therapeutic diet list posted in the kitchen on 3/14/18 revealed Resident #4 was to be served an all mechanical soft diet.</p> <p>Review of the regular diet menu for breakfast on 3/15/18 revealed residents were to be served 1 slice of bacon.</p> <p>Review of the therapeutic diet menu for breakfast on 3/15/18 revealed residents on an all mechanical soft diet were to substitute ground sausage for bacon.</p> <p>Observations on 3/15/18 from 8:07am to 8:09am of the breakfast meal service revealed:<br/>-Residents were being served by two Personal Care Aides (PCA).<br/>-Resident #4 was served 1 slice of ground bacon.<br/>-Directed by a surveyor, a PCA removed Resident #4's plate before he was able to eat the bacon.<br/>-Resident #4 received a new plate of food that included ground sausage.<br/>-Resident #4 ate his breakfast meal without difficulty.</p> <p>Based on record review and observations on 3/14-15/18, Resident #4 was determined not to be interviewable.</p> <p>Interview on 3/15/18 at 8:50am with the Dietary Services Manager revealed she was aware Resident #4 was on a mechanical soft diet.</p> <p>Telephone interview on 3/15/18 at 1:10pm with Resident #4's Power of Attorney (POA) revealed:<br/>-He was aware Resident #4 was on a mechanical soft diet due to the "appearance" was different than other plates of food.</p> | D 310                                                                                             |                                                                                                                          |                                                                    |

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| D 310                                                                    | <p>Continued From page 2</p> <p>-He had no concerns with Resident #4 being served bacon.</p> <p>Telephone interview on 3/15/18 at 2:25pm with staff from Resident #4's physician's office revealed:</p> <p>-Resident #4's physician was aware the resident was on a mechanical soft diet.</p> <p>-Resident #4 had had a stroke and was placed on the mechanical soft diet.</p> <p>-The physician had no concerns that Resident #4 had received bacon at the breakfast meal.</p> <p>Refer to interview on 3/15/18 at 8:50am with the Dietary Services Manager.</p> <p>Refer to interview on 3/15/18 at 11:10am with the Administrator.</p> <p>2. Review of Resident #5's current FL2 dated 4/8/17 revealed diagnoses included hypertension, dementia, depression, osteoarthritis and hyperlipidemia.</p> <p>Review of Resident #5's Physician's Diet Order sheet dated 1/4/18 revealed:</p> <p>-A physician's order for a ground diet.</p> <p>-The "entire meal" entry was checked.</p> <p>Review of the therapeutic diet list posted in the kitchen on 3/14/18 revealed Resident #5 was to be served an all ground diet.</p> <p>Review of the regular diet menu for breakfast on 3/15/18 revealed residents were to be served 1 slice of bacon.</p> <p>Review of the therapeutic diet menu for breakfast on 3/15/18 revealed residents on an all ground diet were to substitute chopped sausage for</p> | D 310                                                                                             |                                                                                                                          |                                                                    |

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| D 310                                                                    | <p>Continued From page 3</p> <p>bacon.</p> <p>Observations on 3/15/18 from 8:05am to 8:07am of the breakfast meal service revealed:</p> <ul style="list-style-type: none"> <li>-Residents were being served by two PCA's.</li> <li>-Resident #5 was served 1 slice of chopped bacon.</li> <li>-Directed by a surveyor, a PCA removed Resident #5's plate before she was able to eat the bacon.</li> <li>-Resident #5 received a new plate of food that included chopped sausage.</li> <li>-Resident #5 ate her breakfast meal without difficulty.</li> </ul> <p>Based on record review and observations on 3/14-15/18, Resident #5 was determined not to be interviewable.</p> <p>Interview on 3/15/18 at 8:50am with the Dietary Services Manager revealed she was aware Resident #5 was on an all ground diet.</p> <p>Attempted interview on 3/15/18 with Resident #5's POA was unsuccessful.</p> <p>Attempted interview on 3/15/18 with Resident #5's physician was unsuccessful.</p> <p>Refer to interview on 3/15/18 at 8:50am with the Dining Services Manager.</p> <p>Refer to interview on 3/15/18 at 11:10am with the Administrator.</p> <p>Interview on 3/15/18 at 8:50am with the Dietary Services Manager revealed:</p> <ul style="list-style-type: none"> <li>-She "went by the menu book" when preparing and serving meals, "it tells me what to cook for each meal".</li> <li>-She looked over the menu's 2-3 days in advance</li> </ul> | D 310                                                                                             |                                                                                                                          |                                                                    |

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| D 310                                                                    | <p>Continued From page 4</p> <p>to make sure there was enough meat products to serve for each meal.</p> <p>-She had looked at today's (3/15/18) breakfast menu "yesterday" and observed bacon was listed on the breakfast menu.</p> <p>-She had looked at the regular diet menu only and had not looked at the therapeutic diet menu.</p> <p>-She was not aware the therapeutic menu indicated that residents on a mechanical soft diet were to be served sausage instead of bacon.</p> <p>-She had received training on therapeutic diets in 2017 and the training had not indicated to substitute sausage for bacon.</p> <p>-It was still my fault for not looking at the therapeutic menu."</p> <p>-I look at the therapeutic menu, just not all the time."</p> <p>Interview on 3/15/18 at 11:10am with the Administrator revealed:</p> <p>-The Dietary Services Manager was responsible for ensuring residents received foods appropriate to their diets.</p> <p>-She was responsible for providing oversight to the Dietary Services Manager.</p> <p>-The dietary staff had received training in November 2017 on therapeutic diets.</p> <p>-She expected the dietary staff to follow the therapeutic menu.</p> <p>-At least at one meal per day, she "spent time in the dining room" visiting with residents.</p> <p>-She would "inservice" the dietary staff on following the therapeutic menu.</p> | D 310                                                                                             |                                                                                                                          |                                                                    |