STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	FCL074050	A. BUILDING: _____ B. WING _____	05/07/2021

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
L & C FAMILY CARE HOME	6347 FAIRWAY DRIVE GRIFTON, NC 28530

(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
C 000	Initial Comments The Adult Care Licensure Section conducted an annual survey on 05/07/21.	C 000		
C 249	10A NCAC 13G .0902(c)(3)(4) Health Care 10A NCAC 13G .0902 Health Care (c) The facility shall assure documentation of the following in the resident's record: (3) written procedures, treatments or orders from a physician or other licensed health professional; and (4) implementation of procedures, treatments or orders specified in Subparagraph (c)(3) of this Rule. This Rule is not met as evidenced by: Based on record reviews and interviews the facility failed to implement physician orders for 1 of 3 residents sampled (Resident #1) for monthly blood pressure (BP) checks. The findings are: 1. Review of Resident #1's current FL-2 dated 03/03/21 revealed: -Diagnoses included new cognitive vascular Type C behavior, mild hypernatremia, normocytic and high blood pressure (HTN) and gastroesophageal reflux disease (GERD) . -There was an order for monthly FSBS. Review of Resident #1;s BP log for March 20221 revelaed there was BP checks documented daily from March 1 -31, 2021. Review of Resident #1's BP log for April 2021 revealed: -There was one BP check documented on	C 249		

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C 249	Continued From page 1 04/26/21 of 120/83. -Resident #1's 04/26/21 BP check was not written on the BP log for April 2021. -Resident #1's 04/26/21 BP check was written on another sheet of paper with other residents' BP checks. Review of Resident #1's BP log for May 2021 revealed there was no BP checks for May 2021. Interview with Resident #1 on 05/07/21 at 11:30am revealed: -He had high blood pressure. -He did not know if staff had checked his BP. Interview with the Supervisor in Charge (SIC) on 05/07/21 at 2:03pm revealed: -She had taken Resident #1's BP. -She had written Resident #1's BP on another piece of paper instead on the April 2021 BP log. -She had checked Resident's #1 BP on 04/26/21. -She did not know why Resident #'1 BP had not been documented for May 2021. -She knew Resident #1 had an order for monthly BP checks. Interview with the Administrator on 05/07/21 at 2:17pm revealed: -Resident #1 had a BP log sheet kept in his records to document each BP check. -Resident #1's BP was to be check monthly and documented. -The SICs was responsible for checking Resident #1's BP monthly and document the reading on the BP log. -She did not know why Resident #1's BP had not been checked in May 2021. -She completed resident record audits biweekly. -If there were issues or concern with the residents' record she had informed the SIC.	C 249		

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C 249	Continued From page 2 -She did not know when the last time she had completed an audit on the residents' record. -She had faxed the FL2 to the pharmacy on 05/07/21 to add the monthly BP to Resident's Medication Administration Record (MAR). Attempted telephone interview with Resident #1's primary care provider on 05/07/21 at 3:05pm was unsuccessful.	C 249		
C 288	10A NCAC 13G .0905(a) Activities Program 10A NCAC 13G .0905 Activities Program (a) Each family care home shall develop a program of activities designed to promote the residents' active involvement with each other, their families, and the community. This Rule is not met as evidenced by: Based on record reviews and observations the facility failed to ensure residents were offered activities designed to promote the residents' active involvement. The findings are: Review of the activities calendar posted in the foyer area on 05/07/21 at 9:57am revealed: -There was an activities calendar posted for September 2020. -The September 2020 activities calendar had a written notice "All activities are subject to change". -There was not an activities calendar posted for May 2021. Observation of activity supply cabinet on 05/07/21 at 10:52am revealed the facility had few activity	C 288		

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C 288	Continued From page 3 supplies. Observation of activities on 05/07/21 from 9:57am to 3:30pm revealed: -No activities had been offered to the residents. -Three residents were sitting in the day room watching TV. -Staff had not facilitated activities. Interview with a resident on 05/07/21 at 10:00am revealed: -There were not activities offered to the residents. -"Every now and then" residents went out on an outing. -He liked to play cards with the other residents. -The last activity was held about two weeks ago. Interview with a second a resident on 05/07/21 at 10:05am revealed: -There were no group activities offered. -He liked to play card games, but they had not been offered. -Sometimes he would ask to play card games. -He did not know when the last time an activity was held. Interview with a Supervisor in Charge (SIC) on 05/07/21 at 10:57am revealed: -She facilitated activities. -She offered play card games and bingo. -Most of the residents did not want to do activities. -She did not always offer activities to the residents. -She did not always follow the posted activities calendar. -She had created the activities calendar and forgot to change the activities calendar month. -She earsed September off of the acitivites calendar and wrote May on the activities calander	C 288		

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C 288	Continued From page 4 and did not change the days to match the May 2021 activites calendar. -She had created the activities calendar in the past. Interview with the Administrator on 05/07/21 at 10:49am revealed: -Some the of residents did not want to participate in activities. -Activities were offered to the residents daily. -She had been behind on updating the activities calendar. -She was responsible for updating the monthly activities calendar. -The SIC had updated the 2021 May activities calendar. -Residents went out on outings at least three times a week. -At least 12 to 15 hours of activities were scheduled weekly for the residents. -The staff were responsible for facilitating activities with the residents. -The had kept an activities log but could not find activities log. -She did not have an Activities Director.	C 288		