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FORM APPROVED

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL064008	A. BUILDING: _____ B. WING _____	09/30/2021

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
BROOKDALE ROCKY MOUNT	650 GOLDROCK ROAD ROCKY MOUNT, NC 27804

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D 000	Initial Comments The Adult Care Licensure Section conducted an annual survey on 09/29/21-09/30/21.	D 000	HAL 064008 BQGP11 (Brookdale Rocky Mount) This Plan of Correction is not to be construed as an admission of our agreement with the findings and conclusions in the Statement of Deficiencies, or any related sanction or fine. Rather, it is submitted as confirmation of our ongoing efforts to comply with statutory and regulatory requirements. In this document, we have outlined specific actions in response to identified issues. We have not provided a detailed response to each allegation or finding, nor have we identified mitigating factors.	11/15/2021
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: Based on observations, record reviews and interviews, the facility failed to serve therapeutic diets as ordered by the physician for 1 of 3 sampled residents (Resident #2) who had an order for a carbohydrate controlled diet. Review of Resident #2's current FL2 dated 05/04/21 revealed: -Diagnoses included insulin dependent type 2 diabetes and long-term insulin use. -There was an order for fingerstick blood sugar (FSBS) checks before meals and at bedtime. -There was an order for a carbohydrate controlled diet. Review of Resident #2's subsequent primary care provider's (PCP) orders dated 06/23/21 revealed: -There was an order for fingerstick blood sugar (FSBS) checks before meals and at bedtime. -There was an order for a carbohydrate controlled diet.	D 310	**10A NCAC 13F .0904(e)(4) Nutrition and Food Service** The community will ensure therapeutic diets are served as ordered by the physician. The Health and Wellness Director (HWD) or Designee will review records and ensure the correct diets are entered into the Point Click Care (PCC) System.	

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE — TITLE: Executive Director — (X6) DATE: 10/13/2021

STATE FORM 6899 BQGP11 If continuation sheet 1 of 6

Reviewed and acknowledged with revision. 10/13/21 SM

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D 310	Continued From page 1 Review of Resident #2's Licensed Health Professional Support evaluation dated 06/29/21 revealed Resident #2 was on a carbohydrate controlled diet for blood sugar management. Review of Resident #2's electronic medication administration record (eMAR) for July 2021 revealed Resident #2's FSBS results were from 70-314. Review of Resident #2's eMAR for August 2021 revealed Resident #2's FSBS results were from 40-316. Review of Resident #2's eMAR for September 2021 revealed Resident #2's FSBS results were from 50-355. Review of the Nutrition Tracker Report dated 09/02/21 in the facility kitchen revealed Resident #2 had an order for a carbohydrate controlled diet. Review of the diet modification chart for residents with a controlled carbohydrate diet on 09/29/21 revealed the lunch meal was one cup tossed iceberg salad, four ounces honey baked ham, one-half cup steamed green beans, and one slice reduced sugar chocolate mousse layer cake. Observation of Resident #2's lunch meal served on 09/29/21 at 12:21pm revealed Resident #2 was served beet salad, ham, stuffing, green beans, and chocolate cake. Review of the diet modification chart for residents with a controlled carbohydrate diet on 09/30/21 revealed the breakfast meal was three ounces scrambled eggs, one ounce toast, one-half cup	D 310	The HWD/Designee will review the diet list monthly and a current diet list will be posted in the kitchen for the kitchen staff plating food and posted for staff serving food. The Dietary Service Manager (DSM) will verify there is a current Brookdale Dietary Manual present and available in the kitchen. Training will be provided to the DSM and the Dietary Aides (DA) on the use of the dietary manual, spreadsheets and recipe books provided by Brookdale. Staff will be trained on verification of diets prior to service of tray to resident. The Manager in the dining room or the MOD (Manager on Duty) will monitor one meal daily to verify the correct meal is being served based on the menu posted. The Executive Director will monitor one meal weekly to verify therapeutic diets are being served as ordered. The date of correction for this Standard Deficiency will be no later than November 15, 2021. Training of the DSM, DA, and staff will be provided by the Regional Dining Service Pro Tem. Revision made after telephone conversation with the Administrator on 10/13/21 at 11:43am. SM	

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D 310	Continued From page 2 hot cereal, two ounces Canadian bacon, and one cup watermelon. Observation of Resident #2's breakfast meal served on 09/30/21 at 8:32am revealed Resident #2 was served scrambled eggs, two slices of Canadian bacon, fried potatoes, and peaches. Interviews with Resident #2 on 09/29/21 at 9:46am and 3:57pm revealed: -She was diagnosed with diabetes and had an order for insulin. -She was on a diabetic diet. -She was not sure if she was served a diabetic diet. -She "usually" knew what she was supposed to eat. -She did not remember discussing a therapeutic diet with her doctor. Interviews with the cook on 09/29/21 at 11:19am and 3:17pm revealed: -Resident #2 was going to be served noodles in place of the stuffing for the lunch meal. -Resident #2 was not served sugar-free chocolate cake during the lunch meal on 09/29/21. -The medication aide (MA) assisting in the dining room during the lunch meal on 09/29/21 should not have served Resident #2 the chocolate cake. -She asked the MA about Resident #2's FSBS result before serving Resident #2's lunch meal; the MA said Resident #2's FSBS result was "fine." -If Resident #2's FSBS result was "low," she would be served a regular dessert. -If her FSBS result was "high," she would get a sugar-free dessert. -There were three people who cooked the meals for the residents. -There were no therapeutic menus in the kitchen. -Whoever was cooking went by "what's here and	D 310		

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D 310	Continued From page 3 not here" concerning the ingredients used to prepare the meals. -She did whatever the Dietary Manager (DM) instructed her to do regarding the preparation of the residents' meals. -Dietary staff was responsible for preparing and serving the residents' meals according to the ordered diet. Interview with the DM on 09/29/21 at 2:35pm revealed: -Resident #2 was on a carbohydrate controlled diet. -She and the other cooks "spread out" Resident #2's carbohydrates throughout the day. -If Resident #2 received toast with breakfast, she would not be served bread at lunch. -Resident #2 would not receive a roll with the 09/29/21 dinner meal because she was served stuffing at lunch. -Resident #2 was served sugar-free desserts. -Resident #2 was served sugar-free jello with her lunch meal on 09/29/21. -Resident #2 was served sugar-free chocolate cake with her lunch meal on 09/29/21. -The dietary staff asked the MA the results of Resident #2's FSBS checks before serving her meals. -Dietary staff prepared Resident #2's meals based on her FSBS results. -She and the other cook worked 12-hour shifts and knew what Resident #2 had been served at each meal. -The facility menus were online. -There was not a spreadsheet displaying therapeutic diet modifications. Interview with a MA on 09/30/21 at 10:02am revealed: -She or the Health and Wellness Director (HWD)	D 310		

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D 310	Continued From page 4 provided dietary staff copies of the residents' diet orders. -Resident #2 was on a carbohydrate controlled diet. -She routinely told dietary staff the results of Resident #2's FSBS checks before breakfast and lunch so staff would know what to serve Resident #2. Interview with the cook on 09/30/21 at 10:35am revealed: -She did not use the diet modification chart when preparing Resident #2's meals. -She was responsible for not preparing Resident #2's lunch meal as ordered on 09/29/21. -She knew Resident #2 was a diabetic, but she did not know she could not have certain foods. -She served Resident #2's meals based on Resident #2's FSBS results. -She thought Resident #2's diet allowed her to be served stuffing with the lunch meal. -Resident #2 was served a "little piece" of chocolate cake on 09/29/21 during the lunch meal. -She did not know the dietary modification charts were in the kitchen. -No one had trained her to use the dietary modification charts. Telephone interview with a second MA on 09/30/21 at 11:09am revealed: -She assisted with serving the lunch meal on 09/29/21. -A personal care aide (PCA) instructed her not to serve the chocolate cake to Resident #2. -She thought it was "okay" to serve Resident #2 a small piece of cake. -She did not know who served the chocolate cake to Resident #2.	D 310		

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D 310	Continued From page 5 Interview with the HWD on 09/30/21 at 11:37am revealed: -The MA was responsible for providing copies of the diet orders to her. -The MA entered the diet order into the residents' electronic records. -She printed a diet order sheet monthly and provided it to dietary staff. -She expected the diet orders to be carried out. -She routinely observed one meal each day. -Resident #2 should have been served the right amount of carbohydrates and the appropriate meal substitutions. -It was her responsibility to make sure dietary staff carried out the diet orders. Interview with the Administrator on 09/30/21 at 12:01pm revealed: -Dietary orders were provided to dietary staff by the HWD or the Resident Care Coordinator (RCC). -He expected dietary staff to know each resident's diet and the list of options available for each diet. -There was a list of the residents' diets near the serving area in the kitchen. -There was a notebook and a chart in the kitchen with information on the diets served at the facility. -Dietary staff were aware of the resources that were available to them. -He was concerned that Resident #2 was not being served meals as ordered by her PCP and as listed on the diet modification chart. -The DM was responsible for meals being served as ordered. Attempted telephone interview with Resident #2's PCP on 09/30/21 at 9:25am was not successful.	D 310		