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
	FCL051038	A. BUILDING: _____ _____ B. WING _____	R 09/23/2022

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
ULTIMATE FAMILY CARE HOME	817 SOUTH SECOND STREET SMITHFIELD, NC 27577

(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 and follow up survey on September 22, 2022 and September 23, 2022.	C 000		
C 246	10A NCAC 13G .0902(b) Health Care 10A NCAC 13G .0902 Health Care (b) The facility shall assure referral and follow-up to meet the routine and acute health care needs of residents. This Rule is not met as evidenced by: Based on interviews and record reviews, the facility failed to ensure health care follow-up for 1 of 3 sampled residents (#3) related to attending a referral appointment with a pulmonologist. The findings are: Review of Resident #3's most current FL-2 dated 01/20/22 revealed diagnoses included asthma, chronic obstructive pulmonary disease, gastro-esophageal reflux disease, vitamin D deficiency, essential hypertension, psychotic disorder, and mild developmental delay disorder. Review of a visit summary from Resident #3's Primary Care Provider (PCP) dated 10/18/21 revealed the resident was referred to the Pulmonologist. Review of another visit summary from Resident #3's PCP dated 06/13/22 revealed the resident was referred again to the Pulmonologist. Review of Resident #3's progress notes and medical care provider visit notes revealed no documentation that Resident #3 had followed up	C 246	The staff and SIC were inserviced on how to ensure that resident's provider referral follow up process is completed and documented. The Staff and SIC were retrained on communication and documentation process. They were inserviced on how to write down appointments on the facility calendar, report to the SIC and request for providers visit encounter and file in the resident's chart.	10\20\22 and on gong.

Division of Health Service Regulation

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE: Lillian Okoro-Ezuma

TITLE: Administrator

(X6) DATE: 10\24\22

Received via email 10/24/2022. -HF

Reviewed and Acknowledged with addendum 11/18/2022. -HF

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C 246	Continued From page 1 with the pulmonologist between 10/18/21 and 06/13/22. Continued review of Resident #3's progress notes and medical care provider notes revealed: -The resident had a hospital stay from 01/05/22 through 02/11/22 for respiratory failure. -On 04/07/22, Resident #3 was sent to the hospital from the clinic for dyspnea. Interview with the Supervisor-in-Charge (SIC) on 09/22/22 at 12:25pm revealed: -When care staff transported residents to physician appointments, the staff were supposed to receive documented information for the appointment which would be in the resident's record. -She would check on the appointment today (09/23/22) with the pulmonologist provider for the resident. Telephone interview with the medical assistant at the pulmonologist office on 09/22/22 at 2:55pm revealed: -Resident #3 was seen at the lung clinic initially on 08/12/20. -The only other visit for Resident #3 at the lung clinic was dated 06/16/22. -A new referral was received from the PCP office on 10/19/21. -An appointment was scheduled by the lung clinic for 11/02/21. -The resident did not show up for the appointment. -She did not know why the appointment was missed. Interview with the Pulmonologist on 09/23/22 at 11:30am revealed:	C 246	SIC will follow up after residents appointment to ensure that referral to other care providers process is accomplished and documented. Adminisrtator or designated staff will review records every quater to ensure complaince. Addendum per telephone conversation with Lillian Okoro-Kpoma, Administrator on 11/18/2022 at 10:45 Am: - Within 72 hours of appointment, the Supervisor-in-Charge will follow-up with the Provider to ensure any appointments recommended are scheduled. - Date of completion will be 11/18/2022. - H. Sorto, Jr Licensure Consultant	

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C 246	Continued From page 2 -Resident #3 did not show up for the 11/02/21 scheduled appointment. -If the resident showed up or was late for the appointment, the resident would be seen. -The resident was admitted to the hospital in January 2022 for pneumonia and there was mention of aspiration and seizure activity. -A bronchoscopy was performed during the hospital stay and the resident was found to have no right lung. Interview with Resident #3 on 09/23/22 at 12:45pm revealed: -Staff transported him to doctor appointments. -He saw a lung doctor. -He did not remember if he had missed any doctor appointments. -He remembered going to the lung doctor about one month ago. -He thought he went to the lung doctor before he was hospitalized. Attempted telephone interviews with Resident #3's primary care provider on 09/22/22 at 3:45pm and 09/23/22 at 10:17am were unsuccessful.	C 246		

ULTIMATE FAMILY CARE HOME INC.
817 SOUTH SECOND STREET
SMITHFIELD, NC 27577
Phone: (919) 880-3144. Fax: (919) 550-2163

October 24, 2022

Dear Ms. Forte,

Please see attached plan of correction for the deficiencies noted from the Annual Survey completed on September 23, 2022 at Ultimate Family Care Home FCL051038.

Please feel free to email or call me at 919-880-3144 with any questions.

Sincerely,

Lillian Ezuma

Digitally signed by Lillian Ezuma
DN: cn=Lillian Ezuma, o=Ultimate Family Care Home Inc., ou=Admin, email=ultimatehealthcare1@gmail.com, c=US
Date: 2022.10.24 08:14:53 -04'00'

Lillian Okoro-Ezuma
Administrator
Ultimate Family Care Home Inc.

Forte, Hope

From: UFCH Admin <ultimatehealthcare1@gmail.com>
Sent: Monday, October 24, 2022 8:17 AM
To: Forte, Hope
Subject: [External] PLAN OF CARE FCL 051038
Attachments: 817 POC 2022 Survey.pdf; 817 LH POC.pdf

October 24, 2022

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Sincerely,

Lillian Okoro-Ezuma
Administrator
Ultimate Family Care Home Inc.