

Division of Health Service Regulation

PRINTED: 11/28/2022
FORM APPROVEDSTATEMENT OF DEFICIENCIES
AND PLAN OF CORRECTION(X1) PROVIDER/SUPPLIER/CLIA
IDENTIFICATION NUMBER:

FCL078086

(X2) MULTIPLE CONSTRUCTION
A. BUILDING:

B. WING:

(X3) DATE SURVEY
COMPLETED

11/04/2022

NAME OF PROVIDER OR SUPPLIER

KINGS ASSISTED LIVING

STREET ADDRESS, CITY, STATE, ZIP CODE

1241 GOINS ROAD
PETERBORO, NC 28372(X4) ID
PREFIX
TAGSUMMARY STATEMENT OF DEFICIENCIES
(EACH DEFICIENCY MUST BE PRECEDED BY FULL
REGULATORY OR LSC IDENTIFYING INFORMATION)ID
PREFIX
TAGPROVIDER'S PLAN OF CORRECTION
(EACH CORRECTIVE ACTION SHOULD BE
CROSS-REFERENCED TO THE APPROPRIATE
DEFICIENCY)(X5)
COMPLETE
DATE

C 000

Initial Comments

C 000

The Adult Care Licensure Section conducted an
annual survey on November 3-4, 2022.

C 246

10A NCAC 13G .0902(b) Health Care

C 246

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:
TYPE B VIOLATIONBased on observations, interviews, and record
reviews, the facility failed to meet the acute health
care needs for 1 of 3 residents (#2) sampled
related to right ear pain and a referral to a
specialist for evaluation.

The findings are:

Review of Resident #2's current FL-2 dated
03/17/22 revealed diagnoses included chronic
obstructive pulmonary disease, coronary artery
disease, gout, type 2 diabetes, schizophrenia,
asthma, and tumor of right ear.Review of a nurse practitioner (NP) visit
encounter for Resident #2 dated 03/17/22
revealed:

- Review of an old FL-2 revealed Resident #2 had
a history of tympanoplasty to the left ear a history
of surgery on his right ear to remove a tumor.
- There was no ear, nose, and throat (ENT)
records available in Resident #2's record.
- The resident complained of increased hearing
loss in both ears on 03/17/22.
- The NP's examination of Resident #2's right ear
revealed visible scar tissue to the tympanic

Division of Health Service Regulation

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

STATE FORM

TITLE

(X6) DATE

Kerri L. Jacobs

1-9-23

Administrator

237

D07211

If continuation sheet 1 of 5

Received via email 01/13/2023.

Reviewed and Acknowledged 01/20/2023. - M. Staton
with addendum

Division of Health Service Regulation

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STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: FCL078086	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 11/04/2022
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NAME OF PROVIDER OR SUPPLIER KIMS ASSISTED LIVING	STREET ADDRESS, CITY, STATE, ZIP CODE 1241 GOINS ROAD PEMBROKE, NC 28572
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(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCY(IES) (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
G246	Continued From page 1 membrane. -The NP's examination of Resident #2's left ear revealed a tympanic membrane perforation. -An "ENT referral to evaluate and treat as indicated". -Follow-up in 2-3 months. Review of a NP visit encounter for Resident #2 dated 09/23/22 revealed: -Referral to ENT given at last visit. -Resident #2 reported he had not yet been seen by ENT. -There were no ENT records available in Resident #2's record. -The resident complained of increased hearing loss in both ears on 09/23/22. -A second "ENT referral to evaluate and treat as indicated". -Follow-up in 2-3 months. Interview with Resident #2 on 11/03/22 at 2:55pm revealed: -He had not been to an ear doctor. -He remembered it had "been a while" since he had been to an ear doctor for evaluation. -He could not hear out of his right ear. -His ear felt "stopped up all the time". -The NP told him the Administrator was supposed to make an appointment for his ears to be evaluated by the ENT. -His left ear was "stopped up too and drains", and "It's got infection". -His right ear ached, was hurting a little bit now, and felt like the side of his head was sore. -He could hear some out of the left ear. -He told the Personal Care Aide (named FGA) about his ear. Interview with the named FGA on 11/03/22 at 3:05pm revealed:	G246	Administrator, SIC & other staff members will review Dr's orders together to ensure any changes or referrals that needs to be made. One staff member _____ will keep a Journal of all appointments that are made. Administrator has purchased a Erase board to document any appts for the following month. Administrator	11/23

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STATEMENT OF DEFICIENCIES
AND PLAN OF CORRECTION

(C1) PROVIDER/SUPPLIER/CLIA
IDENTIFICATION NUMBER:

CLIA NUMBER:

(X2) MULTIPLE CONSTRUCTION

A. BUILDING: _____

(X3) DATE SURVEY
COMPLETED

FC1078086

B. WING: _____

11/04/2022

NAME OF PROVIDER OR SUPPLIER

STREET ADDRESS, CITY, STATE, ZIP CODE

KUTY'S ASSISTED LIVING

1241 GOINS ROAD

FEMBOKE, NC 28372

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(X5)
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C246

Continued From page 2

- He knew Resident #2's ear was draining when the resident would put a cotton ball in his ear.
- Resident #2 would say his ear drained when he laid down.
- He talked to Resident #2 about his ear draining and having a cotton ball in his ear on 11/11/22.
- He told Resident #2 it looked like the cotton ball was "down in his ear".
- The only thing Resident #2 said to him was that his ear was draining.
- He checked Resident #2's ears.
- He "could only see a big hole, it looks clean in his ear canal".
- When he checked Resident #2's ear, he pulled the earlobe back and used a flashlight.
- He had never transported Resident #2 to an ENT doctor.

Interview with the Administrator on 11/03/22 at 12:45pm revealed:

- She was responsible for reviewing physician visit reports.
- She filed documents in the resident records.
- She "probably" reviewed resident records every 2-3 months.
- She only reviewed resident records if the Department of Social Services came to the facility and needed something from the record that she would have to find.

Interviews with the Administrator on 11/03/22 at between 2:20pm and 3:04pm revealed:

- She did not think Resident #2 had been to see the ENT doctor.
- She could not recall the facility staff transporting Resident #2 to the ENT doctor.
- If Resident #2 had been to the ENT doctor, either she or one of her staff would have transported the resident to the ENT doctor's office.

C246

and staff will
look upon board
everyday.

1-9-23

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KRW'S ASSISTED LIVING

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PEMBROKE, NC 28372

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C246

Continued From page 3

-She remembered Resident #2 going to the ENT doctor in 2019 after having ear surgery at a hospital.
-She guessed she had overlooked the ENT referral for Resident #2.

Telephone interview with the NP for Resident #2 on 11/04/22 at 8:55am revealed:

-She did not have any knowledge of the ENT referral being completed.
-The Administrator was responsible to follow the NP's order and schedule the ENT appointment.
-Resident #2 has a history of having a tumor in the right ear and a perforated eardrum in the left ear.
-The ENT doctor's appointment was needed.
-She saw Resident #2 on 03/17/22 and the resident complained of ear pain.
-She saw Resident #2 again on 08/23/22 and the resident was still complaining of ear pain and increased hearing loss in both ears.
-Delayed treatment was not good.
-Resident #2 required an evaluation from a specialist to provide additional treatment.
-Without Resident #2 being evaluated, she did not know what the increased hearing loss was a result of.
-She talked to the Administrator "extensively" in June 2022 and left the facility with the impression that the Administrator was going to follow up and get the ENT referral done.

Interview with the Administrator on 11/04/22 at 11:15am revealed:

-She had just finished scheduling an ENT appointment for Resident #2 at a local ENT office for 12/13/22.
-The ENT doctor that Resident #2 used to attend was no longer in business.

C246

Division of Health Service Regulation
STATE FORM

1522

007241

If continuation sheet 4 of 8

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STATEMENT OF DEFICIENCIES
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G249

Continued From page 4

The Administrator failed to schedule an ENT appointment, after two referral requests were made by the Nurse Practitioner for Resident #2, who had a history of a tumor removed from his right ear, complaints of pain, and increased hearing loss. This failure resulted in a delay of treatment and complaints of continued pain, increased hearing loss, and ear drainage which was detrimental to the health of Resident #2 and constitutes a Type B Violation.

The facility provided a plan of protection in accordance with G.S. 131D-94 on 11/04/22 for this violation.

CORRECTION DATE FOR THIS TYPE B
VIOLATION SHALL NOT EXCEED December 19,
2022.

G245

Administrator
will make sure that
all referrals are
follow-up and
DL appointments
will be kept when
scheduled.

1-9-23

Addendum per telephone
conversation with
Kimberly Jacobs, Administrator
on January 20, 2023:
- The date of completion
will be December 19, 2022.
H. Forto, RN
Licensure Consultant

Forte, Hope

From: Dials Family care <dialsfamilyhomecare2021@gmail.com>
Sent: Monday, January 9, 2023 4:19 PM
To: Forte, Hope
Subject: [External] Scanned image from Dials Family Home Care
Attachments: Dials Family care_20230109_161851.pdf

CAUTION: External email. Do not click links or open attachments unless you verify. Send all suspicious email as an attachment to Report Spam.<mailto:report.spam@nc.gov>

Reply to: Dials Family care <dialsfamilyhomecare2021@gmail.com>
Device Name: Dials Family Home Care
Device Model: MX-B476W
Location: Front Office

File Format: PDF MMR(G4)
Resolution: 200dpi x 200dpi

Attached file is scanned image in PDF format.

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Forte, Hope

From: Dials Family care <dialsfamilyhomecare2021@gmail.com>
Sent: Friday, January 13, 2023 4:02 PM
To: Forte, Hope
Subject: [External] Scanned image from Dials Family Home Care
Attachments: Dials Family care_20230113_160152.pdf

CAUTION: External email. Do not click links or open attachments unless you verify. Send all suspicious email as an attachment to Report Spam.<mailto:report.spam@nc.gov>

Reply to: Dials Family care <dialsfamilyhomecare2021@gmail.com>
Device Name: Dials Family Home Care
Device Model: MX-B476W
Location: Front Office

File Format: PDF MMR(G4)
Resolution: 200dpi x 200dpi

Attached file is scanned image in PDF format.
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Forte, Hope

From: Kimberly Jacobs <mamakj73@gmail.com>
Sent: Friday, January 13, 2023 4:03 PM
To: Forte, Hope
Subject: [External]

CAUTION: External email. Do not click links or open attachments unless you verify. Send all suspicious email as an attachment to [Report Spam](#).

Mrs Hope I just resent paper with corrections