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
	HAL014015	A. BUILDING: _____ B. WING _____	R 02/09/2023

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
GRANDVIEW VILLA ASSISTED LIVING	2544 GRANDVIEW CIRCLE SW LENOIR, NC 28645

(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
D 000	Initial Comments The Adult Care Licensure Section and the Caldwell County Department of Social Services conducted an annual and follow-up survey on 02/08/23 and 02/09/23.	D 000	At each admission Facility / Administration each resident shall be tested for Tuberculosis Disease in the compliance with the control measures by the Commission for Health Services. Copies are available by contacting the Department of Health and Human Services. These tuberculosis test are to be given in a 2 step process. The first one is done before or on admission. Tuberculosis test was given 2/9/2023. Second will be given in 2 weeks.	
D 234	10A NCAC 13F .0703(a) Tuberculosis Test, Medical Exam & Immunizatio 10A NCAC 13F .0703 Tuberculosis Test, Medical Examination & Immunizations (a) Upon admission to an adult care home, each resident shall be tested for tuberculosis disease in compliance with the control measures adopted by the Commission for Health Services as specified in 10A NCAC 41A .0205 including subsequent amendments and editions. Copies of the rule are available at no charge by contacting the Department of Health and Human Services, Tuberculosis Control Program, 1902 Mail Service Center, Raleigh, North Carolina 27699-1902. This Rule is not met as evidenced by: Based on record reviews and interviews the facility failed to ensure 2 of 3 sampled residents (#2 & #3) were tested for tuberculosis (TB) in compliance with the control measures adopted by the Commission for Public Health. The findings are: 1. Review of Resident #2's current FL2 dated 08/22/22 revealed diagnoses included alzheimer's dementia with Parkinson's disease, hypertension, diabetes and seizures. Review of Resident #2's record revealed: -She was admitted to the facility on 04/24/12. -There was no documentation TB tests were completed.	D 234		

Division of Health Service Regulation
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE — TITLE — (X6) DATE

Loretta Miller — Administration — 2-23-22

LSB Reviewed + acknowledged
2-27-23

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D 234	Continued From page 1 Interview with the Administrator on 02/09/23 at 8:30am and 1:46pm revealed: -She was responsible for ensuring TB tests were conducted and documentation was maintained in the resident's record. -She thought Resident #2 had TB testing upon admission -She did not know why there was no documentation of Resident #2's TB tests. 2. Review of Resident #3's current FL2 dated 09/12/22 revealed diagnoses included advanced chronic obtructive pulmonary disease (COPD), hypertension, unspecified intellectual, esophagitis, hiatal hernia, hypothyroidism, and coronavirus. Review of Resident #3's record revealed: -He was admitted to the facility on 10/08/18. -There was documentation of a TB test administered on 09/21/18 and read as negative on 09/25/18. -There was no documentation of a second step TB test completed. Interview with the Administrator on 02/09/23 at 8:30am and 1:46pm revealed: -She was responsible for ensuring TB tests were conducted and documentation was maintained in the resident's record. -She thought Resident #3 had a second TB test upon admission. -She did not know why there was no documentation of Resident #3's second TB test.	D 234	TB Test was give 2/9/23. Admin/Facility. Will assure that the resident will be given the TB Test. LM/Admin Administrator, Loretta Miller failed to have TB test in the residents charts. LM will be responsible for assuring this is done	
D 315	10A NCAC 13F .0905 (a & b) Activities Program	D 315		

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D 315	Continued From page 2 10A NCAC 13F .0905 Activities Program (a) Each adult care home shall develop a program of activities designed to promote the residents' active involvement with each other, their families, and the community. (b) The program shall be designed to promote active involvement by all residents but is not to require any individual to participate in any activity against his or her will. If there is a question about a resident's ability to participate in an activity, the resident's physician shall be consulted to obtain a statement regarding the resident's capabilities. This Rule is not met as evidenced by: Based on observations and interviews the facility failed to develop a program of activities that promoted the residents' active involvement. The findings are: Interviews with 3 residents during initial tour on 02/08/23 from 9:21am through 9:36am revealed: -Residents just sit around and don't ever go anywhere. -There was nothing to do at the facility and she would do anything that was available. -To stay busy she just walked around and did what she wanted. Interview with a 4th resident on 02/09/23 at 11:19am revealed: -Bingo was available 1 time a week but nothing else was available otherwise. -He was willing to do anything to pass the time. -Because he was never invited to participate in	D 315	Facility/Admin Each facility shall develope a program of activities to design and promote the resident active involvement with each other, their families and the community. All activities will be designed to let all residents participate. But is not to require any resident in any activity against his/her will. They can refuse. A physician can be consulted about a resident doing the activity.	

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D 315	Continued From page 3 resident counsel he had never had the opportunity to let anyone know what activities he would like to do. Review of the facility's February 2023 activity calendar revealed: -The calendar was posted on a bulletin board in the dining room. -A coloring activity was scheduled on 02/07/23 from 1:00pm to 2:00pm. -A valentine activity was scheduled on 02/08/23 from 9:00am to 10:00am. -Watching a movie was scheduled on 02/08/23 from 2:00pm to 4:00pm. -Playing Bingo was scheduled on 02/09/23 from 9:00am to 10:00am. -A valentine craft was scheduled on 02/09/23 from 1:00pm to 2:00pm. Observations in the facility on 02/08/23 from 8:45am to 4:30pm and 02/09/23 from 8:30am to 1:45pm revealed: -No activities were observed to be offered or conducted. -The coloring activity supplies for the activity scheduled on 02/07/23 were hanging on the Activity Director's (AD) office door. Interview with the Administrator on 02/09/23 at 11:30 am and 1:46pm revealed: -A new AD was hired a month or two ago after the previous one left on 12/23/22. -The AD was responsible for planning and conducting activities on Monday, Tuesday, Thursday and Friday. -Since the AD never worked on Wednesday, another staff was responsible for conducting the planned activity. -All the activities were not conducted this week because the AD was not working her usual	D 315	All facilities are required to have an Activities Director To have activities that are designed to accomodate the resident. The ones that want to participate in the activity. An activity was not done on the day the activity director was off. The administrator Audrey Miller was responsible to see that it would be done.	

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D 315	Continued From page 4 schedule. -Activities were not conducted when the AD was out this week because she forgot all about them when the state surveyors entered the building on 02/08/23. -Other than a few women who did crafts occasionally, residents would not participate in any activities other than bingo. -The new AD had not yet conducted a resident counsel meeting or gathered any activity preferences from residents.	D 315	The activities were not done 2/8/23. The activities director forgot them. The residents has their choice of what activities to attend. The activities Director has not yet had a council meeting to find out what they prefer The Activities Director will have a Council meeting to get the resident preference on activities. Also activities Director will discuss anything that they would like to change or add. A.M. will monitor. LSB 2-27-23	2-13-23 LSB 2-27-23