

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL065036	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED R 01/25/2023
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NAME OF PROVIDER OR SUPPLIER NEW HANOVER HOUSE	STREET ADDRESS, CITY, STATE, ZIP CODE 3915 STEDWICK COURT WILMINGTON, NC 28412
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(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 conducted an annual and follow up survey and complaint investigation on January 24 and 25, 2023.	D 000	Response to cited deficiencies do not constitute an admission or agreement by the facility of the truth of the facts alleged or the conclusions set forth in the Statement of Deficiencies or Corrective Action Report; the Plan of Correction is prepared solely as a matter of compliance with State law.	
D 296	10A NCAC 13F .0904(c)(7) Nutrition And Food Service 10A NCAC 13F .0904 Nutrition And Food Service (c) Menus in Adult Care Homes: (7) The facility shall have a matching therapeutic diet menu for all physician-ordered therapeutic diets for guidance of food service staff. This Rule is not met as evidenced by: Based on observations, interviews and record reviews, the facility failed to ensure a therapeutic menu was available for pureed diets affecting 2 of 2 sampled residents (#3 and #5) who had primary care provider (PCP) orders for pureed foods. The findings are: 1. Review of Resident #3's current FL-2 dated 11/01/22 revealed diagnoses included kyphosis, muscle weakness, polyneuropathy, osteoarthritis, malaise, diarrhea, gait and mobility disorder, hearing loss and cardiac murmur. Review of Resident #3's diet order dated 11/01/22 revealed an order for regular pureed foods. 2. Review of Resident #5's current FL-2 dated 11/11/22 revealed diagnoses included cerebral palsy, hypertrophic pyloric stenosis, gastric ulcer, ileus, abdominal distention, gastro-esophageal reflux disease, heart disease, hyperlipidemia,	D 296	New Hanover House shall have a matching therapeutic diet menu for all physician-ordered therapeutic diets for guidance of food service staff. New Dietary Manager appointed to manage the Dietary Department. Executive Director (ED) in-serviced new Dietary Manager on Menus, recipes, therapeutic diets, and the importance of maintaining matching therapeutic diet menus to assist with the accurate preparation of meals for Residents on therapeutic diets. Dietary Manager (DM) will print weekly menus for Dining Services, ensuring Menus are printed for both Regular and Therapeutic Diets. DM will maintain a recipe binder, which also includes recipes for the Therapeutic Diets to ensure all dietary staff has access to the accurate recipes to prepare Residents' meals correctly.	2/6/23 2/8/23 3/11/23 3/11/23

Division of Health Service Regulation
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

Lisa Ash, ED

TITLE

Executive Director

(X6) DATE

3/14/23

STATE FORM

6899

2RB611

If continuation sheet 1 of 8

Reviewed and acknowledged. 16 March 2023

[Signature]

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D 296	Continued From page 1 adult failure to thrive, hypokalemia, anemia, benign prostate hypertrophy, cerebral transient ischemic attack, anxiety, vitamins B & D deficiency and dry eye syndrome. Review of Resident #5's diet order dated 11/29/22 revealed an order for regular pureed foods. Observation of the week 2 menu dated 10/09/22 posted in the facility's kitchen on 01/24/23 at 2:33pm revealed: -There were meal plans for breakfast, lunch and dinner. -There were no modified or therapeutic menu items listed on the menu. Observation of the undated therapeutic diet list posted in the facility's kitchen revealed Resident #3 and Resident #5 were listed on pureed diets. Interview with the cook on 01/25/23 at 12:45pm revealed: -She had been working at the facility for 90 days. -She had been told to follow the regular menu posted. -She did not know who specifically told her this, it was how she had always done it. Interview with the Dietary Manager on 01/24/23 at 2:22pm revealed: -She started working as the cook in June 2022 and had been the Dietary Manager for one month. -She did not have a therapeutic diet menu. -The week 2 menu was used for regular and therapeutic diets such as pureed foods. -If a regular menu item could not pureed, it was substituted with something that could be or was the right texture.	D 296	ED/ Dietary Manager will ensure that any newly hired Dietary staff receives appropriate training to understand the Residents' menus and recipes, for both Regular and Therapeutic Diets. ED/ DM/ or Designee will complete random checks during meal-times to ensure meals are being prepared correctly, and according to the Menu and Recipe.	3/11/23	3/11/23

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D 296	Continued From page 2 Interview with the Administrator on 01/25/23 at 5:13pm revealed: -The Dietary Manager had a book with therapeutic diets. -The Dietary Manager knew to check the therapeutic diet menu daily for any applicable revisions for pureed foods. -She was responsible for ensuring the therapeutic diet menu was posted for staff use. -She was responsible for ensuring staff were following the therapeutic diet menu for pureed meals. -She visited the kitchen at random times 5 out of 6 days to review the menu for ordering purposes usually. -Staff were expected to ensure residents on therapeutic diets received the same nutrition as everyone else. Upon request on 01/24/23 and 01/25/23, a therapeutic diet menu including pureed diets, was not available for review.	D 296			
D 300	10A NCAC 13F .0904(d)(3)(B) Nutrition And Food Service 10A NCAC 13F .0904 Nutrition And Food Service (d) Food Requirements in Adult Care Homes: (3) Daily menus for regular diets shall include the following: (B) Fruit: Two servings of fruit (one serving equals 6 ounces of juice; ½ cup of raw, canned or cooked fruit; 1 medium-size whole fruit; or ¼ cup dried fruit). One serving shall be a citrus fruit or a single strength juice in which there is 100% of the recommended dietary allowance of vitamin C in each six ounces of juice. The second fruit serving shall be of another variety of fresh, dried or canned fruit.	D 300	New Hanover House shall meet the daily food requirements for regular diets, which includes ensuring the Residents receive 2 servings of fruit. One serving being a citrus fruit or juice in which there is 100% of the RDA of Vitamin C in 6 ounces of juice. The second fruit serving shall be of another variety of fresh, dried or canned fruit. ED in-serviced the DM on the require- 2/8/23 ment to ensure that all residents receive the nutrition outlined on the menus to meet the daily food requirements, even if they are on a therapeutic diet.		

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D 300	Continued From page 3 This Rule is not met as evidenced by: Based on observations, interviews and record reviews, the facility failed to ensure a serving of fruit was provided to 2 of 5 sampled residents (#3 and #5) who had primary care provider (PCP) orders for pureed food. The findings are: 1. Review of Resident #3's current FL-2 dated 11/01/22 revealed diagnoses included kyphosis, muscle weakness, polyneuropathy, osteoarthritis, malaise, diarrhea, gait and mobility disorder, hearing loss and cardiac murmur. Review of Resident #3's diet order dated 11/01/22 revealed an order for regular pureed foods. Based on observations, interviews and record reviews, it was determined Resident #3 was not interviewable. 2. Review of Resident #5's current FL-2 dated 11/11/22 revealed diagnoses included cerebral palsy, hypertrophic pyloric stenosis, gastric ulcer, ileus, abdominal distention, gastro-esophageal reflux disease, heart disease, hyperlipidemia, adult failure to thrive, hypokalemia, anemia, benign prostate hypertrophy, cerebral transient ischemic attack, anxiety, vitamins B & D deficiency and dry eye syndrome. Review of Resident #5's diet order dated 11/29/22 revealed an order for regular pureed foods. Observation of the week 2 menu dated 10/09/22	D 300	DM will ensure all cooks are properly trained to understand the menus as well as appropriate substitutions, to ensure Residents with all diets are receiving the daily Food Requirements. ED/DM/ or Designee will complete random checks during mealtimes, to ensure Resident meals are being served appropriately, including proper nutritional value.	3/11/23 3/11/23	

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D 300	Continued From page 4 posted in the facility's kitchen on 01/24/23 at 2:33pm revealed the breakfast meal for Wednesday included: ½ cup of egg mushroom scramble, 1 hash brown patty, ½ cup of fresh fruit, 6 ounces of juice, 1 slice of toast and 1 cup of milk. Observation of the menu board outside the dining room on 01/25/23 at 7:45am revealed the breakfast menu included: mushroom scramble, hashbrown and fruit. Observation of the undated therapeutic diet list posted in the facility's kitchen revealed Resident #3 and Resident #5 were listed on pureed diets. Observations during the breakfast meal on 01/25/23 from 7:30am to 8:30am revealed: -Residents in the dining room who were served regular diets received the following: scrambled eggs with mushrooms, a hashbrown patty, a small bowl of cubed pears, approximately 4 ounces of orange juice and a cup of water. -Resident #3 and Resident #5 received pureed oatmeal, pureed eggs, approximately 4 ounces of orange juice and a cup of water. -Resident #3 and Resident #5 did not receive pureed pears or a fruit substitute. Interview with the Dietary Manager on 01/25/23 at 7:50am revealed: -Resident #3 and Resident #5 were supposed to have been given applesauce with their breakfast meals. -She forgot to serve the applesauce to both residents. Interview with the Administrator on 01/25/23 at 5:13pm revealed staff were expected to ensure residents on therapeutic diets received the same	D 300			

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D 300	Continued From page 5 nutrition as everyone else.	D 300			
D 304	10A NCAC 13F .0904(d)(3)(F) Nutrition And Food Service 10A NCAC 13F .0904 Nutrition And Food Service (d) Food Requirements in Adult Care Homes: (3) Daily menus for regular diets shall include the following: (F) Cereals and Breads: At least six servings of whole grain or enriched cereal and bread or grain products a day. Examples of one serving are as follows: 1 slice of bread; ½ of a bagel, English muffin or hamburger bun; one 1 ½ -ounce muffin, 1- ounce roll, 2-ounce biscuit or 2-ounce piece of cornbread; ½ cup cooked rice or cereal (e.g., oatmeal or grits); ¾ cup ready-to-eat cereal; or one waffle, pancake or tortilla that is six inches in diameter. Cereals and breads offered as snacks may be included in meeting this requirement. This Rule is not met as evidenced by: Based on observations, interviews and record reviews, the facility failed to ensure a serving of cereal and grains was provided to 2 of 5 sampled residents (#3 and #5) who had primary care provider (PCP) orders for pureed food. The findings are: 1. Review of Resident #3's current FL-2 dated 11/01/22 revealed diagnoses included kyphosis, muscle weakness, polyneuropathy, osteoarthritis, malaise, diarrhea, gait and mobility disorder, hearing loss and cardiac murmur.	D 304	New Hanover House shall ensure that the daily menus for regular diets include at least 6 servings of whole grain or enriched cereal and bread or grain products per day. ED in-serviced the DM on the require- 2/8/23 ment to ensure that all Residents receive the nutrition outlined on the menus to meet the daily food require- ments, even if they are on a thera- peutic diet. DM will ensure all cooks are properly 3/11/23 trained to understand the menus as well as appropriate substitutions, to ensure Residents with all diets are receiving the daily food requirements. ED/DM/ or Designee will complete 3/11/23 random checks during meal-times to ensure Resident meals are being served appropriately, including proper nutritional value.		

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D 304	Continued From page 6 Review of Resident #3's diet order dated 11/01/22 revealed an order for regular pureed foods. Based on observations, interviews and record reviews, it was determined Resident #3 was not interviewable. 2. Review of Resident #5's current FL-2 dated 11/11/22 revealed diagnoses included cerebral palsy, hypertrophic pyloric stenosis, gastric ulcer, ileus, abdominal distention, gastro-esophageal reflux disease, heart disease, hyperlipidemia, adult failure to thrive, hypokalemia, anemia, benign prostate hypertrophy, cerebral transient ischemic attack, anxiety, vitamins B & D deficiency and dry eye syndrome. Review of Resident #5's diet order dated 11/29/22 revealed an order for regular pureed foods. Observation of the week 2 menu dated 10/09/22 posted in the facility's kitchen on 01/24/23 at 2:33pm revealed the lunch meal for Wednesday included: 3 ounces of herb baked chicken, ½ cup of cheesy broccoli brown rice, ½ cup of corn, 1 buttermilk biscuit, 1 cup of beverage choice, ½ cup of peaches. Observation of the menu board outside the dining room on 01/25/23 at 12:01pm revealed the lunch menu included: baked chicken, cheesy broccoli, rice, corn, biscuits and peaches. Observation of the undated therapeutic diet list posted in the facility's kitchen revealed Resident #3 and Resident #5 were listed on pureed diets. Observations during the lunch meal on 01/25/23 from 12:06pm until 12:45pm revealed: -At 12:06pm the cook was preparing pureed	D 304			

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D 304	Continued From page 7 foods. -She pureed the corn with vegetable juices, the broccoli and cheese with vegetable juice and the chicken with broth. -Resident #3 and Resident #5 were served pureed corn, pureed broccoli and cheese, pureed chicken and pureed peaches at 12:30pm. -Resident #5 declined the pureed broccoli. -Neither resident received biscuits or rice. Interview with the cook on 01/25/23 at 12:45pm revealed: -She did not puree any starchy foods because it just turned into pudding. -She had been working at the facility for 90 days. -She had been told to follow the regular menu posted and not to puree starches. -She did not know who specifically told her this, it was how she had always done it. Interview with the Administrator on 01/25/23 at 5:13pm revealed: -The Dietary Manager knew to check the therapeutic diet menu daily for any applicable revisions for pureed foods. -The previous Dietary Manager had trained the cook improperly on preparing pureed foods. -She was responsible for ensuring staff following the therapeutic diet menu for pureed meals. -She visited the kitchen at random times 5 out of 6 days to review the menu for ordering purposes usually. -She did not notice a therapeutic diet menu was not being used for preparing pureed meals. -Staff were expected to ensure residents on therapeutic diets received the same nutrition as everyone else.	D 304			

Washington, Bynithia T

From: New Hanover, ED - Ash, Lisa <director@newhanoverhouse.com>
Sent: Tuesday, March 14, 2023 10:05 AM
To: Washington, Bynithia T
Subject: [External] POC
Attachments: ANNUAL 2023.pdf

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

Good Morning Bynithia!
My apologies for the delay in the POC.
Please find it attached.
If you should need further information please feel free to contact me.

My cell is 910-471-8000

Lisa Ash, NHA, CDP, NCALA | Executive Director | New Hanover House | E: Director@newhanoverhouse.com | P: (910) 632-2671 | F: 910-666-1006