STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	FCL041086	A. BUILDING: _____ B. WING _____	02/28/2023

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
HMF FAMILY CARE HOMES	809 WEST MINNEOLA ROAD GIBSONVILLE, NC 27249

(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	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 referral and follow-up to meet the routine health care needs for 2 of 3 sampled residents (#1 and #3) related to a referral for an appointment with a dermatologist (#1) and a referral with a gastroenterologist (#3). The findings are: 1. Review of Resident #1's current FL-2 dated 08/04/22 revealed diagnoses included psoriasis. Review of Resident #1's after visit report with his primary care provider (PCP) dated 11/17/22 revealed there was an order for a referral with a dermatologist for psoriasis on his elbows. Review of Resident #1's record on 02/28/23 revealed: -There was no documentation an appointment with a dermatologist was scheduled. -There was no documentation of an appointment or a visit with a dermatologist. Telephone interview with the facility's contracted PCP on 02/28/23 at 4:21pm revealed: -The facility was responsible for scheduling follow-up appointments and referrals for	C 246		

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C 246	Continued From page 1	C 246		

residents.
-Resident #1 had a flair up of his psoriasis on his elbows and she had wanted him seen.

Interview with the Supervisor in Charge/Medication Aide (SIC/MA) on 02/28/23 at 10:53am revealed:
-She was responsible for making physicians' appointments for the residents.
-Resident #1 had not been seen by a dermatologist.
-She had called to make an appointment, but the dermatologist had not called her back.
-She thought she had called the dermatologist to make an appointment in December 2022.

Interview with the Facility Manager on 02/28/23 at 5:06pm revealed:
-The SIC/MA was responsible for scheduling all appointments including referrals.
-She would also help the SIC/MA when scheduling if she was having difficulty with scheduling appointments.
-The SIC/MA had difficulty scheduling a dermatologist appointment for Resident #1; she left a message with one physician's office but did not hear back.
-She should have continued to try another dermatologist and not waited for return a call.
-The appointment should have been made within 24 hours of the referral being made.

Attempted telephone interview with the Administrator on 02/28/23 at 1:13pm was unsuccessful.

Based on observations, interviews and record reviews it was determined Resident #1 was not interviewable.

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C 246	Continued From page 2 2. Review of Resident #3 ' s current FL2 dated 08/18/22 revealed diagnoses included gastroesophageal reflux disease (GERD). Review of a after visit summary from Resident #3's primary care provider (PCP) dated 12/23/22 revealed there was an order for a referral with a gastroenterologist due to swallowing issues and problems keeping food down while eating. Review of Resident #3 ' s record on 02/28/23 revealed: -There was no documentation an appointment with a gastroenterologist was scheduled for Resident #3. -There was no documentation of an appointment or a visit with a gastroenterologist. Interview with Resident #3 on 02/28/23 at 8:52am revealed: -He did not have problems with coughing or choking at meals any more. -He did not recall the last time he had trouble eating or got sick. -He did not know about going to a gastroenterologist. Telephone interview with the facility's contracted PCP on 02/28/23 at 4:21pm revealed: -The facility was responsible for scheduling follow-up appointments and referrals for residents. -Resident #3 had complained of stomach pain, nausea and vomiting after meals so she had referred him to the gastroenterologist. -Things had gotten better and resolved and then Resident #3 had a flair up in January 2023 and was sent out to the hospital. -He had fecal impaction was the reason he was sent to the hospital.	C 246		

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C 246	Continued From page 3 -He was placed on a laxative when he returned to the facility and he had been doing better. -He probably still needed to be seen by the gastroenterologist to be sure he is okay. Interview with the Supervisor-in-Charge/Medication Aide (SIC/MA) on 02/28/23 at 3:28pm revealed: -She reviewed the residents after visit reports from their primary care providers (PCP) for referrals. -She was responsible for scheduling referral appointments with specialist. -She was not aware Resident #3 was referred to a gastroenterologist in December 2023. -She was supposed to follow up with the PCP once the appointment was made. -Resident #3 had not been seen by a gastroenterologist and did not have an appointment scheduled. Interview with the facility Manager on 02/28/23 at 5:06pm revealed: -The SIC/MA was responsible for scheduling all appointments including referrals. -She had no idea Resident #3 had a referral for a gastroenterologist appointment. -She expected all appointments for referrals to be made right away. Attempted telephone interview with the Administrator on 02/28/23 at 1:13pm was unsuccessful.	C 246		
C 265	10A NCAC 13G .0904(c)(2) Nutrition And Food Service 10A NCAC 13G .0904 Nutrition And Food Service (c) Menus in Family Care Homes:	C 265		

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C 265	Continued From page 4 (2) Menus shall be maintained in the kitchen and identified as to the current menu day and cycle for any given day for guidance of food service staff. This Rule is not met as evidenced by: Based on observations, interviews and record review, the facility failed to ensure menus were maintained in the kitchen and identified as to the current menu for any given day for guidance of food service staff. The findings are: Observation of the facility kitchen on 02/28/23 at 8:35am revealed there was not a weekly menu available for staff to reference when preparing meals. Observation of the lunch meal service on 02/28/23 at 12:44pm revealed: -There were four residents seated at the table. -The residents were served the same items. -They were served chicken wings, pinto beans, greens, pudding, water and milk; he consumed 100 percent of the meal. Interview with two residents on 02/28/23 at 8:52am revealed: -The food was good, they were served a variety and they got enough. -The did not know what they were going to be served from meal to meal. -the SIC/MA told them what the meal was just before they sat down to eat.	C 265		

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C 265	Continued From page 5 Interview with the Supervisor in Charge/Medication Aide (SIC/MA) on 02/28/23 at 2:05pm revealed: -She was provided with the weekly menu for the facility after lunch that day, 02/28/23. -She had served meals for the beginning of the week based on memory. -She made sure the meals included a protein, a vegetable and a starch at each meal. -She referenced the weekly menu when it was provided by the Facility Manager (FM). -She did not think to reach out to the FM about the weekly menu until that day, 02/28/23. Interview with the FM on 02/28/23 at 1:22pm revealed: -She was responsible for printing the weekly menu for the SIC/MA to follow but she was off the previous week and had not printed it. -The SIC/MA had not reached out to her about not having a weekly menu to follow when preparing meals that week. Attempted telephone interview with the Administrator on 02/28/23 at 1:13pm was unsuccessful.	C 265		
C 270	10A NCAC 13G .0904 (c-7) Nutrition And Food Service 10A NCAC 13G .0904 Nutrition And Food Service Menus in Family Care Homes: (7) The facility shall have a matching therapeutic diet menu for all physician-ordered therapeutic diets for guidance of food service staff.	C 270		

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C 270	Continued From page 6 This Rule is not met as evidenced by: Based on observation, interviews and record reviews the facility failed to ensure matching therapeutic diets menus were available for 3 of 3 sampled residents who were ordered a no concentrated sweet diet (NCA) (#1 and #2) and a mechanical soft chopped diet (MS) (#3). The findings are: Observation of the facility kitchen on 02/28/23 at 8:35am revealed there was not a therapeutic diet menu available for staff to reference when preparing meals. 1. Review of Resident #1's current FL-2 dated 08/04/22 revealed: -Diagnoses included type two diabetes mellitus. -There was no diet referenced. Review of Resident #1's diet order dated 08/18/22 revealed an order for a no concentrated sweets diet. Observation of the lunch meal service on 02/28/23 at 12:44pm revealed Resident #1 was served chicken wings, pinto beans, greens, pudding, water and milk; he consumed 100 percent of the meal. Without a therapeutic diet menu, it could not be determined if Resident #1 was served the appropriate meal. Telephone interview with the facility's contracted PCP on 02/28/23 at 4:21pm revealed: -Resident #1 was ordered a NCS diet because he was diabetic. -She wanted the facility to follow a diet for him to	C 270		

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C 270	Continued From page 7 help control his sugars. Interview with the Supervisor-in-Charge/Medication Aide (SIC/MA) on 02/28/23 at 8:23am and 2:05pm revealed: -The residents did not have orders for therapeutic diets. -She thought Resident #1 was ordered a regular diet. -She knew a therapeutic diet menu would tell her what to serve the residents who were ordered a special diet. -She knew residents who had a diagnosis of diabetes could not have sugar, so she provided sugar free items. Interview with the Facility Manager (FM) on 02/28/23 at 1:22pm revealed: -None of the residents were ordered a therapeutic diet that she was aware of. -Resident #1 might have been ordered an NCS diet because he was diabetic. -The facility had a therapeutic diet menu and she thought NCS was one of the diets. -She had provided the therapeutic diet menu for the SIC/MA to reference but she was not aware it was not being referenced by the SIC/MA. -The SIC/MA should have known what to serve a resident ordered an NCS diet but should been able to locate the diet menu or reached out to her for one. -She was not aware he staff did not have a therapeutic diet menu to reference when preparing the meal. Attempted telephone interview with the Administrator on 02/28/23 at 1:13pm was unsuccessful. Based on observation, record reviews and	C 270		

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C 270	Continued From page 8 interviews it was determined Resident #1 was not interviewable. 2. Review of Resident #2's current FL-2 dated 07/22/22 revealed: -Diagnoses included type two diabetes mellitus, schizoaffective disorder and bipolar. -Resident #2 was ordered a no concentrated sweets (NCS) diet. Observation of the lunch meal service on 02/28/23 at 12:44pm revealed Resident #2 was served chicken wings, pinto beans, greens, pudding, water and milk; he consumed 100 percent of the meal. Interview with Resident #2 on 02/28/23 at 9:11am revealed he was diabetic, but was not ordered a special diet. Telephone interview with the facility's contracted PCP on 02/28/23 at 4:21pm revealed: -Resident #2 was ordered an NCS diet because he was diabetic. -She wanted the facility to follow a diet for him to help control his blood sugars. Interview with the Supervisor-in-Charge/Medication Aide (SIC/MA) on 02/28/23 at 8:23am and 2:05pm revealed: -The residents did not have orders for therapeutic diets. -She thought Resident #2 was ordered a regular diet. -She knew a therapeutic diet menu would tell her what to serve the residents who were ordered a special diet. -She knew residents who had a diagnosis of diabetes could not have sugar, so she provided sugar free items.	C 270		

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C 270	Continued From page 9 Interview with the Facility Manager (FM) on 02/28/23 at 1:22pm revealed: -None of the residents were ordered a therapeutic diet that she was aware of. -She was not aware Resident #2 had an order for an NCS diet. -The facility had a therapeutic diet menu and she thought NCS was one of the diets. -She had provided the therapeutic diet menu for the SIC/MA to reference but she was not aware it was not being referenced by the SIC/MA. -The SIC/MA should have known what to serve a resident ordered an NCS diet but should been able to locate the diet menu or reached out to her for one. -She was not aware he staff did not have a therapeutic diet menu to reference when preparing the meal. Attempted telephone interview with the Administrator on 02/28/23 at 1:13pm was unsuccessful. 3. Review of Resident #3's current FL-2 dated 08/18/22 revealed: -Diagnoses included gastroesophageal reflux disease (GERD). -The diet ordered was mechanical soft (MS). Review of Resident #3's diet order dated 08/18/22 revealed an order for a mechanical soft (MS) chopped diet. Observation of the lunch meal service on 02/28/23 at 12:44pm revealed Resident #3 was served chicken wings on the bone, pinto beans, greens, pudding, water and milk; he consumed 100 percent of the meal.	C 270		

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C 270	Continued From page 10 Interview with Resident #3 on 02/28/23 at 8:52am revealed: -He had recent dental work and only had seven teeth; he was having teeth removed so he could get dentures. -He had trouble digesting certain food. -The SIC/MA cut up his meat for him and he was not served lettuce. -He did not think he was ordered a special [therapeutic] diet. Telephone interview with the facility's contracted PCP on 02/28/23 at 4:21pm revealed: -Resident #3 was ordered a MS chopped diet because he was in the process of having his teeth extracted. -Resident #3 needed to have a MS chopped diet until he had dentures. Interview with the Supervisor-in-Charge/Medication Aide (SIC/MA) on 02/28/23 at 8:23am and 2:05pm revealed: -The residents did not have orders for therapeutic diets. -She thought Resident #3 was ordered a regular diet but just needed his meat cut up for him. -She knew a therapeutic diet menu would tell her what to serve the residents who were ordered a MS chopped diet. Interview with the Facility Manager (FM) on 02/28/23 at 1:22pm revealed: -None of the residents were ordered a therapeutic diet that she was aware of. -Resident #3 was ordered chopped meats because he had recently had dental work. -Chopped meats was just cutting up his food and did not require a therapeutic diet menu. -She was not aware Resident #3 was ordered a mechanical soft chopped diet and required a diet	C 270		

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C 270	Continued From page 11 menu for the staff to use as guidance when preparing his meals. -The facility had a therapeutic diet menu and she thought MS Chopped diet was one of the diets. -She had provided the therapeutic diet menu for the SIC/MA to reference but she was not aware it was not being referenced by the SIC/MA. -The SIC/MA should have known what to serve a resident ordered a MS Chopped diet but should been able to locate the diet menu or reached out to her for one. -She was not aware he staff did not have a therapeutic diet menu to reference when preparing the meal. Attempted telephone interview with the Administrator on 02/28/23 at 1:13pm was unsuccessful.	C 270		