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
	HAL023011	A. BUILDING: _____ B. WING _____	05/04/2023

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
BROOKDALE SHELBY	1425 E MARION STREET SHELBY, NC 28150

(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 survey on May 3, 2023 to May 4, 2023.	D 000	The following is the Plan of Correction for Brookdale Shelby regarding the Statement of Deficiencies dated 5/3-4/23. This Plan of Correction is not to be construed as an admission of or agreement with the findings and conclusions in the Statement of Deficiencies, or any related sanction or fine. Rather, it is a submitted as confirmation of our ongoing efforts to comply with statutory and regulatory requirements. In this document, we have outlined specific actions in response to identified issues. We have not provided a detailed response to each allegation or finding, nor have we identified mitigating factors. We remain committed to the delivery of quality health care services and will continue to make changes and improvement to satisfy that objective.	
D 273	10A NCAC 13F .0902(b) Health Care 10A NCAC 13F .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 observations, interviews and record reviews, the facility failed to ensure referral and follow-up for 1 of 5 sampled residents (Resident #2) who had an order for a Podiatry referral due to thickened, yellow and painful toenails and a referral for Physical Therapy and Occupational Therapy. The findings are: Review of Resident #2's current FL2 dated 12/16/22 revealed: -Diagnoses included bipolar disorder, edema, hypertension, hypothyroidism, hyperlipidemia, osteoporosis and mild cognitive impairment of uncertain etiology. -Resident #2 was oriented. -Resident #2 was semi-ambulatory. Review of Resident #2's Resident Register revealed an admission date of 11/29/19. Telephone interview with the contracted Hospice provider on 05/03/23 at 12:12pm revealed: -Resident #2 was admitted under Hospice services on 12/02/21. -Resident #2 was discharged from Hospice services on 02/25/23.	D 273	H&P dated 3/17/23 documentation shows resident is not verbal, nods to some questions, sometimes has blank stare. 5/25/23-HWD states resident is oriented x1 to self. Uses wheelchair for mobility. Physical therapy is working with her for walking and mobility. Resident was transferred from hospice care back to medical service oversight of Amanda Hill, NP with Eventus Health.	6/1/23 5/25/23 5/25/23

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE Lisa Marriddaiah TITLE Executive Director (X6) DATE 6-1-23

Reviewed and acknowledged by Melissa J. Jones, SW on 06/09/23

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D 273	Continued From page 1 Review of Resident #2's Primary Care Provider (PCP) admission History and Physical dated 03/17/23 revealed: -There was a referral to Podiatry to follow due to thickened, yellow, and painful toenails. -There was a referral for therapy to evaluate and treat for Physical and Occupational Therapy (PT and OT). Review of Resident #2's Primary Care Provider (PCP) admission History and Physical dated 03/17/23 under Assessment and Plan revealed: -Diagnoses of Parkinson's disease stating Resident #2 was at risk for falling due to greatly limited mobility which has declined per staff, and PT/OT evaluate and treat due to decline added. -Diagnoses of onychogryphosis (thickened, yellow and painful toenails), significant, involving all toenails, dried blood around one nail base on the right foot and request Resident #2 be added to the Podiatry list that services this building. Interview with Resident #2 on 05/04/23 at 3:00pm revealed: -She had any pain in her feet. -She had toenail discomfort. -She had not been seen regarding her toenails. -She would like someone to see her regarding her toenails. Observation of Resident #2's toenails, with the medication aide (MA) present on 05/04/23 at 3:19pm revealed: -The MA removed Resident #2's bedroom shoes and socks. -Resident #2's toenails on both feet were extremely thickened, yellowed with debris located on the sides and underneath the toenails. -Resident #2's right big toenail appeared to be	D 273	3/17/23 Podiatry referral was made by Amanda Hill, NP. This referral was emailed by Macie Alexander RCC to the podiatry scheduler on 3/20/23. The podiatrist that serves residents in this community had a scheduled visit on 3/24/23 and was scheduled to visit again 5/26/23 as Eventus follows a 62 day frequency structure. That visit has been postponed to 6/6/23 by provider. The resident is scheduled to be seen by the provider during his 6/6/23 visit. Resident is typically not verbal, nods to some questions, sometimes has blank stare, as documented in clinician H&P note 3/17/23, and as indicated by community staff. These detailed responses appear to be out of her normal baseline. A skin/nail assessment was performed by the HWD on 5/4/23. No detachment of nails was seen/documented.	5/25/23 5/25/23 5/25/23 5/25/23

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D 273	Continued From page 2 lifted and partly detached with dried blood at the base and left side of her toenail. Attempted telephone interview with Resident #2's family member on 05/04/23 at 4:22pm was unsuccessful. Attempted telephone interview with Resident #2's PCP on 05/04/23 at 4:40pm was unsuccessful. Review of an email provided on 05/04/23 by the Health and Wellness Director (HWD) dated 03/20/23 at 3:30pm revealed: -The email from the Podiatry provider to the Resident Care Coordinator (RCC) documented a new consent to treat form needed to be completed before Resident #2 would be scheduled to see the Podiatrist. -The email included an attached consent form to be completed and returned as soon as possible. -The email from the RCC to the Podiatry provider on 03/20/23 at 4:16pm documented the consent forms were emailed back to the Podiatry provider. -The email from the Podiatry provider dated 05/04/23 at 4:24pm was provided by the HWD stating Resident #2 should be on the podiatry schedule for the next visit. Review of an email provided by the HWD dated 05/03/23 at 4:35pm revealed: -The email from the HWD to the Therapy Manager requested that the Therapy Manager send the PT/OT order to the HWD that was received from Resident #2's PCP. -The Therapy Manager replied and stated no orders were received by Resident #2's PCP. -The Therapy Manager stated she remembered discussing this with the HWD. -On 05/03/23 at 4:59pm the Therapy Manager emailed HWD that she had received the orders	D 273	Resident's son and daughter-in-law are typically very attentive to calls, and always call the staff back when messages are left. 5/25/23 A zoom meeting with Lisa Marisiddaiah, ED Brookdale Shelby, Renota Isenhour HWD, Macie Alexander RCC, Tom Wirosteck Eventus CEO, Lindsey Schulten, Eventus Care Team Clinical Manager to discuss how the communication and referral processes for podiatry can be enhanced to avoid delays/visits/ treatment. We have been working on correcting these issues since April 2023 when we met with a regional rep who is no longer with Eventus. Email correspondence between Brookdale Shelby and Eventus reps noted above, during early May, has corrected and improved the communication and response time with podiatry referral team. This zoom meeting helped both teams to communicate and confirm that the process has improved. The podiatrist that serves residents in this community had a scheduled visit on 3/24/23 and is scheduled to visit again 5/26/23 as Eventus follows a 62 day frequency structure. That visit has been postponed to 6/6/23 by provider. The resident is scheduled to be seen by the provider during his 6/6/23 visit.	5/25/23 5/25/23 5/25/23

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D 273	Continued From page 3 for PT/OT that was sent by the HWD and stated she did not receive the PT/OT orders in March 2023. -On 05/04/23 at 10:24pm the Therapy Manager emailed the HWD stating that the Therapy Department should be able to admit Resident #2 on 05/05/23. Review of the facility's Skin Assessment Form dated 03/28/23 revealed: -There was no documentation related to Resident #2's feet or toenails. -There was no documentation that Resident #2's feet or toenails were assessed. Interview with the HWD on 05/04/23 at 5:22pm revealed: -She did not know Resident #2 did not have a Podiatry, Physical Therapy or Occupational Therapy referral made. -Therapy referrals were emailed to the contracted in-house Therapy Group. -The facility's contracted provider was responsible for making referrals. -Skin assessments were completed upon admission and quarterly by a Registered Nurse (RN). -She and the RCC were responsible for reviewing the PCP's visit notes when received. -The PCP notes usually were not available until two to three days after the PCP visit was made. -The PCP did not always communicate new orders or referrals prior to leaving the facility on visit days. Interview with the Administrator on 05/04/23 at 5:16pm revealed: -She did not know Resident #2 did not have a Podiatry, Physical Therapy or Occupational Therapy referral made.	D 273	5/5/23 HWD and RCC met with Danielle Garcia,LHC representative (providers of onsite therapy services at Brookdale Shelby). It was determined that Danielle will handle PT/OT referrals when they are initiated by Amanda Hill, NP and sent to her by the Eventus referral team. Brookdale Shelby team will convey referral information to Danielle if they see this documentation. Renota Isenhour, LPN, HWD for Brookdale Shelby performs skin assessments upon initial move-in to community, quarterly, and upon any noted condition change. Resident's skin assessment was completed by HWD in March 2023 and documented in PCC. HWD had not been documenting hard nail info on assessments unless there were missing nails which had not been the case for this resident. On 5/5/23, HWD initiated the process of including additional documentation of hard nail observations. We have established that LHC will handle the PT/OT referrals made by the Brookdale Shelby house medical provider, sending them to the Eventus. She will communicate with the HWD & RCC, and provide routine updates. We meet on the 1st and 3rd Wednesday of each month as a comprehensive collaborative team meeting, and she also communicates with the clinical team each time she is in the community.	5/5/23 5/25/23 5/25/23

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D 273	Continued From page 4 -She expected the staff or the facility's contracted provider to make referrals. -The expected the PCP and staff to communicate with each other regarding new referrals or orders. -She was not sure how often skin assessments were completed on residents. -She expected staff to report any skin issues to the HWD or to the RCC.	D 273	There is consistent communication between Amanda Hill NP with the HWD and RCC when she is in the community every other Friday seeing residents, and email/phone/text correspondence as needed. We have communicated with CenterWell Home Health to implement a structured communication process when they visit residents in the community so that no information gets overlooked or delayed. It is understood that skin assessments are performed on admission, quarterly, and as needed when issues are noted. The Health & Wellness Director/Nurse/ Executive Director or designee will conduct retraining for care associates on referral and follow up of physician's orders. The Health & Wellness Director/ Nurse/Executive Director or designee will conduct an audit on current resident records to verify that physician orders are being followed as ordered. To assist with ongoing compliance, the Health & Wellness Director/Nurse/Executive Director or designee will provide weekly monitoring of physician orders for three (3) months, with the Health & Wellness Director/designee to monitor routinely thereafter.	5/25/23 5/12/23 5/5/23 6/1/23