STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL081053	A. BUILDING: _____ B. WING _____	03/26/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
OAKLAND LIVING CENTER	704 POORS FORD ROAD RUTHERFORDTON, NC 28139

(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 03/26/24.	D 000		
D 253	10A NCAC 13F .0801(a) Resident Assessment 10A NCAC 13F .0801 Resident Assessment (a) An adult care home shall assure that an initial assessment of each resident is completed within 72 hours of admission using the Resident Register. This Rule is not met as evidenced by: Based on interviews and record reviews, the facility failed to ensure an initial assessment was completed within 72 hours of admission using the Resident Register for 3 of 3 sampled residents (#1, #2, and #3). The findings are: 1. Review of Resident #1's current FL2 dated 09/04/23 revealed: -Diagnoses included hypertension, dysphagia, gastroesophageal reflux disease, anxiety, depression and hypothyroidism. -She was ambulatory with a walker and intermittently disoriented. -There was not an admission date. Review of Resident #1's resident record revealed: -There was a resident face sheet with an admission date of 08/23/23.	D 253		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL081053	A. BUILDING: _____ B. WING _____	03/26/2024

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D 253	Continued From page 1 -There was only the last page of the Resident Register which did not have any resident information. -There was no other pages of the Resident Register. Refer to the interview with the Administrator on 03/25/24 at 2:52pm. Refer to the attempted telephone interview with a representative at the local DSS on 03/26/24 at 2:55pm. 2. Review of Resident #2's current FL2 dated 07/28/23 revealed: -Diagnoses included right sided paralysis, slurred speech, and cardiovascular accident. -She was non-ambulatory and intermittently disoriented. -There was not an admission date. Review of Resident #2's resident record revealed: -There was a resident face sheet with an admission date of 07/31/23. -There was only the last page of the Resident Register which did not have any resident information. -There were no other pages of the Resident Register. Refer to the interview with the Administrator on 03/26/24 at 2:52pm. Refer to the attempted telephone interview with a representative at the local DSS on 03/26/24 at 2:55pm. 3. Review of Resident #3's current FL2 dated 01/31/24 revealed: -Diagnoses included dementia, hypertension, and	D 253		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL081053	A. BUILDING: _____ B. WING _____	03/26/2024

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D 253	Continued From page 2 hypothyroidism. -She was ambulatory and constantly disoriented. -There was not an admission date. Review of Resident #3's resident record revealed: -There was a resident face sheet with an admission date of 02/01/24. -There was only the last page of the Resident Register which did not have any resident information. -There were no other pages of the Resident Register. Refer to the interview with the Administrator on 03/26/24 at 2:52pm. Refer to the attempted telephone interview with a representative at the local DSS on 03/26/24 at 2:55pm. _____ Interview with the Administrator on 03/26/24 at 2:52pm revealed: -She was responsible for completing admission paperwork for residents. -She did not know each resident required a Resident Register. -She contacted the local Department of Social Services (DSS) to inquire about the required forms for admission to the facility when it opened in June 2023. -The local DSS sent her the last page of the Resident Register which only included information when a resident was discharged from the facility. -Attempted telephone interview with a representative at the local DSS on 03/26/24 at 2:55pm was unsuccessful.	D 253		