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
	HAL060049	A. BUILDING: _____ B. WING _____	04/23/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
BROOKDALE CARRIAGE CLUB PROVIDENCE II	5816 OLD PROVIDENCE ROAD CHARLOTTE, NC 28226

(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 Mecklenburg County Department of Social Services conducted an annual survey on 04/22/24 through 04/23/24.	D 000		
D 463	10A NCAC 13F .1306 Admission To The Special Care Unit 10A NCAC 13F .1306 Admission To The Special Care Unit In addition to meeting all requirements specified in the rules of this Subchapter for the admission of residents to the home, the facility shall assure that the following requirements are met for admission to the special care unit: (1) A physician shall specify a diagnosis on the resident's FL-2 that meets the conditions of the specific group of residents to be served. (2) There shall be a documented pre-admission screening by the facility to evaluate the appropriateness of an individual's placement in the special care unit. (3) Family members seeking admission of a resident to a special care unit shall be provided disclosure information required in G.S. 131D-8 and any additional written information addressing policies and procedures listed in Rule .1305 of this Subchapter that is not included in G.S. 131D-8. This disclosure shall be documented in the resident's record. This Rule is not met as evidenced by: Based on interviews and record reviews, the facility failed to ensure 3 of 3 sampled residents (#1, #2 and #3) residing in the Special Care Unit (SCU) had documented signed SCU disclosure statements. The findings are:	D 463	1. The Survey Audit of the resident charts in Memory Care and in the Business office was completed on 4/23--4/24/2024. The facility Special Care Unit (SCU) disclosure statements audit was completed on 4/24--4/25 and missing SCU disclosure statements were printed, signatures were obtained and the SCU filed in the resident charts by end of day 4/26/2024. 2. Education was completed on 4/26/24 with the Health and Wellness Director, Business office team, Sales department and Administrator on the SCU disclosure statement regulation. 3. The procedure going forward is that the sales team will give the family the move in packet that contains of the SCU disclosure statement. Prior to admission the Administrator or designee will review all the move in paperwork for accuracy and double check that the SCU disclosure statement is signed. Administrator will make a copy and give the originals to the wellness nurse for admission, at which time the Wellness nurse will complete an audit move in sheet checklist to ensure all documents are present prior to move in. Once the checklist is complete, the copies will be sent to the business office as a fail-safe. 4. Administrator or designee will complete a quarterly chart audit of the SCU disclosure statement times 3 months.	4/26/2024 4/26/2024 4/29/2024 7/31/2024

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE: Claude Shaw — TITLE: Director Assisted Living CCRC — (X6) DATE: 5/31/2024

STATE FORM 6899 — 0X0Z11 — If continuation sheet 1 of 5

Reviewed and Acknowledge by MH on 06/05/2024

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D 463	Continued From page 1 Review of the facility's current license effective 01/01/24 revealed the facility was licensed with a capacity of 34 SCU residents. Review of the facility's census on 04/22/24 revealed there was a census of 27 residents. 1. Review of Resident #1's current FL-2 dated 03/07/24 revealed: -Diagnoses included dementia and depression. -She was constantly disoriented. -She was semi-ambulatory using a rolling walker. Review of Resident #1's Resident Register revealed an admission date of 10/06/23. Review of Resident #1's record on 04/22/24 revealed there was no documentation of a SCU disclosure. Review of Resident #1's care plan dated 04/16/24 revealed: -She was forgetful and required prompting. -She required limited physical assistance with dressing, grooming, and bathing. -She required moderate physical assistance with toileting, ambulation, bathing, and transfers. Attempted telephone interview with resident #1's family member on 04/23/24 at 10:46am was unsuccessful. Refer to the interview with the SCC on 04/23/24 at 11:02am. Refer to the interview with the Health and Wellness Director (HWD) on 04/23/24 8:30am and at 9:45am.	D 463		

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D 463	Continued From page 2 Refer to the telephone interview with the Administrator on 4/23/24 at 11:16am. 2. Review of Resident #2's current FL-2 dated 01/30/24 revealed: -Diagnoses included alzheimer's. -He was constantly disoriented. -He was ambulatory. Review of Resident #2's Resident Register revealed an admission date of 03/02/23. Review of Resident #2's record on 04/22/24 revealed there was no documentation of a SCU disclosure. Review of Resident #2's care plan dated 10/17/23 revealed: -He required limited physical assistance with dressing, grooming, toileting, and bathing. -He did not require assistance with eating, ambulation, and transfers. A telephone interview with resident #2's family member on 04/23/24 at 10:48am revealed she signed all paperwork at the time of admission but had no recollection if she signed a special care unit disclosure form. Refer to the interview with the SCC on 04/23/24 at 11:02am. Refer to the interview with the HWD on 04/23/24 8:30am and at 9:45am. Refer to the telephone interview with the Administrator on 4/23/24 at 11:16am. 3. Review of Resident #3's current FL-2 dated 03/07/24 revealed: -Diagnoses included dementia.	D 463		

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D 463	Continued From page 3 -She was constantly disoriented. -She was ambulatory using a rolling walker and wheelchair. Review of Resident #3's Resident Register revealed an admission date of 09/26/23. Review of Resident #3's record on 04/22/24 revealed there was no documentation of a SCU disclosure. Review of Resident #3's care plan dated 12/05/23 revealed: -She required limited physical assistance with dressing, grooming, and bathing. -She did not require assistance with eating, toileting, ambulation, and transfers. Attempted telephone interview with resident #3's family member on 04/23/24 at 11:09am was unsuccessful. Refer to the interview with the SCC on 04/23/24 at 11:02am. Refer to the interview with the HWD on 04/23/24 8:30am and at 9:45am. Refer to the telephone interview with the Administrator on 4/23/24 at 11:16am. _____ Interview with the SCC on 04/23/24 at 11:02am revealed: -She did not know Resident #1, Resident #2, and Resident #3 did not have a SCU disclosure statements. -She had worked at the facility approximately six months and did not recall them being mentioned during her orientation/training.	D 463		

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D 463	Continued From page 4 -She was familiar with SCU disclosures from working in other SCU facilities. -She started working at the facility in 2022 and was in the process of auditing all SCU resident charts. Interview with the HWD on 04/23/24 8:30am and at 9:45am revealed: -She and the SCC were responsible for ensuring all paperwork was completed and up to date. -She did not know that Resident #1, Resident #2, and Resident #3 did not have a SCU disclosure statements. -She did know SCU disclosure statement were to be completed upon admission to the SCU. -She did not know why residents were missing SCU disclosures statements. Telephone interview with the Administrator on 4/23/24 at 11:16am revealed: -She did know SCU disclosure statements were to be completed upon admission to the SCU. -She was aware that some residents were missing the SCU disclosure statements but had not completed the missing SCU disclosure statements with resident's responsible parties. -If a resident was transferred from the facility owned Assisted Living Facility to the SCU, the Resident Care Coordinator (RCC) was responsible for ensuring the SCU disclosure statements had been completed. -The sales department was responsible for ensuring the SCU disclosure statements were completed for new residents being admitted from their home or hospital.	D 463		