STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL056001	A. BUILDING: _____ B. WING _____	08/23/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
GRANDVIEW MANOR CARE CENTER	150 CRISP STREET FRANKLIN, NC 28734

(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 from 08/22/24 - 08/23/24.	D 000		
D 259	10A NCAC 13F .0802(a) Resident Care Plan 10A NCAC 13F .0802 Resident Care Plan (a) An adult care home shall assure a care plan is developed for each resident in conjunction with the resident assessment to be completed within 30 days following admission according to Rule .0801 of this Section. The care plan is an individualized, written program of personal care for each resident. This Rule is not met as evidenced by: Based on record review and interviews, the facility failed to ensure 2 of 7 sampled residents (#6 and #7) had a care plan completed annually. The findings are: 1. Review of Resident #6's most current FL2 dated 07/10/23 revealed: -Diagnoses included macular degeneration, chronic kidney disease, diabetes with neuropathy and osteoarthritis. -His level of care was documented as rest home. Review of Resident #6's care plan dated 07/19/23 revealed: -He required limited assistance with eating, ambulation, bathing, dressing and grooming. -He used a cane or walker when ambulating outside his room. -He was legally blind but was able to see large objects.	D 259		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL056001	A. BUILDING: _____ B. WING _____	08/23/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
GRANDVIEW MANOR CARE CENTER	150 CRISP STREET FRANKLIN, NC 28734

(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 259	Continued From page 1 Refer to interview with the Special Care Coordinator (SCC) on 08/23/24 at 1:28pm. Refer to interview with the Administrator on 08/23/24 at 2:28pm. 2. Review of Resident #7's most current FL2 dated 07/05/23 revealed: -Diagnoses included Alzheimer's disease, chronic kidney disease, unspecified mood disorder and osteoporosis. -Her level of care was documented as rest home. Review of Resident #7's care plan dated 07/27/23 revealed: -She required extensive assistance with bathing. -She required limited assistance with dressing and personal hygiene. -She had confusion and short-term memory problems. Refer to interview with the SCC on 08/23/24 at 1:28pm. Refer to interview with the Administrator on 08/23/24 at 2:28pm. _____ Interview with the SCC on 08/23/24 at 1:28pm revealed: -She was responsible for tracking and ensuring all residents in the facility had care plans updated annually and when significant changes occurred. -She kept a list on her computer when all care plans were due to be updated annually. -She checked the list on her computer every two weeks to determine which residents were due for care plan updates. -Residents #6 and #7 were not on her list for updates.	D 259		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL056001	A. BUILDING: _____ B. WING _____	08/23/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
GRANDVIEW MANOR CARE CENTER	150 CRISP STREET FRANKLIN, NC 28734

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D 259	Continued From page 2 -She has no explanation why they were not on her list for updates. Interview with the Administrator on 08/23/24 at 2:28pm revealed: -The SCC was responsible for completing the care plans timely for all residents. -The SCC kept a list of when all residents were due for their care plan to be updated. -The SCC did not have the names of Resident #6 or Resident #7 on her list, so their care plans were not updated timely.	D 259		
D 292	10A NCAC 13F .0904(c)(3) Nutrition And Food Service 10A NCAC 13F .0904 Nutrition and Food Service (c) Menus In Adult Care Home: (3) Any substitutions made in the menu shall be of equal nutritional value, in order to maintain the daily dietary requirements in Subparagraph (d)(3) of this Rule, appropriate for therapeutic diets, and documented in records maintained in the kitchen to indicate the foods actually served to residents. This Rule is not met as evidenced by: Based on observation, interviews and record reviews the facility failed to document menu substitutions to indicate the food actually served to the residents. The findings are:	D 292		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL056001	A. BUILDING: _____ B. WING _____	08/23/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
GRANDVIEW MANOR CARE CENTER	150 CRISP STREET FRANKLIN, NC 28734

(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 292	Continued From page 3 Observation of the lunch meal service on 08/22/24 revealed the meal consisted of salisbury steak, mashed potatoes with gravy, green beans, a dinner roll and fruit cocktail. Review of the facility's current menu dated 2008 revealed the lunch meal menu for 08/22/24 consisted of beef chow mein over rice, oriental vegetables, a slice of whole grain bread and fruit cocktail. Interview with a dietary aide on 08/22/24 at 10:05am revealed: -The facility was in the process of getting new menus. -Lunch would consist of salisbury steak, some type of vegetable or potato, a bread and fruit cocktail. Interview with the Kitchen manager on 08/22/24 at 10:15am and 08/23/24 at 10:22am revealed: -The lunch menu was changed to salisbury steak by the previous Kitchen Manager because the residents did not like chow mein. -When he substituted food on the menu he used a food from the same food group. -He documented changes on a calendar that was posted in the kitchen when the menu was significantly different, not when he served a food from the same food groups. -He did not realize all changes should be documented. Observation of the dinner meal service on 08/22/24 revealed the meal consisted of a veal pattie, tossed salad with dressing, scalloped potatoes, green peas, a dinner roll and Boston cream pie.	D 292		

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	HAL056001	A. BUILDING: _____ B. WING _____	08/23/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
GRANDVIEW MANOR CARE CENTER	150 CRISP STREET FRANKLIN, NC 28734

(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 292	Continued From page 4 Review of the facility's current menu dated 2008 revealed the dinner meal menu for 08/22/24 consisted of baked veal pattie, boiled red skin potatoes, buttered peas, tossed salad with dressing and a slice of whole grain bread. Observation of the August 2024 calendar posted in the kitchen revealed: -A menu substitution was documented on 08/12/24. -No menu substitutions were documented for lunch or dinner on 08/22/24. Interview with the Administrator on 08/23/24 at 2:22pm revealed: -Menu substitutions should be documented on the calendar in the kitchen by the Kitchen Manager. -The menus were old and the Kitchen Manager substituted foods because he knew the resident food preferences but she did not realize it was considered a substitution when like food groups were interchanged.	D 292		
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 any resident's physician-ordered therapeutic diet for guidance of food service staff.	D 296		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL056001	A. BUILDING: _____ B. WING _____	08/23/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
GRANDVIEW MANOR CARE CENTER	150 CRISP STREET FRANKLIN, NC 28734

(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 296	Continued From page 5 This Rule is not met as evidenced by: Based on observations, interviews, and record review, the facility failed to have a matching therapeutic diet menu for the guidance of food service staff for 4 of 5 sampled residents (#2, #3, #4, and #5) who had a physician ordered ground meat diet (#4), no added table salt diet (#4), a no concentrated sweets diet (#3, #4) and a ground diet (#2). The findings are: Observation during initial tour on 08/22/24 at 10:10:05am revealed: -There was a regular menu, dated 2008, on a side shelf. -A therapeutic diet menu was not posted in the kitchen. 1. Review of Resident #2 current FL2 dated 07/12/24 revealed: -Diagnoses included dementia. -An order for a ground diet. Refer to interview with the Kitchen Manager on 08/22/24 at 12:00pm and 08/23/24 at 10:22am. Refer to interview with the evening cook on 08/22/24 at 4:50pm. Refer to inteview with the Business Office Manager (BOM) on 08/23/24 at 9:50am. Refer to interview with the Administrator on 08/22/24 at 5:10pm and 08/23/24 at 2:22pm. 2. Review of Resident #3's current FL2 dated 09/26/23 revealed: -Diagnoses included dementia, gastric reflux and hyperlipidemia.	D 296		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL056001	A. BUILDING: _____ B. WING _____	08/23/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
GRANDVIEW MANOR CARE CENTER	150 CRISP STREET FRANKLIN, NC 28734

(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 296	Continued From page 6 -An order for a no concentrated sweet, no added table salt diet. Review of physician's orders dated 02/21/24 revealed a dietary change to regular consistency diabetic diet. Refer to interview with the Kitchen Manager on 08/22/24 at 12:00pm and 08/23/24 at 10:22am. Refer to interview with the evening cook on 08/22/24 at 4:50pm. Refer to inteview with the BOM on 08/23/24 at 9:50am. Refer to interview with the Administrator on 08/22/24 at 5:10pm and 08/23/24 at 2:22pm. 3. Review of Resident #4's current FL2 dated 11/03/23 revealed: -Diagnoses included diabetes, congestive heart failure, gastric reflux, and hypertension -A prescribed ground meats, no added table salt, no concentrated sweets diet. Review of physician's orders dated 02/07/24 revealed a ground meats, no added table salt, no concentrated sweets diet. Refer to interview with the Kitchen Manager on 08/22/24 at 12:00pm and 08/23/24 at 10:22am. Refer to interview with the evening cook on 08/22/24 at 4:50pm. Refer to inteview with the BOM on 08/23/24 at 9:50am. Refer to interview with the Administrator on	D 296		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL056001	A. BUILDING: _____ B. WING _____	08/23/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
GRANDVIEW MANOR CARE CENTER	150 CRISP STREET FRANKLIN, NC 28734

(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 296	Continued From page 7 08/22/24 at 5:10pm and 08/23/24 at 2:22pm. 4.Review of Resident #5's current FL2 dated 05/16/24 revealed: -Diagnoses included dementia. -An order for a pureed diet. Refer to interview with the Kitchen Manager on 08/22/24 at 12:00pm and 08/23/24 at 10:22am. Refer to interview with the evening cook on 08/22/24 at 4:50pm. Refer to inteview with the BOM on 08/23/24 at 9:50am. Refer to interview with the Administrator on 08/22/24 at 5:10pm and 08/23/24 at 2:22pm. _____ Interview with the Kitchen Manager on 08/22/24 at 12:00pm and 08/23/24 at 10:22am revealed: -He worked off and on in the facility's kitchen for 10 years. -He never saw a therapeutic diet menu. -He did not realize there should be a specific therapeutic diet menu for each therapeutic diet that was ordered. -If a resident had an order for a therapeutic diet they used the regular menu. -He requested new menus from the Administrator in April 2024 because the current menus were so outdated. Interview with the evening cook on 08/22/24 at 4:50pm revealed the facility used one menu, a regular diet menu, for every resident. Inteview with the BOM on 08/23/24 at 9:50am revealed:	D 296		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL056001	A. BUILDING: _____ B. WING _____	08/23/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
GRANDVIEW MANOR CARE CENTER	150 CRISP STREET FRANKLIN, NC 28734

(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 296	Continued From page 8 -When the previous Kitchen Manager left in April 2024 he took all the menu books with him and they were in the process of recreating them. -The Administrator was working with the food service supplier to develop new menus and was doing one season at a time and about 3 or 4 weeks ago requested she print the new menu books. -The new menu books included the extensions for all the therapeutic diets available at the facility. -She had not given the new menus to the kitchen staff yet. Interview with the Administrator on 08/22/24 at 5:10pm and 08/23/24 at 2:22pm revealed: -When the previous Kitchen Manager left in April 2024 he took all the menu books with him and they were in the process of recreating them. -The BOM was printing new menu books that contained all the menus for the therapeutic diets. -She did not know why the current Kitchen Manager thought a regular diet menu was the only menu available and used at the facility.	D 296		
D 298	10A NCAC 13F .0904(d)(2) Nutrition And Food Service 10A NCAC 13F .0904 Nutrition And Food Service (d) Food Requirements in Adult Care Homes: (2) Foods and beverages shall be offered in accordance with each residents' prescribed diet or made available to all residents as snacks between each meal for a total of three snacks per day and shown on the menu as snacks.	D 298		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL056001	A. BUILDING: _____ B. WING _____	08/23/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
GRANDVIEW MANOR CARE CENTER	150 CRISP STREET FRANKLIN, NC 28734

(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 298	Continued From page 9	D 298		

This Rule is not met as evidenced by:
Based on observations, interviews, and record reviews, the facility failed to ensure three snacks were offered daily to all residents.

The findings are:

Interviews with four residents during initial tour on 08/22/24 revealed:
-Staff might bring a snack in the afternoon but not every day.
-Staff usually brought a snack or a beverage once a day.
-An afternoon snack was usually all that was offered to them.
-Snacks were given out once or twice a day.

Review of the facility's current weekly menu dated 2008 revealed:
-A mid-morning and mid-afternoon snack was listed on the menu.
-There was no evening snack listed on the menu.
-The morning and afternoon snacks listed a beverage and either a fruit or a vegetable.

Observation of a morning snack cart on 08/22/24 revealed:
-The snack cart included a variety of beverages including, coffee, juice and water.
-No food items were on the snack cart.

Interview with the Kitchen Manager on 08/23/24 at 10:22am revealed:
-Snacks were served at 10am, 2pm and 7pm.
-The snacks listed on the menu were inappropriate, including things like broccoli pieces at morning snack.

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL056001	A. BUILDING: _____ B. WING _____	08/23/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
GRANDVIEW MANOR CARE CENTER	150 CRISP STREET FRANKLIN, NC 28734

(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 298	Continued From page 10	D 298		

-Morning snack was usually just a beverage.
-The afternoon and evening snack included both a beverage and food.

Interview with a dietary aide on 08/23/24 at 11:21am revealed:
-He usually worked day shift.
-Morning snack consisted of a beverage but no food.
-Afternoon snack consisted of both beverage and food.

Interview with a personal care aide (PCA) on 08/23/24 at 11:21 revealed:
-Morning snack consisted of a beverage only.
-Afternoon snack consisted of both beverage and food.
-She thought an evening snack was served to residents.

Interview with another dietary aide on 08/23/24 at 11:23am revealed:
-He worked both day shift and sometimes evening shift.
-The morning snack consisted of a beverage only.
-The afternoon snack and the evening snack consisted of a beverage as well as food.
-The evening snack was not always passed out to the residents due to staffing issues in the kitchen.
-When he worked in the evening he had to choose between washing the dinner dishes or passing out snacks but he did not have time to do both before he left at the end of his shift.

Interview with the Administrator on 08/23/24 at 2:22pm revealed:
-She expected snacks to be served three times daily to residents.
-The evening dietary aides should have plenty of

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL056001	A. BUILDING: _____ B. WING _____	08/23/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
GRANDVIEW MANOR CARE CENTER	150 CRISP STREET FRANKLIN, NC 28734

(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 298	Continued From page 11 time to pass out snacks; she never heard there was a problem. -The snacks written on the menu were inappropriate, including things like raw broccoli and cauliflower, so the Kitchen Manager made a variety of foods available that the residents liked. -She did not realize an evening snack was not listed on the menus.	D 298		
D 309	10A NCAC 13F .0904(e)(3) Nutrition and Food Service 10A NCAC 13F .0904 Nutrition and Food Service (e) Therapeutic Diets in Adult Care Homes: (3) The facility shall maintain a current listing of residents with 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 listing of residents with physician-ordered therapeutic diets was available for the guidance of food service staff. The findings are: Observation of the kitchen during initial tour on 08/22/24 at 10:05am and 08/22/24 at 11:45am revealed a listing of residents with therapeutic diets was not posted in the kitchen.	D 309		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL056001	A. BUILDING: _____ B. WING _____	08/23/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
GRANDVIEW MANOR CARE CENTER	150 CRISP STREET FRANKLIN, NC 28734

(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 309	Continued From page 12 Interview with a dietary aide on 08/22/24 at 10:05am revealed a list of residents with therapeutic diet orders was usually posted on the kitchen bulletin board. Interview with the Kitchen Manager on 08/22/24 at 10:15am and 11:45am revealed: -A list of residents with therapeutic diet orders was usually posted on the kitchen bulletin board. -He memorized every resident's diet order so he did not need the list to plate the lunch meal. -He never used the therapeutic diet list to plate meals. Interview with the SCC on 08/22/24 at 12:20pm revealed: -She was responsible for keeping the therapeutic diet list updated in the kitchen. -The kitchen staff were responsible for letting her know if they needed a replacement copy for the kitchen. Interview with the evening cook on 08/22/24 at 4:50pm revealed: -A list of residents on therapeutic diets was posted on the kitchen bulletin board. -He never used the list to plate meals because he had everyones diet order memorized. Interview with the Administrator on 08/22/24 at 5:10pm and 08/23/24 at 2:22pm revealed: -A list of residents with therapeutic diet orders was usually posted on the kitchen bulletin board. -The list was taken down last week, along with everything else on the kitchen walls, because the staff did a deep clean. -The staff probably forgot to post the list again on the bulletin board. -The SCC was responsible for keeping the therapeutic diet list current.	D 309		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL056001	A. BUILDING: _____ B. WING _____	08/23/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
GRANDVIEW MANOR CARE CENTER	150 CRISP STREET FRANKLIN, NC 28734

(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 309	Continued From page 13 -The Kitchen Manager was responsible for ensuring a current list of therapeutic diets was posted in the kitchen and would obtain one from the SCC as needed. -She expected the kitchen staff to memorize everyones diet order but also to use the list as guidance during meal service.	D 309		
D 310	10A NCAC 13F .0904(e)(4) Nutrition and Food Service 10A NCAC 13F .0904 Nutrition and Food Service (e) Therapeutic Diets in Adult Care Homes: (4) All therapeutic diets, including nutritional supplements and thickened liquids, shall be served as ordered by the resident's physician. This Rule is not met as evidenced by: Based on observations, interviews and record reviews the facility failed to ensure a therapeutic diet was served as ordered for 1 of 5 residents (#2) who was ordered a ground diet. The findings are: Review of Resident #2's current FL2 dated 07/12/24 revealed: -Diagnoses included dementia. -There was an order for a ground diet. Review of Resident #2's current Care Plan dated 07/22/24 revealed: -She required total assistance while eating. -She needed food to be ground and served with gravy. Observation of the lunch meal service on 08/22/24 at 11:45am revealed: -The meal consisted of salisbury steak, green	D 310		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL056001	A. BUILDING: _____ B. WING _____	08/23/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
GRANDVIEW MANOR CARE CENTER	150 CRISP STREET FRANKLIN, NC 28734

(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 310	Continued From page 14	D 310		

beans, mashed potatoes with gravy, a dinner roll and fruit cocktail.
-Resident #2 was served ground salisbury steak, mashed potatoes with gravy, whole green beans and a dinner roll.

Review of the facility's menus revealed:
-There was a regular menu available to review.
-A ground diet menu was not available to determine what should be served on a ground diet.

Interview with the Dietary Manager (DM) on 08/22/24 at 11:45am and 12:00pm and on 08/23/24 at 10:22am revealed:
-The previous DM trained him when he initially started as a dietary aide in 2018.
-As a dietary aide he was not responsible for plating the residents' food.
-When he became the evening cook in January 2024 he did not have any further training, but he thought he knew what was required for each diet.
-He became the DM in April 2024 but did not have any further training on diets as the previous Kitchen Manager was no longer employed at the facility.
-He thought Resident #2 only needed to have ground meat.
-He knew that Resident #2's diet order was all ground but he thought as long as a vegetable was cooked soft it did not need to be ground.
-Usually the residents' diet orders were written as ground meat, not all ground.
-The facility did not have a menu for a ground diet so he had nothing to refer to when he served Resident #2's meal.

Interview with a medication aide (MA) supervisor on 08/22/24 at 11:57am revealed:
-Resident #2 usually received ground meat and

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL056001	A. BUILDING: _____ B. WING _____	08/23/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
GRANDVIEW MANOR CARE CENTER	150 CRISP STREET FRANKLIN, NC 28734

(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 310	Continued From page 15	D 310		

all other food was served regular consistency.
-She was not aware Resident #2 was supposed to receive all her food ground.

Interview with a personal care aide (PCA) on 08/22/24 at 11:57am revealed Resident #2 usually received ground meat and all other food was served regular consistency.

Observation of the dinner meal service on 08/22/24 at 4:45pm revealed:
-The meal consisted of a veal pattie, scalloped potatoes, tossed salad, dinner roll and Boston cream pie.
-Resident #2 was served a veal pattie that was diced into pieces about 1/2"square, scalloped potatoes, a whole dinner roll and a piece of Boston cream pie.

Interview with the evening cook on 08/22/24 at 4:50pm revealed:
-He thought Resident #2's meat was ordered as an all ground diet.
-He thought chopped was the same as ground.
-The scalloped potatoes, dinner roll and Boston cream pie were fine to serve because they were all soft.
-He started at the facility about 4-6 weeks ago and was trained by the DM.

Interview with another PCA on 08/22/24 at 5:00pm revealed Resident #2 usually received meat that was chopped up and all other food was served regular consistency.

Interview with the Administrator on 08/22/24 at 5:10pm and 08/23/24 at 2:22pm revealed:
-She did not know Resident #2 was being served the incorrect diet.
-The DM was responsible for knowing what to

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	HAL056001	A. BUILDING: _____ B. WING _____	08/23/2024

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D 310	Continued From page 16 serve on all the therapeutic diets and was responsible for serving them correctly. -She thought the current DM was properly trained by the previous DM. -The kitchen did not have a ground diet menu to reference because the previous DM took it with him when he left in April 2024. -Even though a menu was not available, the DM should have known what to serve on a ground diet.	D 310		