STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL060085	A. BUILDING: _____ B. WING _____	R 10/16/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
BROOKDALE SOUTH PARK	5326 PARK ROAD CHARLOTTE, NC 28209

(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 on October 15-October 16, 2024.	D 000		
D 263	10A NCAC 13F .0802 (e) Resident Care Plan 10A NCAC 13F .0802 Resident Care Plan (e) The facility shall assure that the resident's physician authorizes personal care services and certifies the following by signing and dating the care plan within 15 calendar days of completion of the assessment: (1) the resident is under the physician's care; and (2) the resident has a medical diagnosis with associated physical or mental limitations that justify the personal care services specified in the care plan. This Rule is not met as evidenced by: Based on record reviews, and interviews, the facility failed to ensure 1 of 5 sampled residents had an accurate care plan that was signed by a provider within 15 days of the resident being assessed (Resident #4). The findings are: Review of Resident #4's current FL2 dated 03/01/24 revealed: -Diagnoses included dementia with agitation, edema right lower legs, hypertension, hypothyroid, bi-polar disorder, and diarrhea. -Resident #4 was constantly disoriented. -The recommended level of care was memory care. Review of Resident #4's Resident Register	D 263		

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D 263	Continued From page 1 revealed an admission date of 03/04/24. Review of Resident #4's Care Plan dated 03/5/24 revealed: -Resident #4 required assistance with eating and toileting. -Resident #4 required physical assistance with dressing and grooming. -Resident #4 required reminders to use her walker or wheelchair while ambulating. -The care plan was not signed by the physician until 04/01/24. Interview with the Health and Wellness Director (HWD) on 10/16/24 at 3:15pm revealed: -She and the Assistant HWD were responsible for faxing the new care plan to the physician for a signature after it was completed. -There was no process in place to ensure care plans were signed by the physician. Interview with the Administrator on 10/16/24 at 3:27pm revealed: - Assistant HWD and HWD were responsible for completing the care plan and obtaining the physician's signature. -Care plans were supposed to be completed during the initial assessment for new residents and then annually or with significant changes in condition. -Once the care plan was completed at the initial assessment, the document was faxed or emailed to their physician within 15 days for review and to be signed.	D 263		
D 464	10A NCAC 13F.1307 Special Care Unit Res. Profile & Care Plan 10A NCAC 13F .1307 Special Care Unit Resident	D 464		

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D 464	Continued From page 2 Profile & Care Plan In addition to the requirements in Rules .0801 and .0802 of this Subchapter, the facility shall: (1) Within 30 days of admission to the special care unit and quarterly thereafter, develop a written resident profile containing assessment data that describes the resident's behavioral patterns, selfhelp abilities, level of daily living skills, special management needs, physical abilities and disabilities, and degree of cognitive impairment. (2) Develop or revise the resident's care plan required in Rule .0802 of this Subchapter based on the resident profile and specify programming that involves environmental, social and health care strategies to help the resident attain or maintain the maximum level of functioning possible and compensate for lost abilities. This Rule is not met as evidenced by: Based on interviews and record reviews, the facility failed to ensure 5 of 5 sampled residents had a Special Care Unit (SCU) resident profile completed within 30 days of admission (3) and had updated SCU resident profiles completed on a quarterly basis (1, #2, #3, #4, and #5). The findings are: 1. Review of Resident #1's current FL2 dated 02/26/24 revealed: -Diagnoses included dementia with anxiety, Alzheimer's and type 2 diabetes mellitus. -Resident #1 was constantly disoriented. -The recommended level of care was memory care.	D 464		

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D 464	Continued From page 3	D 464		

Review of Resident #1's Resident Register revealed an admission date of 11/29/23.

Review of Resident #1's record on 10/15/24 revealed:
-There were SCU quarterly profiles completed on 01/04/24 and 08/19/24.
-There were no SCU quarterly profiles completed between 01/04/24 through 08/19/24.

Refer to the interview with the Health and Wellness Director (HWD) on 10/16/24 at 11:44am.

Refer to the interview with the Administrator on 10/16/24 at 3:20pm.

2. Review of Resident #2's current FL2 dated 08/16/24 revealed:
-Diagnoses included dementia, atrial fibrillation with rapid ventricular rate and seizures.
-Resident #2 was constantly disoriented.
-The recommended level of care was memory care.

Review of Resident #2's Resident Register revealed an admission date of 10/29/15.

Review of Resident #2's record on 10/16/24 revealed:
-There were SCU quarterly profiles completed on 12/12/23 and 07/08/24.
-There were no SCU quarterly profiles completed between 12/12/23 through 07/08/24.

Refer to the interview with the HWD on 10/16/24 at 11:44am.

Refer to the interview with the Administrator on 10/16/24 at 3:20pm.

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D 464	Continued From page 4	D 464		

3. Review of Resident #3's current FL2 dated 08/27/24 revealed:
-Diagnoses included Alzheimer's Dementia, type 2 diabetes mellitus, and hypertension.
-Resident #3 was constantly disoriented.
-The recommended level of care for Resident #3 was memory care.

Review of Resident #3's resident record revealed she was admitted to the SCU on 10/03/23.

Review of Resident #3's record revealed there was no SCU resident profile completed within 30 days of admission and quarterly thereafter.

Refer to the interview with the HWD on 10/16/24 at 11:44am.

Refer to the interview with the Administrator on 10/16/24 at 3:20pm.

4. Review of Resident #4's current FL2 dated 03/01/24 revealed:
-Diagnoses included dementia with agitation, edema right lower legs, hypertension, hypothyroid, bi-polar disorder, and diarrhea.
-Resident #4 was constantly disoriented.
-The recommended level of care was memory care.

Review of Resident #4's Resident Register revealed an admission date of 03/04/24.

Review of Resident #4's record on 10/15/24 revealed:
-There was a SCU quarterly profiles completed on 03/05/24.
-There were no SCU quarterly profiles between 06/05/24 through 09/05/24.

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D 464	Continued From page 5 Refer to the interview with the Health and HWD on 10/16/24 at 11:44am. Refer to the interview with the Administrator on 10/16/24 at 3:20pm. 5. Review of Resident #5's current FL2 dated 09/27/24 revealed: -Diagnoses included dementia, chronic obstructive pulmonary disease, and cerebrovascular disease. -Resident #5 was constantly disoriented. -The recommended level of care was memory care. Review of Resident #5's Resident Register revealed an admission date of 09/07/23. Review of Resident #5's record on 10/15/24 revealed: -There was a SCU quarterly profile completed on 09/07/23. -There were no SCU quarterly profiles between 12/07/23 through 09/07/24. Refer to the interview with the HWD on 10/16/24 at 11:44am. Refer to the interview with the Administrator on 10/16/24 at 3:20pm. _____ Interview with the Health and Wellness Director (HWD) on 10/16/24 at 11:44am revealed: -She was responsible for completing the SCU resident profiles. -SCU resident profiles were to be completed upon admission and on a quarterly basis. -She was responsible for keeping a schedule when SCU resident profiles were due. -She had not been completing the residents' SCU	D 464		

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D 464	Continued From page 6 resident profiles quarterly. Interview with the Administrator on 10/16/24 at 3:20pm revealed: -He did not know SCU resident profiles had not been completed upon admission and quarterly thereafter. -The resident profile was to be completed upon admission and quarterly thereafter. -The HWD was responsible for ensuring all SCU resident profiles were completed.	D 464		