

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL064029	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 09/05/2024
NAME OF PROVIDER OR SUPPLIER SOMERSET COURT OF ROCKY MOUNT		STREET ADDRESS, CITY, STATE, ZIP CODE 918 WESTWOOD DRIVE ROCKY MOUNT, NC 27802		
(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 September 4, 2024 and September 5, 2024.	D 000	Response to the cited deficiencies do not constitute an admission or agreement by the facility of the truth of the facts alleged or conclusions set fourth in the Statement of Deficiencies or Corrective Action Report; the Plan of Correction is prepared solely as a matter of compliance with State law.	
D 306	10A NCAC 13F .0904(d)(4) Nutrition and Food Service 10A NCAC 13F .0904 Nutrition and Food Service (d) Food Requirements in Adult Care Homes: (4) Water shall be served to each resident at each meal, in addition to other beverages. This Rule is not met as evidenced by: Based on observations and interviews the facility failed to serve water at meals. The findings are: Observation of the lunch meal on 09/04/24 at 12:05pm revealed: -At 12:05pm, no water was placed on any tables in the dining hall. -At 12:15pm, the dietary staff asked the residents, "who wants water?" -Four residents raised their hands that they wanted water. -Two male residents had finished eating and left the dining hall when the dietary staff asked if anyone wanted water. Observation during the breakfast meal on 09/05/24 at 8:25am revealed: -At 8:25am, no water was placed on any tables in the dining hall.	D 306	Plan of Correction Date: 09/05/24 10A NCAC 13.F .0904(d)(4) Nutrition and Food Service It is a policy of Somerset Court of Rocky Mount to ensure all Nutrition and Food Services are adequate requirements to all. 1. The facility will ensure food and nutrition services needs are met and provide adequate requirements for each area addressed: a. The Administrator, Dietary Manager and other staff will ensure that water will be given to every resident with every meal. b. The Administrator, Dietary Manager will observe and follow-up daily to make sure this task is maintained daily. c. The Administrator and Dietary Manager will hold an in-service on 09/10/24 regarding the expectations of Nutrition and Food Service.	09/10/24 09/10/24 09/10/24

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

Executive Director

09/25/24

STATE FORM 1

6002

418N11

If continuation sheet 1 of 9

Received via fax on 10/24/24.

Reviewed and Acknowledged 10/25/24. -A. [Signature]

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D 306	Continued From page 1 -At 8:30am, the dietary staff asked the residents, "who wants water?" and one resident said, "me". -The dietary staff asked, "no one else wants water?". -Seven out of twenty-five residents said, "yes" to water. Interview with the dietary aide on 09/04/24 at 1:00pm revealed: -She was not aware that water should be served at each meal. -She gave water to residents after the meal was served. -She knew which residents wanted water. Interview with the Dietary Manger (DM) on 09/05/24 at 8:55am revealed: -She was not aware that water should be served at each meal. -She would ask the residents if they wanted water because some residents wanted water, and some did not. Interview with the Executive Director (ED) on 09/04/24 at 1:08pm revealed: -She was aware that water should be served at each meal. -She was not aware that that the residents were not being served water at their table when they sat down. -She was unsure why all residents were not being served water at each meal. -The DM was responsible to make sure residents were served water at each meal.	D 306			
D 310	10A NCAC 13F .0904(e)(4) Nutrition and Food Service 10A NCAC 13F .0904 Nutrition and Food Service	D 310	10A NCAC 13F. .0904(e)(4) Nutrition and Food Service		09/25/24

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D 310	Continued From page 2 (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 to 2 of 5 sampled residents (#3 and #4) including a mechanical soft chopped (MSC) diet. The findings are: 1. Review of Resident #3's current FL-2 dated 04/15/24 revealed: -Diagnoses included hypertension, enlarge prostate, diverticulosis, intestinal polyp, peptic ulcer, and myotonic dystrophy type 2. -There was a diet order for a mechanical soft (MSC) chopped diet. Observations during the initial kitchen tour on 09/04/24 at 12:33pm revealed: -There was a resident diet list order posted on the wall above the kitchen sink. -Resident #3 was listed as having a regular mechanical soft chopped diet. Observation of Resident #3's lunch meal served on 09/04/24 from 12:08pm to 12:25pm revealed: -Resident #3's meal served was a ham sandwich, grapes and strawberries, and tea. -He consumed 50% of the ham sandwich, 90% of the grapes and strawberries, and 50% of the tea. -The ham sandwich was not chopped. Observation of Resident #3's dinner meal served on 09/04/24 from 4:35pm to 4:55pm revealed: -Resident #3's meal served was a turkey	D 310	It is the policy of Somerset Court to ensure nutrition and food service are adequate. The facility will ensure that food and nutrition is met and provide adequate requirements for each area addressed. a. Administrator will reiterate to the dietary staff the importance of reporting any issues regarding nutrition and food service immediately in an in-service on 09/10/24. The in-service will be given by the Administrator and the Dietary Manager and will be given on proper procedures for therapeutic diets and following the correct physician orders. It will also show the proper texture of the correct therapeutic diets to be given daily. 09/10/24 b. Administrator and Dietary Manager will ensure food and nutrition are properly administered by following up with random weekly audits using the physician orders and checking for the correct textures of the diets for each meal. 09/10/24 c. The Administrator and the Dietary Manager will ensure food and nutrition at all meals will be maintained by observing each therapeutic diet each meal, and will address any identified concerns immediately. 09/10/24 d. Administrator will meet with the Dietary Manager and dietary staff monthly to discuss any concerns and to follow up on all progress as well. 09/16/24 09/25/24	

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D 310	Continued From page 3 sandwich, zesty pasta salad, fruit cup, and tea. -He consumed 70% of the turkey sandwich, 50% of the zesty pasta salad, 30% of the fruit cup, and 75% of the tea. -The turkey sandwich was not chopped. Observation of Resident #3's breakfast meal served on 09/05/24 from 8:25am to 8:45am revealed: -Resident #3's meal served was eggs, bacon, cheese, grits, orange juice, water, and apple juice. -He consumed 100% of the eggs, 90% of the bacon, 90% of the cheese, 75% of the grits, 100% of the orange juice, 50% of the water, and 50% of the apple juice. -On the diet extension, chopped sausage with gravy should have been served and not bacon. Interview with the Cook on 09/04/24 at 12:26pm revealed: -She was aware that Resident #3 had an order for a MSC diet. -She was aware that Resident #3 was served a sandwich that was not chopped. -He ate sandwiches a lot and they did not need to be chopped. Second interview with the Cook on 09/04/24 at 4:55pm revealed: -Resident #3 did not like his sandwiches to be chopped. -She had not notified her manager or anyone else about this dietary concern. Interview with the Dietary Manager (DM) on 09/05/24 at 8:55am revealed: -She was aware that Resident #3 had an order for a MSC diet. -She was not aware that Resident #3 was served	D 310		09/25/24	

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D 310	Continued From page 4 a sandwich that was not chopped on 09/04/24. -Two months earlier, could not give an exact date, she notified the Resident Care Coordinator (RCC) that Resident #3 did not wish to have his sandwiches chopped. -The RCC spoke with the primary care provider (PCP) and said the diet order could not be changed because of the resident's issue with choking. -She was not aware that Resident #3 was served bacon on 09/05/24. -She was not sure why the cook did not go by the diet extension. -During dietary meetings, she addressed dietary needs, and that staff should cook what was on the diet extension for a MSC diet. -She was responsible to make sure all diets were served correctly. Interview with the (RCC) on 09/05/24 at 9:20am revealed: -She was aware that Resident #3 had an order for a MSC diet. -She was not aware that Resident #3 was served a sandwich that was not chopped on 09/04/24. -She was not aware that Resident #3 was served bacon on 09/05/24. -She did not recall being notified by the DM about Resident #3's request to change his dietary order from MSC. -If a resident wanted to change their dietary order, she would notify the PCP with a request to change their dietary order and wait for an approve or deny response. Interview with the Executive Director (ED) on 09/05/24 at 9:35am revealed: -She was aware that Resident #3 had an order for a MSC diet. -She was not aware that Resident #3 was served	D 310		09/24/24	

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D 310	Continued From page 5 a sandwich that was not chopped on 09/04/24. -She was not aware that Resident #3 was served bacon on 09/05/24. -She was not aware that dietary did not go by the diet extension on 09/04/24 and 09/05/24. -She expected the dietary staff to follow the diet order. -The DM was to notify the RCC or her when a resident was having issues with their dietary needs. -The RCC was in direct contact with the PCP about resident's dietary needs and changes. -The DM and the RCC were responsible for making sure residents received the diet the PCP ordered. Telephone interview with Resident #3's primary care provider (PCP) on 09/05/24 at 12:35pm revealed: -Resident #3 was on a MSC diet. -She was not aware that he was not provided the diet as ordered. -If he had a diet order for chopped meats, he should be getting that order. -If there was a special request, the facility must get approval from the PCP to change the diet order. -A MSC diet was to make sure a resident was getting foods that were easy to chew and swallow. -Her expectation was that the staff should follow the diet order. Based on observation, interviews, and record review, it was determined Resident #3 was not interviewable. 2. Review of Resident #4's current FL-2 dated 04/15/24 revealed: -Diagnoses included hypertension, myotonic	D 310			09/25/24

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D 310	Continued From page 6 dystrophy type 2 with neuropathy, memory loss and impairment, and vitamin D deficiency. -There was a diet order for no added table salt (NATS) and a mechanical soft chopped (MSC) diet. Observations during the initial kitchen tour on 09/04/24 at 12:33pm revealed: -There was a resident diet list order posted on the wall above the kitchen sink. -Resident #4 was listed as having a (NATS) and (MSC) diet. Observation of Resident #4's dinner meal served on 09/04/24 from 4:35pm to 4:55pm revealed: -Resident #4's meal served was a turkey sandwich, zesty pasta salad, fruit cup, and tea. -She consumed 100% of the turkey sandwich, 80% of the zesty pasta salad, 50% of the fruit cup, and 75% of the tea. -The turkey sandwich was not chopped. Observation of Resident #4's breakfast meal served in her bedroom on 09/05/24 from 8:00am to 8:20am revealed: -Resident #4's meal served was eggs, bacon, cheese, grits, orange juice, water, and coffee. -She consumed 100% of the eggs, 75% of the bacon, 50% of the cheese, 75% of the grits, 0% of the orange juice, 50% of the water, and 50% of the coffee. -On the diet extension, chopped sausage with gravy should have been served and not bacon. Interview with the Cook on 09/04/24 at 4:55pm revealed: -She was aware that Resident #4 had an order for a MSC diet. -Resident #4 was not supposed to get a whole sandwich.	D 310		09/25/24	

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D 310	Continued From page 7 -She was responsible to make sure all diets were served correctly. Interview with the Dietary Manger (DM) on 09/05/24 at 8:55am revealed: -She was aware that Resident #4 had an order for a MSC diet. -She was not aware that Resident #4 was served a sandwich that was not chopped on 09/04/24. -She was not aware that Resident #4 was served bacon on 09/05/24. -She was not sure why the cook did not go by the diet extension. -During dietary meetings, she addressed dietary needs, and that staff should cook what was on the diet extension for a MSC diet. -She was responsible for making sure all diets were served correctly. Interview with the Executive Director (ED) on 09/05/24 at 9:35am revealed: -She was aware that Resident #4 had an order for a MSC diet. -She was not aware that Resident #4 was served a sandwich that was not chopped on 09/04/24. -She was not aware that Resident #4 was served bacon on 09/05/24. -She was not aware that dietary did not go by the diet extension on 09/04/24 and 09/05/24. -She expected the dietary staff to follow the diet order. -The DM and the RCC were responsible for making sure residents received the diet the primary care provider (PCP) ordered. Telephone Interview with Resident #4's (PCP) on 09/05/24 at 12:35pm revealed: -Resident #4 was on a NATS and a MSC diet. -She was not aware that she was not provided the diet as ordered and was given a sandwich	D 310		09/24/24	

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D 310	Continued From page 8 that was not chopped. -She was not aware that Resident #4 ate breakfast in her bedroom. -Eating in the bedroom raised concerns because she was not being monitored and could choke while she was eating, and no one may be there to assist her. -Receiving the "wrong" food that was not a MSC diet was a choking hazard for Resident #4. -If she had a diet order for chopped meats, she should be getting that order. -A MSC diet was to make sure a resident was getting foods that were easy to chew and swallow. -Her expectation was that the staff should follow the diet order. Based on observation, interviews, and record review, it was determined Resident #4 was not interviewable.	D 310			
				 09/25/24	

Fax Transmission

Attention to:-

Name: Hope Forte

Company: Health Services

Fax: 1-919-733-9379

Date: 10-24-2024

Time: 03:30:02 P

From:-

Name: Somerset Court of Rocky Mount

Company: ALG Senior Living

Fax:

Telephone:

Pages: 11

RE: POC

Comments/Notes:

From Sonya Porter

918 Westwood Drive
Rocky Mount, NC 27803
(252) 443-5592
(252) 446-8869 (Fax)

**Somerset Court of
Rocky Mount**

Fax

To:	Hope Forte	From:	Somerset Court of Rocky Mount
Fax:	1-919-733-9379	Pages:	10
Phone:	1-919-855-3351	Date:	10/24/24
Re:	Sonya Porter	CC:	

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Comments:

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