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
	HAL034087	A. BUILDING: _____ B. WING _____	11/08/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
FOREST HEIGHTS SENIOR LIVING COMMUNITY	2500 POLO RIDGE COURT WINSTON SALEM, NC 27106

(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 11/06/24 to 11/08/24.	D 000		
D 273	10A NCAC 13F .0902(b) Health Care 10A NCAC 13F .0902 Health Care (b) The facility shall assure referral and follow-up to meet the routine and acute health care needs of residents. This Rule is not met as evidenced by: TYPE B VIOLATION Based on interviews and record reviews, the facility failed to ensure follow-up with a physician for 1 of 5 sampled residents who had blood pressure checks for routine monitoring and blood pressure checks with parameters (Resident #5). The findings are: Review of Resident #5's current FL2 dated 06/06/24 revealed diagnoses including hypertension, syncope and collapse, and orthostatic syncope. Review of Resident #5's Resident Register revealed the resident was admitted to the facility on 06/10/24. Review of Resident#5's progress notes revealed Resident #5 had an unwitnessed fall on 09/16/24 and was sent to a local emergency department (ED) for evaluation for possible head injury. Review of Resident #5's electronic triage note revealed: -On 09/27/24, a medication aide (MA) contacted	D 273		

This Plan of Correction is not to be construed as an admission of our agreement with the findings and conclusions in the Statement of Deficiencies, or any related sanction or fine. Rather, it is submitted as confirmation of our ongoing efforts to comply with statutory and regulatory requirements. In this document, we have outlined specific actions in response to identified issues. We have not provided a detailed response to each allegation or finding, nor have we identified mitigating factors.

10A NCAC 13F .0902(b) HealthCare

- The Executive Director, or designee will review all resident orders for accuracy. Community is moving to eMAR system 12/5/2024. All orders entered into electronic system for administration for increased accuracy.
- The Director of Health and Wellness, or designee to review all orders, new and existing for accuracy. Community to use new order tracking form. Director of Health and Wellness, or designee to review and confirm all new orders.
- Health and Wellness Assistant to review new order tracking forms daily; Director of Health and Wellness to review forms weekly; Executive Director to review monthly.
- The date of correction for this deficiency will not exceed December 23, 2024.

10A NCAC 13F .0904(c)(7) Nutrition And Food Service

- The Dining Services Director, or Designee will ensure therapeutic diet menus to match each therapeutic diet offered by the facility.
- The Dining Services Director, or Designee will ensure dietary staff utilize therapeutic menus for all therapeutic diets offered by the facility, and ordered by a resident physician.
- The Dining Services Director will review menus weekly. The Executive Director will review monthly.
- The date of correction for this deficiency will not exceed December 23, 2024.

10A NCAC 13F .0904(d)(4) Nutrition And Food Service

- The Dining Services Director, or Designee will ensure that water is served to each resident at each meal.
- The date of correction for this deficiency will not exceed December 23, 2024.
- The Memory Care Director, or designee will monitor water being served for all meals daily for two weeks; then weekly for two weeks; then periodically thereafter. Executive Director will review monthly.
- The date of correction for this deficiency will not exceed January 6, 2025.

10A NCAC 13F .0904(e)(4) Nutrition And Food Service

- The Dining Services Director, or Designee will ensure therapeutic diet menus to match each therapeutic diet offered by the facility.
- The Dining Services Director, or Designee will ensure dietary staff utilize therapeutic menus for all therapeutic diets offered by the facility, and ordered by a resident physician.

- The Dining Services Director will review menus weekly. The Executive Director will review monthly.
- The date of correction for this deficiency will not exceed December 23, 2024.

10A NCAC 13F .1004(a) Medication Administration

- The Executive Director, or designee will review all resident orders for accuracy. Community is moving to eMAR system 12/5/2024. All orders entered into electronic system for administration for increased accuracy.
- The Director of Health and Wellness, or designee to review all orders, new and existing for accuracy. Community to use new order tracking form. Director of Health and Wellness, or designee to review and confirm all new orders.
- Health and Wellness Assistant to review new order tracking forms daily; Director of Health and Wellness to review forms weekly; Executive Director to review monthly.
- The date of correction for this deficiency will not exceed December 23, 2024.