

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL056001	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____		(X3) DATE SURVEY COMPLETED R-C 12/04/2025
NAME OF PROVIDER OR SUPPLIER GRANDVIEW MANOR CARE CENTER			STREET ADDRESS, CITY, STATE, ZIP CODE 150 CRISP STREET FRANKLIN, NC 28734		
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D 000	Initial Comments The Adult Care Licensure Section and Macon County Department of Social Services conducted a follow-up survey and complaint investigation on 12/03/25 and 12/04/25. The complaint investigation was initiated on 10/28/25.	D 000			
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. This Rule is not met as evidenced by: Based on interviews and record reviews, the facility failed to have a matching therapeutic diet menus for food service guidance for 1 of 3 sampled residents (#4) who had a physician's order for a mechanical soft and ground meat moistened with gravy diet. The findings are: Review of Resident #4's current FL2 dated 08/05/25 revealed: -Diagnoses included dementia, senile degeneration of the brain, Barrett's esophagus (a condition resulting from a change in the lining of the esophagus due to chronic gastrointestinal reflux disease), gastroesophageal reflux disease	D 296			

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

Deborah Shum for Grandview Manor Care Center

TITLE

*Ex Director
Manager*

(X6) DATE

1/21/26

STATE FORM

6899

VB2D11

If continuation sheet 1 of 13

LSB

Reviewed and acknowledged 1/26/26

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D 296	Continued From page 1 and hiatal hernia. -Resident #4's level of care was documented as domiciliary, special care unit (SCU). Review of Resident #4's physician's order dated 11/26/25 revealed a mechanical soft diet and ground meats moistened with gravy. Review of Resident #4's hospice progress note dated 11/26/25 revealed the facility staff requested a change to Resident #4's diet due to having more "gurgling" after eating. Review of the facility's undated therapeutic diet menu for the fall cycle week 1 revealed: -Monday and Tuesday's menu had a column labeled mechanical ground and there was no column for mechanical soft. -Wednesday, Thursday, Friday, Saturday, and Sunday's menu had a column labeled mechanical soft and there was no column for mechanical ground. -Tuesday's mechanical ground breakfast menu included 2 slices of bacon with no alteration to the texture of the bacon. -Thursday and Saturday's mechanical soft breakfast menu included a 1-ounce sausage patty with no alteration to the texture of the sausage. Interview with the cook on 12/04/25 at 8:50am revealed: -He started working for the facility in June 2025 and was trained by the former cook to prepare mechanical soft diets the same as mechanical ground diets. -The foods prepared for meals were ground up also for the mechanical soft diets. -He was responsible for cooking the food and the dietary aide was responsible for preparing the	D 296			

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D 296	Continued From page 2 therapeutic diets for residents. Interview with the dietary aide/cook on 12/03/25 at 10:20am revealed: -He was not aware there was no ground meat diet menu available for Wednesday, 12/03/25. -He worked for the facility for 2 years and the menus were the same ones he had referenced since he started. -He did not know why some days on the menu had mechanical soft diets available and the other days had mechanical ground available. -There was not another menu available where the mechanical soft and mechanical ground were both listed for a reference. -He prepared both diet orders the same way for both diets and always ground the meat for a resident with orders for a mechanical soft diet or a mechanical ground diet. Telephone interview with the registered dietician (RD) who signed the facility's menus on 12/04/25 at 9:36am revealed: -She created menus in the past including therapeutic diets for a menu supply company who was listed on the menu used by the facility. -She thought the menus were altered from how she originally made them because she would never put bacon on a mechanical soft diet or on a mechanical ground diet because bacon was too much of a choking hazard and was too crispy. -She would never put tortilla chips on the menu as a snack to be served on Wednesday, fall cycle week 1, for a mechanical soft diet because tortilla chips were too hard. -She would not have put to serve a carrot on Friday, fall cycle week 1, for a mechanical soft diet unless the carrot was cooked soft because carrots were too hard.	D 296			

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D 296	Continued From page 3 Telephone interview with the facility's contracted RD, licensed dietitian nutritionist (LDN) on 12/04/25 at 3:33pm revealed: -She was contacted by the facility within the past couple months and asked to create new diet menus including therapeutic diets because the facility's current menus did not include all the therapeutic diets offered by the facility. -The menus she was working on would not be available until the beginning of 2026. -She did supply the facility with a pureed menu already because there was not one available. -A mechanical soft diet included soft foods, but the meat did not always have to be ground. -Hard fruits/vegetables/breads, cornbread, or hard meats like bacon were never included on a mechanical soft diet. -A ground meat diet required all meats to be ground up, and gravy added for moistness and bacon was never included on a ground meat diet because it could not be ground up. -A mechanical soft diet and a mechanical ground diet were two different diet orders and would not necessarily contain the same foods. -The facility staff would need a therapeutic diet menu for each type of diet ordered to provide guidance to know how to prepare each therapeutic diet ordered. Interview with the Administrator on 12/03/25 at 4:01pm revealed: -The facility's current menus were old menus purchased by the former Administrator and current Executive Director. -The menus were "a mess" and many of the therapeutic diet menus available were not offered as a type of therapeutic diet by the facility. -The facility did not previously have a pureed diet or a full liquid diet menu available and had residents with orders for those diets, so the newly	D 296			

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D 296	Continued From page 4 contracted RD created a menu for those diets. -The facility contracted the RD to create new menus for the facility, but they were not available for use yet. -She was not aware that there was not a therapeutic diet menu available for staff guidance for each day for each type of therapeutic diet ordered.	D 296	D 296 New winter menus were received on 12/5/2025. They are being implemented and will be used by 1/31/2026. Diet Order Sheets are being revised as needed to coordinate with the menus. A Survey of food service was conducted on 12/9/2026 and recommendations are being utilized by the dietary staff. Fels class on Therapeutic Diets is required of all staff to be completed by 1/31/2026.		1/31/2026
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. This Rule is not met as evidenced by: TYPE B VIOLATION Based on observations, interviews and record reviews the facility failed to provide snacks to all residents between meals for a total of three snacks per day. The findings are: Interview with a resident on 12/03/25 at 9:17am revealed he only received a beverage as a snack	D 298	Administration is responsible for overseeing the menu transition and ensuring compliance by dietary staff. D 298 Snack on new menus include both foods and beverages. Administration will ensure that menus are being followed.		1/31/2026

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D 298	Continued From page 5 between meals. Interview with a second resident on 12/03/25 at 9:19am revealed: -The facility did not provide snacks. -He got hungry between meals and had to buy his own snacks. Interview with a third resident on 12/03/25 at 9:20am revealed the staff only offered juice between meals as a snack. Interview with a fourth resident on 12/03/25 at 9:34am revealed: -The facility did not provide him any snacks and he got hungry between meals. -He bought some snacks with his own money to keep in his room. -He asked staff for a snack and was told the staff were not allowed to give him anything. Interview with a fifth resident on 12/03/25 at 9:40am revealed she received coffee for morning snack. Interview with a sixth resident on 12/03/25 at 9:42am revealed: -The facility did not provide snacks, "they don't seem to care about that." -He would like a snack between meals because he got hungry occasionally. -He previously asked staff for something to eat when it was not a meal time and was told he had to wait until it was time to eat again. Interview with a seventh resident on 12/03/25 at 9:43am revealed beverages only were offered at snacktime. Interview with a eighth resident on 12/03/25 at	D 298			

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D 298	Continued From page 6 9:48am revealed: -Cookies used to be served at snacktime but that stopped a week or two ago and now he only received a beverage. -He "heard" the Executive Director said snack foods were too expensive and when he requested food between meals from the dietary aide he was told the kitchen could not get them. -He would like to receive both food and beverages at snacktime. Interview with a ninth resident on 12/03/25 at 9:54am revealed the facility did not offer snacks. Observation of the snack cart in the Special Care Unit hallway on 12/03/25 at 9:37am revealed: -Beverages from the snack cart were being distributed by a dietary aide. -Coffee, tea, water, cranberry juice and apple juice were available for the residents to choose. -No food was available on the snack cart. Interview with a dietary aide on 12/03/25 at 9:37am revealed: -The morning snack documented on the daily menu was either juice or a half piece of fresh fruit. -Most of the residents were unable to eat the fresh fruit so juice was offered instead. -Sometimes food was served but "usually" just a beverage was offered at snack. Observation of a dietary aide and a snack cart in the assisted living hallway on 12/03/25 at 10:02am revealed: -The dietary aide was going to each resident room and offering the residents different types of juice or water. -There were no food items on the rolling cart.	D 298			

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D 298	Continued From page 7 Interview with the dietary aide on 12/03/25 at 10:02am revealed: -He was passing out juice or water to the residents for the morning snack. -The menu in the kitchen read to give either cranberry juice or a pear for snack but most of the residents could not eat a pear due to chewing difficulties so he just gave residents juice or water. -He did not have any food items to offer as a snack on the cart. -He gave the residents juice three times per day for their snack. Interview with the Executive Director on 12/03/25 at 4:10pm and 4:15pm revealed: -The menu indicated we could serve a juice or a fruit so we chose to serve the juice. -Most of the residents on the assisted living side of the facility have their own snack box. -If a resident requested a snack they were provided one but food was not offered on the snack cart that was passed three times a day. -Snacks were donated to the facility by families and churches. -The facility purchased snacks in addition to those donated by families and churches. -Snacks were stored in a closet of the facility manager's office. Observation of a closet in the facility manager's office on 12/03/25 at 4:15pm revealed there were several clear storage bins that contained a variety of snack foods. Interview with the Dietary Manager on 12/04/25 at 11:11am revealed: -She was hired as a dietary aide and worked for one week before she was promoted to Dietary Manager in July 2025.	D 298			

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D 298	Continued From page 8 -The menu in the kitchen read to give the residents either juice or a food item like an apple for snacks. -She was instructed by the Executive Director to only offer the residents juice for a snack since she had worked at the facility. -Many residents asked her for a food snack every day and she told them she was sorry, but she was not allowed to give out any extra food. -She got "into trouble" last week for ordering and giving the residents 2 peanut butter crackers each during a snack time. -The Executive Director got mad at her for ordering the peanut butter crackers and wanted her to send the remaining crackers back to the food service supply company. -She did not know why food snacks were not allowed to be given to the residents. Interview with the Administrator on 12/03/25 at 4:01am revealed: -The facility's menu had juice or a food snack listed for the snack times. -Food snacks were not offered because the kitchen staff adhered to the menu and gave the residents juice instead of food items. The facility failed to provide three food snacks each day to residents between meals. This resulted in residents becoming hungry and when they asked staff for a food snack they were told only juice was provided and they must wait until the next meal time for food. Some residents chose to purchase their own snacks to keep in their room so they did not go hungry. This failure was detrimental to the health and welfare of the resident and constitutes a Type B Violation. The facility provided a plan of protection in accordance with G.S. 131D-34 on 12/12/25 for	D 298		

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D 298	Continued From page 9 this violation. CORRECTION DATE FOR TYPE B VIOLATION SHALL NOT EXCEED JANUARY 18, 2026.	D 298			
D 428	10A NCAC 13F .1106 (b) Settlement Of Cost Of Care 10A NCAC 13F .1106 Settlement Of Cost Of Care (b) When a resident moves out of the facility without giving notice, as may be required by the facility according to Rule .0702(i) of this Subchapter, or before the facility's required notice period has elapsed, the facility shall charge the resident no more than the amount equal to the cost of care for the required notice period. If a resident receiving State County Special Assistance moves before the facility's required notice period has elapsed, the facility may charge the resident for the required notice period. The facility shall refund the resident the remainder of any advance payment following settlement of the cost of care. The refund shall be made within 14 days from the date of notice or, if no notice is given, within 14 days after the resident leaves the facility. This Rule is not met as evidenced by: Based on interviews and record reviews, the facility failed to provide 1 of 1 sampled residents (#3) a refund of room and board charges within fourteen days after the resident moved out of the	D 428			

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D 428	Continued From page 10 facility. The findings are: Review of Resident #3's current FL2 dated 10/03/25 revealed: -Diagnoses included high blood pressure and dementia. -The recommended level of care was special care unit (SCU). Review of Resident #3's Resident Register revealed he was admitted from his home on 10/07/25. Interview with Resident #3's Power of Attorney (POA) on 10/03/25 at 11:45am revealed: -Resident #3 was admitted to the SCU on 10/07/25. -She paid the facility \$3200 for one month room and board for Resident #3. -During the admission process on 10/07/25 the Special Care Coordinator (SCC) informed her that if during the first 30 days she changed her mind and decided to take the resident back to his home to live she would not get a refund because the facility did not charge an admission fee. -She visited Resident #3 on 10/09/25 and was unhappy with his care. -She telephoned the facility on the morning of 10/10/25 to inform them she was moving Resident #3 back home that day and he would not be back to live at the facility. -She moved Resident #3 out of the facility at 10:00am on 10/10/25. -She did not understand why she was not reimbursed for the room and board charge when Resident #3 was only in the facility from 10/07/25 - 10/10/25.	D 428		

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D 428	Continued From page 11 Review of the Admission Agreement for Resident #3 revealed: -It was signed and dated by the POA and Executive Director (ED) on 10/07/25. -The basic monthly rate for private pay residents was \$3200. -At the time of discharge refunds of any money due after deducting any amounts owed would be promptly refunded. -There was no documentation that any money due after discharge would not be refunded if the discharge occurred during the first 30 days. Review of a facility's accounting statement for Resident #3 revealed the facility received \$3200 for one month's room and board on 10/01/25. (The cost of care for 10/07/25 - 10/10/25 and the 14 day notice period (10/11/25 - 10/24/25) was \$1920 and \$1280 should have been refunded.) Interview with the SCC on 10/03/25 at 2:22pm revealed: -The first month's room and board charge was nonrefundable because there was not an admission fee. -She informed Resident #3's POA during the admission process on 10/07/25. Interview with the Administrator on 10/03/25 at 3:55pm revealed: -She was sure that residents needed to give a two weeks' notice if they were going move out of the facility otherwise the remainder month's room and board charge would not be refunded. -She was not part of Resident #3's admission process and did not know what occurred. -The ED was responsible for processing refunds. Interview with the Executive Director (ED) on 10/03/25 4:00pm revealed:	D 428			

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D 428	Continued From page 12 -She was not part of Resident #3's admission process but knew there was a verbal agreement that the first month's room and board charge would not be refunded if the POA took him back home to live before the end of the month. -The facility "normally" required a two weeks' notice of discharge. -The POA did not ask her for a refund. Based on interviews and record review Resident #3 was not interviewable.	D 428	D 428 Fourteen day notice was billed and refund consistent with written facility policies and regulation was sent to resident's POA. Administration to review facility contract with admissions' staff.		12/29/25 1/31/2026