

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>FCL073011</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING: _____	(X3) DATE SURVEY COMPLETED  <b>R-C</b> <b>12/22/2014</b>
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NAME OF PROVIDER OR SUPPLIER  <b>GOLDEN YEARS FAMILY CARE HOME</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>410 MONTFORD DRIVE ROXBORO, NC 27573</b>
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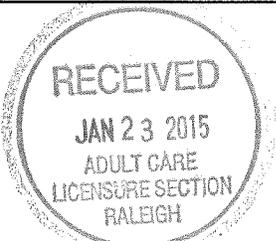
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
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C 000	Initial Comments  The Adult Care Licensure Section and the Person County Department of Social Services conducted a follow-up survey and complaint investigation onsite on December 18, 2014, - December 19, 2014 with exit conference via telephone on December 22, 2014.	C 000		
{C 074}	<p>10A NCAC 13G .0315(a)(1) Housekeeping and Furnishings</p> <p>10A NCAC 13G .0315 Housekeeping And Furnishings (a) Each family care home shall: (1) have walls, ceilings, and floors or floor coverings kept clean and in good repair; This Rule shall apply to new and existing homes.</p> <p>This Rule is not met as evidenced by: Based on observation and interview, the facility failed to assure walls, ceilings, and floors were kept clean and in good repair in 4 of 4 resident rooms, 2 of 2 resident bathrooms, the living room, dining room, kitchen, and hallway. The findings are:</p> <p>Observation of Resident #1's bedroom on the left hall on 12/18/14 at 9:40 a.m. revealed: - Brown spill stains and several nail holes were on the right side wall. - Cobwebs were hanging from the ceiling and in the corners of the walls and across and into the drapery lattice area. - The window blinds were dusty and dirty. - There was a diagonal crack about 8 inches in length on the wall going up from the top of the door frame.</p> <p>Interview on 12/18/14 at 9:45 a.m. with the</p>	{C 074}	<p><i>Resident 1st Bedroom will be repaired and cleaned thoroughly admin will ck all rooms once a week for cleanliness will ck entire house all over for repairs etc.</i></p>	<p><i>Feb 1/15</i></p> <p><i>Admin</i></p>

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE: Susan Brown TITLE: admin. (X6) DATE: Jan 19/2015

STATE FORM 6899 VZV513 If continuation sheet 1 of 31

*2/16/15 TC - No response fr POCA - Lfinaq km  
2/25/15 No call track fr POCA - will send POCA form  
3/5/15 Approved a telephone address... KML*



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{C 074}	<p>Continued From page 1</p> <p>Supervisor-In-Charge (SIC) revealed:</p> <ul style="list-style-type: none"> <li>- The SIC did not know how to the crack and the tan smears on the walls happened.</li> <li>- If there were areas on the walls or ceilings she would wipe them down.</li> <li>- She did not know the cobwebs were on the ceiling and drapery area.</li> <li>- Resident # 1 did not like people to go into his room to clean or fix things.</li> <li>- The SIC mopped and swept the floors and cleaned bathrooms daily.</li> <li>- She was not aware of a deep cleaning schedule for the facility.</li> <li>- The Administrator cleaned the facility as well.</li> </ul> <p>Observation on 12/18/14 at 9:48 a.m. revealed:</p> <ul style="list-style-type: none"> <li>- The SIC used a broom and swiped at the ceiling and drapery cobwebs.</li> <li>- She left the room leaving dust and cobwebs hanging from the ceiling and drapery area.</li> </ul> <p>Interview with Resident #1 on 12/19/14 at 11:30 a.m. revealed:</p> <ul style="list-style-type: none"> <li>- Staff cleaned all the time in the facility.</li> <li>- Staff sweep and mop.</li> <li>- The resident did not need staff to clean his room because he could do it himself.</li> <li>- The facility is clean and is not a problem.</li> </ul> <p>Observation of the last bedroom on the left hall on 12/18/14 at 10 a.m. revealed:</p> <ul style="list-style-type: none"> <li>- The right wall had brownish marks and stains.</li> <li>- This wall had a small hole on the far end and an unrepaired slit hole behind the doorknob area.</li> <li>- The back wall had a 1 inch unrepaired hole.</li> <li>- The walls had some hole repairs visible but the walls had not been repainted.</li> <li>- There were no doors on the closet.</li> </ul> <p>Observation on 12/18/14 at 10:15 a.m. of the first</p>	{C 074}		
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{C 074}	<p>Continued From page 2</p> <p>bedroom off of the dining room revealed:</p> <ul style="list-style-type: none"> <li>- Brownish stains and spills and scuff marks on the walls under the window.</li> <li>- A crack repair in the wall starting above the door frame and extending out approximately 4 feet wide was unpainted.</li> <li>- Area of the left hand window frame was broken off and was approximately 2 inches wide and 3 feet long.</li> <li>- The broken area was painted over on the window frame.</li> <li>- There was peeling paint on the ceiling near the air vent.</li> </ul> <p>Observation of the back bed room off the dining room on 12/18/14 at 10:45 a.m. revealed:</p> <ul style="list-style-type: none"> <li>- Dust, dirt, leaves, and twigs, and food pieces and food particles were scattered on the floor.</li> </ul> <p>Observation of bathroom in the back bedroom on 12/18/14 at 10:48 a.m. revealed:</p> <ul style="list-style-type: none"> <li>- Multiple yellow and brown stains on the floor around the toilet making the floor sticky.</li> <li>- Brown rust stains on the walls.</li> <li>- Build up of dirt buildup in the corners near the tub and and dust and particles of dirt on the floor.</li> <li>- The spaces between the tiles in the grouted areas were dirty.</li> </ul> <p>Observation of the resident bathroom near the kitchen on 12/18/14 at 10:15 a.m. revealed:</p> <ul style="list-style-type: none"> <li>- Brown stains and nail holes in the walls.</li> <li>- Floor had dirt, debris, brown stains, and sticky coating.</li> <li>- Baseboards dusty and dirty.</li> <li>- Build up of black dirt and particles behind the</li> </ul>	{C 074}	<p>Bathrooms will be cleaned daily admin will do for major repairs throught the house once a month. Staff is to tell admin if she sees something that needs to be done also.</p> <p>a cleaning service will be called in to do a thorough cleaning once a month. daily &amp; weekly cleaning of entire house will be done by staff</p>	<p>2/9/15 monitored in</p>
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{C 074}	<p>Continued From page 3</p> <p>door in the corner.</p> <ul style="list-style-type: none"> <li>- The ceiling around the vent had peeling paint and brownish black stains around it.</li> <li>- Ceiling over the vanity lights had black circular areas above each of the six light bulb in the light fixture.</li> <li>- The shower stall tiles were broken and loose around the faucet and there were areas of mold growth.</li> <li>- The floor at the caulk line against the side of the tub was spongy to stepping on it.</li> <li>- When the floor was stepped on near the side of the tub the caulk pulled away from the tub.</li> </ul> <p>Observation of the main left hallway on 12/18/14 at 11:45 a.m. revealed:</p> <ul style="list-style-type: none"> <li>- There was a large hole behind a picture approximately 6 inches in diameter was on the left wall.</li> <li>- It had not been repaired and was hidden .</li> </ul> <p>Recheck of the resident bathroom near the kitchen on 12/18/14 at 2:30 p.m. revealed:</p> <ul style="list-style-type: none"> <li>- The floor was clean but build up along baseboards and in corners remained.</li> <li>- The bath stall tiles had been cleaned but continued to have some mold growth left.</li> <li>- Ceiling over the vanity lights continued to have the black circular areas above each of the six light bulb in the light fixture.</li> <li>- Peeling paint on the ceiling around the air vent remained.</li> </ul> <p>Observation of the dining room on 12/18/14 at 10:40 a.m. revealed:</p> <ul style="list-style-type: none"> <li>- Crumbs, dirt, and pieces of leaves were on the floor under the dining room table.</li> <li>- Balls of dust on the ceiling all over the dining</li> </ul>	{C 074}		
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{C 074}	<p>Continued From page 4</p> <p>room including over the table around the ceiling fan.</p> <ul style="list-style-type: none"> <li>- Ceiling vent had yellowish stains around it.</li> </ul> <p>Observation of the kitchen on 12/18/14 at 10:42 a.m. revealed:</p> <ul style="list-style-type: none"> <li>- Cracked tiles where the floor transitioned from the kitchen to the dining room.</li> <li>- Kitchen floor had dirt build up in the spaces between tiles with dirt and debris throughout.</li> </ul> <p>Telephone interview with the Administrator on 12/18/14 at 9:30 a.m. revealed:</p> <ul style="list-style-type: none"> <li>- The Administrator had completed a lot of work on the housekeeping in the facility.</li> <li>- Staff were to clean daily with mopping floors and cleaning bathrooms.</li> <li>- The Administrator deep cleaned bathroom tiles the kitchen appliances and more one time per month.</li> <li>- Cleaning had lessened recently due to illness and personal concerns.</li> <li>- The cracks in the walls of bedrooms had been repaired.</li> </ul> <p>Interview with the Administrator on 12/18/14 at 11:20 a.m. revealed:</p> <ul style="list-style-type: none"> <li>- She could not explain why the facility was in such an unclean condition because staff were to clean daily.</li> <li>- The Administrator completed more indepth cleaning about 1 time per month.</li> <li>- She had not been in quite as often recently because of illness.</li> </ul> <p>Interview with the SIC on 12/18/14 at 5:10 p.m. revealed:</p>	{C 074}		
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{C 074}	Continued From page 5 - They do not have a housekeeper at the facility. - The environmental condition of the facility was much the same since she started back to working the facility in February 2014. - Some areas such as floor tiles, furniture and the kitchen had been improved. - There is no cleaning schedule. - She had not seen a cleaning checklist before. - She cleans the kitchen and the common areas like the dining room and hallways. - She does not do indepth cleaning in the bathrooms because the Administrator does deep cleaning one time per month.	{C 074}		
{C 078}	10A NCAC 13G .0315(a)(5) Housekeeping and Furnishings  10A NCAC 13G .0315 Housekeeping and Furnishings (a) Each family care home shall: (5) be maintained in an uncluttered, clean and orderly manner, free of all obstructions and hazards; This Rule shall apply to new and existing homes.  This Rule is not met as evidenced by: <b>FOLLOW-UP TO A TYPE B VIOLATION</b>  The Type B Violation was abated. Non-compliance continues.  Based on observation and interview, the facility failed to assure the facility was maintained in an	{C 078}	<i>3/5/15 T.C. administrator will monitor the facility 2 times per week to ensure it is uncluttered, clean, orderly free of all obstructions &amp; hazards km</i>	

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{C 078}	<p>Continued From page 6</p> <p>uncluttered, clean and orderly manner, and free of hazards in 4 of 4 resident rooms, 2 of 2 resident bathrooms, the living room, and kitchen. The findings are:</p> <p>Observation on 12/18/14 at 9:40 a.m. of Resident # 1's bedroom revealed:</p> <ul style="list-style-type: none"> <li>- Resident had multiple piles, boxes and baskets of clothes and belongings all around the room on the floor.</li> <li>- The belongings were obstructing a free walkway within the room.</li> <li>- A package of cookies were left open and exposed next to the night stand on the floor.</li> </ul> <p>Interview on 12/18/14 at 9:45 a.m. with the Supervisor-In-Charge (SIC) revealed:</p> <ul style="list-style-type: none"> <li>- Resident # 1 had all of his things in piles and knew where it all was when needed.</li> <li>- The resident did not want to clean it up and did not want anyone in the room when he was not there to clean it up.</li> <li>- Residents were not supposed to have food in their rooms.</li> <li>- The SIC would ensure any food in the bedroom was packaged securely to prevent attracting insects.</li> </ul> <p>Interview on 12/19/14 at 11:30 a.m. with Resident # 1 revealed:</p> <ul style="list-style-type: none"> <li>- He had all of his belongings where he wanted them.</li> <li>- He thought the way he had his things showed it was neat in his room.</li> <li>- He did not realize the open cookie container would attract insects.</li> <li>- He did not want anyone cleaning his things up but he would try to make more space in the room.</li> </ul> <p>Observation of the back bedroom off of the</p>	{C 078}	<p><i>Client has been asked to keep room orderly + no food in room at any time. Staff will clean room daily deeper clean once week housecleaning serv. once a month we have told client we must do this to stay in compliance + it would be better for him too</i></p>	<p><i>DOC</i></p> <p><i>Jan 1 2015</i></p> <p><i>lu</i></p>
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{C 078}	<p>Continued From page 7</p> <p>kitchen room on 12/18/14 at 10:35 a.m. revealed:</p> <ul style="list-style-type: none"> <li>- Bags of clothing and books and personal belongings were on the floor around the room.</li> <li>- Multiple pairs of shoes were lined up on the floor.</li> <li>- Equipment and belongings were on the dresser top.</li> <li>- Trash can beside the mattress was overflowing with trash.</li> <li>- Radiator cover had multiple rust stains and a build up of dirt and debris.</li> <li>- Dirty used dishes and utensils were laying on the floor.</li> </ul> <p>Interview with the Administrator on 12/19/14 at 9:20 a.m. revealed:</p> <ul style="list-style-type: none"> <li>- Someone was living in this back bedroom when there were no residents in the facility.</li> <li>- The live in person had left in the last few days and had not returned for their belongings.</li> </ul> <p>Recheck of the back bedroom off of the kitchen 12/19/14 at 3:10 p.m. revealed:</p> <ul style="list-style-type: none"> <li>- All of the clothes, shoes and belongings had been picked up and removed from the bedroom.</li> <li>- Trash can, dirty dishes and utensil were removed.</li> <li>- The resident bed had sheets and covers were removed.</li> <li>- Radiator cover still had multiple rust stains and a build up of dirt and debris.</li> </ul> <p>Observation of the bathroom in the back bedroom off the kitchen on 12/18/14 at 10:48 a.m. revealed:</p> <ul style="list-style-type: none"> <li>- The sink had a thin layer of stains and dirt.</li> <li>- Rust stains around the sink knobs.</li> <li>- Toilet bowl had multiple yellow and brown stains all over it including dripping down the side of the toilet.</li> </ul>	{C 078}	<p>The clothing + articles were already removed the 2nd day of survey the room was not being used + the person had not returned to get his belongings</p> <p>Bathroom was cleaned along w room.</p>	Dec 19 2014
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{C 078}	<p>Continued From page 8</p> <ul style="list-style-type: none"> <li>- Toilet seat was flipped up with multiple brown and yellow splatter stains</li> <li>- Bath tub was caked with a film of dust and grime as well as the walls of the shower.</li> <li>- A used toilet plunger was on the floor beside the toilet.</li> <li>- Side of the sink cabinet had large areas where the wood stain was missing and the wood was bubbled up as if it had been wet.</li> <li>- Rubber mat in bath tub had multiple areas of black mold on the front and back of the mat.</li> <li>- Metal fixtures including the drain and shower head were covered with dust and mold/mildew.</li> <li>- Two round areas of rust and nail holes on the shower wall where a grab used to be.</li> <li>- Yellowish brown stains running down the walls of the shower.</li> <li>- The tub had burn marks along the top edge.</li> <li>- Dirt, dust and brown stains on the exhaust fan.</li> </ul> <p>Recheck of the back bedroom bathroom on 12/19/14 at 2:30 p.m. revealed the bathroom had not been cleaned and was still in same condition as it was upon initial tour of the facility on 12/18/14.</p> <p>Observation of the left hall back bedroom on 012/18/14 at 11:40 a.m. revealed:</p> <ul style="list-style-type: none"> <li>- Two metal pieces of bed frame approximately 6 feet long were laying on the floor in the corner.</li> <li>- There were sharp edges on parts of the bed frames.</li> <li>- Closet was missing 3 of 4 sections of louver doors.</li> </ul>	{C 078}	<p><i>We are buying all new furnishings for this room</i></p>	<p><i>Feb 3/ 2015</i></p>

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{C 078}	<p>Continued From page 9</p> <p>Observation of resident bathroom near the kitchen on 12/18/14 at 11:50 a.m. revealed:</p> <ul style="list-style-type: none"> <li>- Tiles around the shower had black mold and mildew in the grout.</li> <li>- Tub was covered in a film of a light brown substance.</li> <li>- Metal drain and fixtures had rust stains and a film around them.</li> <li>- Soiled toilet bowl brush was laying on the floor beside the toilet.</li> <li>- Windowsill and blinds had thick coating of dust and dirt.</li> <li>- Metal hand bar on side of tub had rust stains.</li> </ul> <p>Interview with the Administrator on 07/08/14 at 11:14 a.m. revealed:</p> <ul style="list-style-type: none"> <li>- She and the SIC do the cleaning in the facility.</li> <li>- They usually mop every day and clean the bathrooms.</li> <li>- Administrator did a more indepth cleaning one time per month including resident bathrooms.</li> <li>- She could not explain why the facility was in such an unclean condition if she had been checking on it and thought some staff were not completing assignments as desired.</li> </ul> <p>Interview with the SIC on 07/08/14 at 5:10 p.m. revealed:</p> <ul style="list-style-type: none"> <li>- They do not have a housekeeper at the facility.</li> <li>- The environmental condition of the facility was much the same as when she worked at the facility before.</li> <li>- There is no deep cleaning schedule.</li> <li>- She cleaned the kitchen and the common areas like the dining room and hallways.</li> <li>- She does not clean the unoccupied bedrooms</li> </ul>	{C 078}		
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STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>FCL073011</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING: _____	(X3) DATE SURVEY COMPLETED  R-C <b>12/22/2014</b>
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NAME OF PROVIDER OR SUPPLIER  <b>GOLDEN YEARS FAMILY CARE HOME</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>410 MONTFORD DRIVE ROXBORO, NC 27573</b>
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(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
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{C 078}	Continued From page 10 nor the one occupied previously by a non-resident.	{C 078}		
{C 112}	<p><b>10A NCAC 13G .0318(a) Outside Premises</b></p> <p>10A NCAC 13G .0318 Outside Premises (a) The outside grounds of new and existing family care homes shall be maintained in a clean and safe condition.</p> <p>This Rule is not met as evidenced by: Based on observation and interview, the facility failed to assure the front of the home including the porch and the back patio area was maintained in a clean and safe condition related to paint on the front porch floor, overflowing rain gutters, broken boards and trash. The findings are:</p> <p>Observation of the front porch on 12/18/14 at 9:30 a.m. revealed:</p> <ul style="list-style-type: none"> <li>- The floor of the front porch floor had red and white smears and drips of paint throughout from recently used to painting of the wooden porch.</li> <li>- The front door had smears of dirt around the handle.</li> <li>- Some areas of the ceiling had black stains that appeared to be mold.</li> <li>- The overhang structure had recently been painted white but a broad area of black mold/mildew was showing through.</li> <li>- Rain gutters were overflowing with leaves and debris.</li> </ul> <p>Observation of the back patio yard area on 12/18/14 at 9:40 a.m. revealed:</p> <ul style="list-style-type: none"> <li>- An old dirty glass top table was against the wall near the patio.</li> </ul>	{C 112}	<p><i>paint will be gotten off porch we have actually tried on several occasions with no luck admin will call a proff to come out + take care of it.</i></p> <p><i>admin will be outside premises once A week for anything going on premises</i></p> <p><i>glass table been removed</i></p>	<p><i>3 2015</i></p>

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{C 112}	<p>Continued From page 11</p> <ul style="list-style-type: none"> <li>- A pile of old boards and pieces of bed rails with sharp edges were piled under the glass table.</li> <li>- A pail of old glass bottles was next to the table.</li> </ul> <p>Interview with the Administrator on 12/18/14 at 8:45 a.m. revealed:</p> <ul style="list-style-type: none"> <li>- The facility had recently painted the porch after the last survey in July 2014.</li> <li>- The Administrator said it was not a very neat paint job.</li> <li>- She did not know why the overhang was still stained with mildew/mold.</li> <li>- She would check into a different type paint.</li> <li>- The boards in the back yard at the patio area were just pieces of beds that had been placed there about two weeks ago when the facility was cleaned up.</li> <li>- The rain gutters had been cleaned out twice since the last survey and guessed they needed it again since there were a lot of pine trees nearby.</li> <li>- The Administrator would get someone to check those areas and clean the gutters again.</li> </ul> <p>Observation on 12/19/14 at 8:45 a.m. revealed the gutters had been cleaned out.</p>	{C 112}	<p><i>Boards were removed gutter were cleaned again before end of the survey 12/19/2014 Top of house has been painted</i></p>	
{C 185}	<p>10A NCAC 13G .0601(a) Management and Other Staff</p> <p>10A NCAC 13G .0601Mangement and Other Staff</p> <p>(a) A family care home administrator shall be responsible for the total operation of a family care home and shall also be responsible to the Division of Health Service Regulation and the county department of social services for meeting and maintaining the rules of this Subchapter.</p>	{C 185}		

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{C 185}	<p>Continued From page 12</p> <p>The co-administrator, when there is one, shall share equal responsibility with the administrator for the operation of the home and for meeting and maintaining the rules of this Subchapter. The term administrator also refers to co-administrator where it is used in this Subchapter.</p> <p>This Rule is not met as evidenced by: <b>FOLLOW-UP TO A TYPE B VIOLATION</b></p> <p>Based on these findings, the previous Type B Violation was not abated.</p> <p>Based on observation, interview, and record reviews, the Administrator failed to assure the total operation of the facility to meet and maintain the rules of this Subchapter as related to health care, housekeeping and furnishings, outside premises, nutrition and food service, pharmaceutical care. The findings are:</p> <p>Upon arrival to the facility on 12/16/14 at 9 a.m., the Supervisor-in-Charge (SIC) was working and the Administrator was not at the facility.</p> <p>Telephone interview with the Administrator on 12/18/14 at 9:30 a.m. revealed:</p> <ul style="list-style-type: none"> <li>- She had been at the facility more than in the past to ensure control over the condition of the facility and residents.</li> <li>- She had not been in the facility as much very recently due to illness.</li> <li>- She thought the facility and care of residents was much better at this point.</li> </ul> <p>Observation on 12/19/14 revealed:</p> <ul style="list-style-type: none"> <li>- The Administrator was at the facility at 8:45</li> </ul>	{C 185}	<p><i>We will be hiring a co admin to help admin possible new partner that will be invest in the busines. The person will be well qualified + experenal.</i></p>	<p><i>Feb 1st 2015</i></p>
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{C 185}	<p>Continued From page 13</p> <p>a.m.</p> <ul style="list-style-type: none"> <li>- The Administrator left the facility at 9 a.m.</li> </ul> <p>Interview on 12/19/14 at 8:45 a.m. with the Administrator revealed</p> <ul style="list-style-type: none"> <li>- She and a helper had been in the facility last night and this morning to clean up the bedrooms.</li> <li>- She said she was available by telephone and would check in with staff and to answer questions later on.</li> </ul> <p>Observations on 12/18/14 and 12/19/14 revealed:</p> <ul style="list-style-type: none"> <li>- The Administrator did not come to the facility on 12/18/14.</li> <li>- The Administrator was observed on 12/19/14 at 8:45 a.m. at the facility and left within minutes of 8:45 a.m.</li> <li>- The Administrator did not return to the facility on 12/19/14.</li> </ul> <p>Based on findings of this report, the Administrator failed to assure compliance with the following rules:</p> <ol style="list-style-type: none"> <li>1. Based on observation and interview, the facility failed to assure walls, ceilings, and floor were kept clean and in good repair in 4 of 4 resident rooms, 2 of 2 resident bathrooms, the living room, dining room, kitchen, and hallway. [Refer to Tag C074, 10A NCAC 13G .0315(a)(1) Housekeeping and Furnishings.]</li> <li>2. Based on observation and interview, the facility failed to assure the facility was maintained in an uncluttered, clean and orderly manner, and free of hazards in 4 of 4 resident rooms, 2 of 2 resident bathrooms, the living room, and kitchen [Refer to Tag C078, 10A NCAC 13G .0315(a)(5) Housekeeping and Furnishings.]</li> </ol>	{C 185}	<p>The entire house was cleaned by helpers - admin before survey ended</p> <p>admin will make sure this will be kept in order</p> <p>Clayton will be hired, day + weekly cleaning by staff</p> <p>Feb 2015</p>	
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{C 185}	<p>Continued From page 14</p> <p>3. Based on observation and interview, the facility failed to assure the front porch front of the home and the back patio area were maintained in a clean and safe condition related to peeling paint, chipped wood, overflowing rain gutter, and mold and mildew with water running from air conditioning unit across the porch. [Refer to Tag C112, 10A NCAC 13G .0318(a) Outside Premises.]</p> <p>4. Based on observation, interview, and record review, the facility failed to assure the routine and acute health care needs of 3 of 5 residents (#1, #3, #5) sampled as related to referral to the physician for elevated labwork for monitoring an antipsychotic, [Refer to Tag C246, 10A NCAC 13G .0902(b) Health Care (Type A Violation).]</p> <p>5. Based on observation and interview, the facility failed to assure the kitchen, dining, and food storage areas were clean, orderly and protected from contamination [Refer to Tag C256, 10A NCAC 13G .0904(a)(1) Nutrition and Food Service.]</p> <p>6. Based on observation and interview, the facility failed to assure the medication cart used for storage of all residents' medications was clean. [Refer to Tag C354, 10A NCAC 13G .1006(c) Medication Storage.]</p> <p>7. Based on record review and interview, the facility failed to obtain the services of a licensed pharmacist, prescribing practitioner, or registered nurse to complete quarterly medication reviews for 1 of only 1 facility resident (#1) who were identified to have significant medication administration dependent blood work. [Refer to Tag C375, 10A NCAC 13G .1009(a) Pharmaceutical Care.]</p>	{C 185}	<p><i>med cart was cleaned again its old + has some stains Pharmacy has decided to buy usa med medical + do quarterly reviews adm will see to this</i></p>	<p><i>Jul 1 2015</i></p>
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{C 185}	Continued From page 15  Review of the facility's plan of protection dated 12/10/14 revealed: - Administrator will assure rules and regulations are followed immediately. - Administrator will assure all rule areas cited are corrected immediately and maintained in compliance. - Administrator will ensure physicians call her personal cell phone not the facility phone communicate orders and for questions. - Administrator will contact the facility daily to get details on condition of residents, any new orders or instructions by providers and communicate with physician's to clarify questions, orders and concerns. - Administrator will monitor and be on-site at the facility at least weekly or more often as needed.	{C 185}	<i>C246</i> admin is on site at least (but more) doctors will call admin cell phone for appoints admin has been doing appoints + will continue	
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{C 246}	10A NCAC 13G .0902(b) Health Care  10A NCAC 13G .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: FOLLOW-UP TO TYPE B VIOLATION  Non-compliance continues with increase in severity resulting in resident placed at substantial risk that death or serious physical harm, abuse, neglect or exploitation will occur.  THIS IS A TYPE A2 VIOLATION	{C 246}	clients will get routine care admin will do appoint + her cell phone is given for follow up calls on client	Jan 1 2015
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{C 246}	<p>Continued From page 16</p> <p>Based on observation, interview and record review, the facility failed to assure follow-up with one of one (Resident #1) facility resident's physician order related to abnormal lab work which resulted in the resident being admitted to the hospital. The findings are:</p> <p>Review of the current FL-2 dated 10/17/14 for Resident #1 revealed:</p> <ul style="list-style-type: none"> <li>- Diagnoses of schizophrenia, Lithium toxicity, acute renal failure - resolved, chronic renal insufficiency, hypertension and resting tremor.</li> <li>- Medication orders included Lithium Carbonate 300 mg by mouth at bedtime. (Lithium is used to treat schizophrenia and mania and can cause toxicity and kidney failure.)</li> <li>- Laboratory orders for a weekly complete blood count to be drawn because the resident was taking Clozapine. (A medication used to treat schizophrenia that can cause a serious blood disorder.)</li> </ul> <p>Review of the Resident Register for Resident #1 revealed the resident was admitted on 4/11/14 and was his own responsible person.</p> <p>A note by Resident #1's psychiatrist dated 10/21/14 revealed orders:</p> <ul style="list-style-type: none"> <li>- Lithium lab level every 2 months.</li> <li>- Comprehensive metabolic blood panel every 2 months.</li> <li>- Complete blood count with differential every week. (Used to determine Clozaril toxicity.)</li> </ul> <p>Review of Resident # 1's assessment and care plan dated 10/21/14 revealed:</p> <ul style="list-style-type: none"> <li>- Resident was independent with eating, toileting and ambulation; limited assistance was required with bathing, dressing and grooming.</li> </ul>	{C 246}	<p><i>3/6/15 TC addendum to Administration</i></p> <ul style="list-style-type: none"> <li>o Ensure MD's called admin.</li> <li>o Call for concerns</li> <li>o Will attend appointments with residents to ensure future appointments + referrals are completed</li> <li>o Resident records will be reviewed for any notes, visits &amp; orders have been carried out every 2 wks</li> <li>o Check in residents &amp; care staff 3 times per week to ensure resident care concerns followed up. K Miller</li> </ul>	
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{C 246}	<p>Continued From page 17</p> <p>Telephone interview on 12/18/14 at 11:30 a.m. with Resident #1's mental health physician revealed:</p> <ul style="list-style-type: none"> <li>- Resident #1's labs completed on 9/04/14 were high.</li> <li>- The lab result for the Blood Urea Nitrogen was 39, Creatinine 2.4 and Lithium level was 1.4.</li> <li>- After finding out the lab results, on 9/04/14 the mental health physician contacted Resident #1's primary physician to confirm the resident could be seen in their office on the same day.</li> <li>- The mental health physician then contacted one of the facility staff at the facility and expressed the concern of Resident #1's labs and the need for the resident to be seen by the resident's primary physician right away.</li> <li>- The mental health physician was "very concerned" that the facility did not take Resident #1 to the primary physician's office and the resident ended up in the intensive care unit, with acute renal failure and was on dialysis for some days.</li> </ul> <p>Record review of facility nurses' notes revealed:</p> <ul style="list-style-type: none"> <li>- On 9/04/14, Resident #1 went to get lab work done at primary physician's office, Lithium levels were low.</li> <li>- On 9/08/14, Resident #1 was not feeling good. The SIC suggested that the facility call 911. Client decided to walk to the local hospital. The resident was seen at the local hospital and then sent to another hospital, waiting for doctors to return call.</li> </ul> <p>Interview on 12/18/14 at 2:45 p.m. with the Supervisor-In-Charge (SIC) revealed:</p> <ul style="list-style-type: none"> <li>- The resident was his own responsible person and was very good about going to get lab work completed as needed.</li> <li>- Resident #1 had been having lab work for</li> </ul>	{C 246}	<p>Resident one was incarcerated on 9/4/14 He came home around 3 that day. I received no call about Labs an appt was made for 9/8/14 Client went to hospital because he was't look well so my staff so we called 911. He was admit to hospital on 9/7/14 admin will make sure doctors have her cellphone for proper conduct</p>	
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{C 246}	<p>Continued From page 18</p> <p>Lithium and Clozaril for a long time.</p> <ul style="list-style-type: none"> <li>- In the first week of September 2014, after the resident had the lab work obtained on 9/04/14, Resident #1 began to not feel well.</li> <li>- The SIC had checked on the resident often throughout the day on about the 6th or 7th of September 2014 because the resident had complained of feeling groggy, tired and irritable and was observed to sleep a lot.</li> <li>- The SIC thought the resident was coming down with something like a cold or stomach problem and she would watch him.</li> <li>- On the second day of illness, she thought it was September 7th or 8th, the SIC suggested to the resident that he be seen by the physician.</li> <li>- The Administrator was notified by the SIC on the second day of the resident not feeling well for instructions on what to do for the resident.</li> <li>- The resident refused to see the physician and would not agree to go to the hospital.</li> <li>- The resident's physician was not called due to resident refusal.</li> <li>- The SIC was to notify the Administrator with resident concerns for further instructions from the Administrator such as call the physician or emergency transport depending on a resident's problems.</li> <li>- The SIC said the resident eventually decided to walk up to the hospital on 9/08/14 to be seen. The resident was admitted to the hospital.</li> <li>- A physician at that hospital called the facility on 9/14/14 and said the resident had kidney damage.</li> <li>- After staying at that hospital for treatment, the resident was transferred to another hospital where psychiatric medications were managed.</li> <li>- The resident was discharged back to the facility on 10/17/14.</li> </ul>	{C 246}	<p><i>admin will do doctor appointment like she has been doing</i></p>	
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{C 246}	<p>Continued From page 19</p> <p>Interview with Resident #1's primary physician on 12/19/14 at 8:39 am revealed:</p> <ul style="list-style-type: none"> <li>- Resident #1's weekly (Clozapine level) and bi-monthly blood work comprehensive metabolic panel and Lithium level was drawn at the local hospital on 9/04/14.</li> <li>- Some of the labs results on 9/04/14 were very high, but did not say which results.</li> <li>- The primary physician had been contacted by Resident #1's mental health physician on 9/05/14 who expressed concern for him to be seen right away due to high lab values.</li> <li>- The primary physician informed the mental health physician they would be more than happy to see Resident #1 and he could be seen right away as a walk-in.</li> <li>- The physician's office called to the facility to speak with staff about bringing the resident to the office right away.</li> <li>- No information was provided on who his office spoke to at the facility.</li> <li>- Resident #1 never did come to the primary physician's office as a walk-in.</li> <li>- The mental health physician called back on 9/05/14 to follow-up as to whether or not Resident #1 was seen.</li> <li>- The facility staff contacted the primary care physician's office on 9/05/14 and made an appointment for 9/11/14.</li> <li>- The facility staff did not have any one who could bring him at that moment on 9/5/14.</li> <li>- The physician said if Resident #1 had walked-in on 9/05/14, he would have been admitted to the local hospital based on the lab results, to be seen by a nephrologist.</li> </ul> <p>Interview on 12/19/14 at 9:20 a.m. with Resident #1 revealed:</p> <ul style="list-style-type: none"> <li>- The resident was his own responsible person.</li> <li>- The resident thought he went to the physician's</li> </ul>	{C 246}		
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NAME OF PROVIDER OR SUPPLIER  <b>GOLDEN YEARS FAMILY CARE HOME</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>410 MONTFORD DRIVE ROXBORO, NC 27573</b>
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(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
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{C 246}	<p>Continued From page 20</p> <p>office on 9/04/14 for lab work to be obtained.</p> <ul style="list-style-type: none"> <li>- The lab work was for a couple of his medications.</li> <li>- He felt tired and weak for a couple of days before hospitalization, but did not want to go to the physician or hospital to be checked for it after the SIC brought it up.</li> <li>- He did not know if the SIC called the Administrator or the physician.</li> <li>- The resident did go to the hospital after a couple of days and was found to have kidney failure and got dialysis.</li> <li>- He could not recall the exact dates of being ill and going to the hospital.</li> <li>- The resident was alright now and still went to get all the blood work ordered.</li> </ul> <p>Interview with Administrator on 12/19/14 at 11:00 a.m. revealed:</p> <ul style="list-style-type: none"> <li>- She could not recall if Resident #1 went to his primary physician's office on 9/05/14 prior to going to the hospital due to kidney failure.</li> <li>- She stated that if she had been the one to take the resident, she would have documented it in the nurses notes.</li> <li>- She did confirm there was a standing order for Resident #1 to get labs drawn every Wednesday at the local hospital.</li> <li>- She did not recall the SIC calling to report a concern for Resident #1 on 9/05/14 after his lab work was obtained.</li> <li>- Staff were to notify her of any resident concerns to receive instructions for resident care.</li> <li>- She did not remember a call from the physician's office to have Resident #1 seen on 9/05/14.</li> </ul> <p>Interview with SIC on 12/19/14 at 11:16 a.m. revealed:</p> <ul style="list-style-type: none"> <li>- She recalled mental health physician coming to</li> </ul>	{C 246}		
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{C 246}	<p>Continued From page 21</p> <p>see Resident #1 on 9/04/14 and talking to the resident on the front porch right before the resident ended up in the hospital for kidney failure.</p> <ul style="list-style-type: none"> <li>- The psychiatrist did not to tell the SIC anything about lab results during the visit on 9/04/14.</li> <li>- SIC stated she did not seek any notes for the resident's record from this mental health physician's visit.</li> <li>- The Administrator was the one who told her Resident #1's lab levels from 9/04/14 were "low".</li> <li>- She asked Resident #1 if he wanted to go to the local emergency department when the resident began to feel bad on the second day of feeling bad and the resident refused.</li> <li>- The SIC did not recall the dates but said it should be in the nurse notes.</li> </ul> <p>Review of local hospital records dated 9/09/14 revealed:</p> <ul style="list-style-type: none"> <li>- Resident #1 presented to the hospital with a complaint of shaking.</li> <li>- The resident had been feeling shaky, weak and nervous the past 2 - 3 days.</li> <li>- Under the "Limitations" section of the hospital record, the resident was listed as a poor historian.</li> <li>- The resident's general appearance was alert, no acute distress or fever.</li> <li>- Psychiatric assessment was within normal limits</li> <li>- Laboratory report on 9/09/14 included complete blood count and blood chemistry, and Lithium levels with some of the testing values being abnormal.</li> </ul> <p>Review of hospital abnormal laboratory blood values included:</p> <ul style="list-style-type: none"> <li>- Lithium level was 2.6 high (normal range 0.6 - 1.2mmo/L). (According to the National Institutes</li> </ul>	{C 246}		
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{C 246}	<p>Continued From page 22</p> <p>of Health (NIH) website, high Lithium blood values can cause kidney failure and damage.)</p> <ul style="list-style-type: none"> <li>- BUN (Blood Urea Nitrogen) blood laboratory test level was high - 118 (normal range per the hospital lab is (7 - 18mg/dl). (According to the NIH website, abnormal values could indicate kidney disease or failure.)</li> <li>- Creatinine results were 16.4 listed as high. (Normal range was listed as 0.6 -1.3 mg/dl.) (According to the NIH website, high creatinine values could mean damage or death of kidney cells leading to damage/failure.)</li> </ul> <p>Further review of local hospital notes dated 9/09/14 revealed:</p> <ul style="list-style-type: none"> <li>- Creatinine level on 9/04/14 was 2.4.</li> <li>- The physician "discussed work up with patient including renal failure and elevated lithium level, will need admit/transfer given ARF (acute renal failure) and elevated lithium levels..."</li> <li>- Resident was transferred to another hospital on 9/09/14.</li> </ul> <hr/> <p>Review of the facility's Plan of Protection dated 12/22/14 revealed:</p> <ul style="list-style-type: none"> <li>- Facility immediately will ensure physicians contact the Administrator directly instead of staff at the facility with orders, instructions, clarifications and any other information.</li> <li>- Administrator will contact facility daily to ensure residents' needs and condition.</li> <li>- Resident records will be reviewed to ensure health care referral and follow-up had been completed and all appropriate related documentation is completed.</li> </ul> <p><b>CORRECTION DATE FOR THE TYPE A2 VIOLATION SHALL NOT EXCEED JANUARY 21, 2015.</b></p>	{C 246}	<p><i>Van is being purchased esp for apponment for</i></p> <p><i>Jan 15, 2015</i></p>	
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{C 256}	<p>10A NCAC 13G .0904(a)(1) Nutrition and Food Service</p> <p>10A NCAC 13G .0904 Nutrition and Food Service (a) Food Procurement and Safety in Family Care Homes: (1) The kitchen, dining and food storage areas shall be clean, orderly and protected from contamination.</p> <p>This Rule is not met as evidenced by: <b>FOLLOW-UP TO TYPE B VIOLATION</b></p> <p>The Type B Violation was abated. Non-compliance continues.</p> <p>Based on observation and interview, the facility failed to assure the kitchen and dining areas were clean, orderly and protected from contamination. The findings are:</p> <p>Observation of the kitchen on 12/18/14 at 11:05 a.m. revealed:</p> <ul style="list-style-type: none"> <li>- Kitchen floor had multiple brown and black stains and dirt and debris.</li> <li>- Dishwasher had brownish stains on the door around the opening.</li> <li>- Inside of sink had a ring of caked on food particles and dirt.</li> <li>- Inside of microwave had thick film of food particles and spill stains.</li> <li>- Four of 4 burners on the stove stop had a film of grease and burn marks around the burners.</li> <li>- The oven drawer had grease and food particles on the top edge of the drawer.</li> <li>- Inside of the oven door revealed the glass was unable to be viewed</li> </ul>	{C 256}	<p><i>Stove + kitchen has been cleaned before end survey handyman complect cleaning crew complect</i></p>	<p><i>Feb 1 2015</i></p>
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{C 256}	<p>Continued From page 24</p> <p>through due to build-up of burned on food and soot.</p> <ul style="list-style-type: none"> <li>- Inside of the oven was covered with burned on splatters of food and grease and particles of burned food and burned material on the floor of the oven</li> <li>- The over the stove exhaust fan unit was dirty and thick with grease.</li> <li>- The exhaust fan filter had a build-up of grease.</li> <li>- Refrigerator and freezer had multiple sticky areas and a build up of food and grime on the door handles and on the front and left side of the unit.</li> <li>- The toaster had food smears on it and a build up of bread crumbs inside that spilled out of the bottom to the top of the microwave where the toaster had been placed.</li> </ul> <p>Interview on 12/18/14 at 11:10 a.m. with the Supervisor-In-Charge (SIC) revealed:</p> <ul style="list-style-type: none"> <li>- The SIC had not cleaned out the toaster before.</li> <li>- She did not realize it could be cleaned out.</li> <li>- She had not cleaned the stove exhaust fan filter nor the unit before.</li> <li>- The SIC mopped and swept the kitchen daily.</li> <li>- The counters and sink were cleaned as needed.</li> <li>- There was no deep cleaning schedule for the kitchen and dining area.</li> <li>- The Administrator cleaned in the facility one time per month.</li> </ul> <p>Observation on 12/18/14 at a.m. with the SIC revealed:</p> <ul style="list-style-type: none"> <li>- The SIC shook the toaster to try to empty out the crumbs.</li> <li>- Some crumbs fell out but the SIC did not open up the crumb trap doors to clean out the contents</li> </ul>	{C 256}	<p><i>Toaster cleaned exhaust fan &amp; oven cleaned before end of survey will continue to clean daily deep once week cleaning crew monthly</i></p> <p><i>3/5/15 TC &amp; Administrator Addendum: Monitoring of kitchen by the Administrator will occur 2 times / week to ensure no contamination areas in the kitchen</i></p>	<p><i>Dec 19/14</i></p> <p><i>Feb 1/15</i></p>
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{C 256}

Continued From page 25  
of crumbs on the inside of the toaster.  
  
Interview with the SIC on 12/18/14 at 5:10 p.m. revealed:  
- They do not have a housekeeper at the facility.  
- The environmental condition of the facility was somewhat the same but there had been some improvement with the paint, walls and floors.  
- There is no cleaning schedule.  
- She cleans the kitchen and the common areas like the dining room and hallways.

{C 256}

{C 354}

10A NCAC 13G .1006 (c) Medication Storage  
10A NCAC 13G .1006 Medication Storage  
  
(c) The medication storage area shall be clean, well-lighted, well-ventilated, large enough to store medications in an orderly manner, and located in areas other than the bathroom, kitchen or utility room. Medication carts shall be clean and medications shall be stored in an orderly manner.  
  
This Rule is not met as evidenced by:  
Based on observation and interview, the facility failed to assure the medication cart used for storage of all residents' medications was clean. The findings are:  
  
Observation of the medication cart on 12/18/14 at 9:35 a.m. revealed:  
- Top of the medication cart had a build up of dirt and a brown sticky substance.  
- Sides of the medication cart had build up of dirt

{C 354}

*3/18/15 Addendum: Monitor med cart to ensure clean & safe. Staff to keep clean daily Km.*  
  
*Pharmacy working new med cart & do our review admin will make sure this happens*

*Feb 1/15*

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{C 354}	Continued From page 26  and rust stains spills and splatters of a brown substance. - Cup holder on the cart had brown and black stains on the outside and inside of the cup holder. - Drawers of the medication cart had brown stains and a build up of dirt and debris. - The medication administration notebook on the cart had a build up of grime and dirt on the outside of the notebook.  Interview with the Supervisor-in-Charge (SIC) on 12/18/14 at 9:35 a.m. revealed: - The SIC had been working off and on in the facility for about 10 years. - They do not have a housekeeper at the facility. - There is no cleaning schedule. - The medication cart had been in this condition for a long time. - The SIC does not clean the medication cart because she thought the Administrator was going to replace it soon.  Interview with the Administrator on 012/18/14 at 12:09 p.m. revealed: - She wiped off the medication cart that morning. - She could not say how often they were cleaning the cart. - She could not explain the condition of the cart after she had just wiped it off that morning.  Observation of the medication cart on 12/18/14 and 12/19/14 revealed it still had not been cleaned.	{C 354}		
{C 375}	10A NCAC 13G .1009(a)(1) Pharmaceutical Care  10A NCAC 13G .1009 Pharmaceutical Care	{C 375}		

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{C 375}	<p>Continued From page 27</p> <p>(a) The facility shall obtain the services of a licensed pharmacist, prescribing practitioner or registered nurse for the provision of pharmaceutical care at least quarterly for residents or more frequently as determined by the Department, based on the documentation of significant medication problems identified during monitoring visits or other investigations in which the safety of the residents may be at risk. Pharmaceutical care involves the identification, prevention and resolution of medication related problems which includes at least the following:</p> <p>(1) an on-site medication review for each resident which includes at least the following:</p> <p>(A) the review of information in the resident's record such as diagnoses, history and physical, discharge summary, vital signs, physician's orders, progress notes, laboratory values and medication administration records, including current medication administration records, to determine that medications are administered as prescribed and ensure that any undesired side effects, potential and actual medication reactions or interactions, and medication errors are identified and reported to the appropriate prescribing practitioner; and,</p> <p>(B) making recommendations for change, if necessary, based on desired medication outcomes and ensuring that the appropriate prescribing practitioner is so informed; and,</p> <p>(C) documenting the results of the medication review in the resident's record;</p> <p>This Rule is not met as evidenced by: Based on record review and interview, the facility failed to obtain the services of a licensed pharmacist, prescribing practitioner, or registered nurse to complete quarterly medication reviews for one of only one facility residents (#1) who was</p>	{C 375}	<p><i>Cont + reviews from Pharmacy. adm will follow up on this</i></p> <p><i>C375 3/5/15 Addendum to Administration</i></p> <ul style="list-style-type: none"> <li>• Ensure Pharm. Reviews are completed quarterly by using calendar for next month</li> <li>• Call dx-lux ahead to ensure coming for review as scheduled.</li> <li>• Call dx-lux to reschedule if not completed per schedule</li> </ul> <p><i>All new resident Rx's will be faxed to pharmacy &amp; review scheduled by administrative Admin. will monthly to ensure timely reviews completed</i></p> <p><i>K. Miller</i></p>	<p><i>Jul 1 2015</i></p>
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{C 375}	<p>Continued From page 28</p> <p>identified to have significant medication administration based on blood work. The findings are:</p> <p>1. Review of Resident #1's current FL-2 dated 04/10/14 revealed:</p> <ul style="list-style-type: none"> <li>- Diagnoses included schizophrenia - paranoid type, history of chronic renal insufficiency, resting tremor, Lithium toxicity, and acute renal failure, hypertension, degenerative joint disease of the cervical spine.</li> </ul> <p>Review of Resident #1's record revealed he was admitted to the facility on 04/11/14.</p> <p>Based on interviews, record review, and review of medications on hand, the following medications, requiring blood work weekly and every two months to determine usage of the medication were as follows:</p> <p>A. Lithium</p> <ul style="list-style-type: none"> <li>- Lithium is used to treat schizophrenia and prevent episodes of mania (frenzied, abnormally excited mood).</li> <li>- Lithium can become toxic in the blood and blood levels of the medication should be monitored every one - two months.</li> <li>- Toxic effects of lithium include coarse tremor, muscle twitching convulsion, renal failure and excessive tiredness or weakness or drowsiness - medical attention should be sought immediately.</li> </ul> <p>Review of Resident #1's record revealed:</p> <ul style="list-style-type: none"> <li>- The resident had Lithium Toxicity based on lab work in hospital on 9/09/14.</li> <li>- Lithium level in hospital on 9/09/14 was 2.6 high (normal range 0.6 - 1.2mmo/L). (According to the National Institutes of Health (NIH) website, high Lithium blood values can cause kidney failure and damage.)</li> </ul>	{C 375}		
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{C 375}	<p>Continued From page 29</p> <ul style="list-style-type: none"> <li>- Resident #1 was transferred for dialysis.</li> </ul> <p><b>B. Clozapine</b></p> <ul style="list-style-type: none"> <li>- Clozapine is used to treat schizophrenia when other medications are not working.</li> <li>- Clozapine can cause a serious blood condition and use must be guided by weekly blood work.</li> </ul> <p>Record review revealed no documentation of any medication reviews to identify any medication issues since admission on 04/11/14.</p> <p>Interview with the Administrator on 12/18/14 at 3:45 p.m. revealed:</p> <ul style="list-style-type: none"> <li>- Resident # 1 had never had a pharmacy medication review completed since admission.</li> <li>- She had asked the primary pharmacy to come and do the medication reviews but they don't do that anymore.</li> <li>- She was trying to find someone to do the medication reviews.</li> </ul> <p>Interview with the Supervisor-in-Charge (SIC) on 12/18/14 at 3:15 p.m. revealed:</p> <ul style="list-style-type: none"> <li>- She had not seen anyone do medication reviews at the facility since she was hired February of 2014.</li> <li>- The SIC did not know why medication reviews had not been completed.</li> <li>- Ensuring the reviews were completed were not her responsibility and thought the Administrator took care of ensuring they were completed.</li> <li>- Resident #1 went to get his lab work as ordered.</li> </ul> <p>Telephone interview with the pharmacist on 12/18/14 at 1:26 p.m. revealed:</p> <ul style="list-style-type: none"> <li>- The facility had started with this pharmacy recently and there was not record of the asking for the reviews to be completed.</li> </ul>	{C 375}		
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(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
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{C 912}	<p>G.S. 131D-21(2) Declaration of Residents' Rights</p> <p>G.S. 131D-21 Declaration of Resident's Rights Every resident shall have the following rights: 2. To receive care and services which are adequate, appropriate, and in compliance with relevant federal and state laws and rules and regulations.</p> <p>This Rule is not met as evidenced by: Based on observation, record review, and interview, the facility failed to assure every resident had the right to receive care and services which were adequate, appropriate, and in compliance with rules and regulations as related to management and other staff and health care. The findings are:</p> <p>1. Based on observation, interview, and record reviews, the Administrator failed to assure the total operation of the facility to meet and maintain the rules of this Subchapter as related to health care, housekeeping and furnishings, outside premises, nutrition and food service, medication storage, and pharmaceutical care. [Refer to Tag C185, 10A NCAC 13G .0601(a) Management and Other Staff (Unabated Type B Violation).]</p> <p>4. Based on observation, interview and record review, the facility failed to assure referral and follow-up with one of one (Resident #1) facility resident's physician order related to abnormal lab work. [Refer to Tag C246, 10A NCAC 13G .0902(b) Health Care (Type A2 Violation).]</p>	{C 912}	<p><i>admin + new co adm will have the duty of total operation of home on a daily basis with Cbs once a week admin will work hours spend her time there like she has been doing in the past few months clients rights will be met</i></p>	<p><i>Feb 1 2015</i></p>
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## Herring, Belverly G

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**From:** Miles, Karen  
**Sent:** Friday, March 06, 2015 5:14 PM  
**To:** mhudson@personcounty.net  
**Cc:** Brown, Danyelle A; Herring, Belverly G  
**Subject:** Golden Years Family Care Home 2015-03-05 POCA VZV513  
**Attachments:** Golden Years Family Care Home 2015-03-05 POCA VZV513.pdf

Dear Ms. Hudson:

Please find attached to this email the amended Plan of Correction for the survey of 12/22/14.

Contact this office with any questions at 919-855-3765.

Sincerely,

Karen L. Miles

Karen L. Miles RN, CNM, Nurse Consultant  
N.C. Department of Health and Human Services  
Division of Health Service Regulation  
Adult Care Licensure Section  
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<http://www.ncdhhs.gov/dhsr/acls/index.html>

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