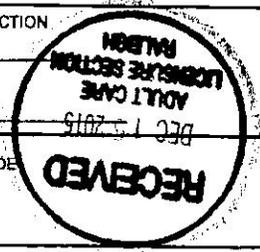


Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL034035	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED R 11/18/2015
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NAME OF PROVIDER OR SUPPLIER BROOKDALE REYNOLDA ROAD	STREET ADDRESS, CITY, STATE, ZIP CODE 2980 REYNOLDA ROAD WINSTON SALEM, NC 27106
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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
{D 000}	Initial Comments The Adult Care Licensure Section conducted a follow-up survey on 11/19/2015.	{D 000}		
{D 137}	<p>10A NCAC 13F .0407(a)(5) Other Staff Qualifications</p> <p>10A NCAC 13F .0407 Other Staff Qualifications (a) Each staff person at an adult care home shall:</p> <p>(5) have no substantiated findings listed on the North Carolina Health Care Personnel Registry according to G.S. 131E-256;</p> <p>This Rule is not met as evidenced by: Based on interviews and record reviews, the facility failed to ensure 1 of 6 sampled staff (Staff B) had no substantial findings listed on the North Carolina Health Care Personnel Registry (HCPR) prior to hiring.</p> <p>The findings are:</p> <p>Review of Staff B's personnel records revealed: -A hire date of 10/13/15. -She was hired as a Cook. -Documentation of a completed HCPR check was dated 11/18/15 with no substantiated findings.</p> <p>Interview with Staff B on 11/18/15 at 12:20 pm revealed: -She was in training as a Cook. -"The Business Office Manager (BOM) had me sign a lot of stuff, so I'm not sure if I signed for it (the HCPR check) to be done or not." -She was not aware if a HCPR check was done or not. -She was not aware what the HCPR was.</p>	{D 137}		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE <i>Julie Ramsey - Executive Director 12-14-15</i>	TITLE	(X6) DATE
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STATE FORM

0000 IJHP12

*Reviewed and accepted
12-21-2015
Lisa Smith*

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL034035	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED R 11/18/2015
NAME OF PROVIDER OR SUPPLIER BROOKDALE REYNOLDA ROAD		STREET ADDRESS, CITY, STATE, ZIP CODE 2980 REYNOLDA ROAD WINSTON SALEM, NC 27106		
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{D 137}	Continued From page 1 Interview with the BOM on 11/18/15 at 11:25 am revealed: -She was responsible for making sure the HCPR checks were done on all new staff upon hire. -She did not run the HCPR check until 11/18/15 for Staff B as she thought the HCPR check had been done. -She discovered the HCPR was not in Staff B's file when she was gathering the staff files requested by the surveyors. -She had been auditing personnel files since the last State survey, "and I guess I just missed this one".	{D 137}		
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: Based on observations, record reviews and interviews, the facility failed to assure follow-up in contacting the residents' primary care physician, speech therapist (Resident #2) and Dialysis Center (Resident #1) regarding residents' refusal of therapeutic diets (renal, pureed) ordered for 2 of 5 sampled residents (#1 and #2). The findings are: A. Review of Resident #1's current FL2 dated 10/12/15 revealed: -Diagnoses included End Stage Renal disease requiring hemodialysis three times per week,	D 273		

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D 273	<p>Continued From page 2</p> <p>diabetes, right below the knee amputation, atrial fibrillation.</p> <p>-Documentation for orientation that Resident #1 was constantly confused.</p> <p>-A physician's order for liberalized renal diet.</p> <p>Review of Resident #1's record revealed:</p> <p>-A "Physician's Diet Order" dated 4/30/15 for liberalized renal diet. It defined "foods high in sodium, potassium and phosphorus are limited".</p> <p>-The Licensed Health Professional Support assessment dated 8/18/15 documented Resident #1 as "oriented x2".</p> <p>Review of Resident #1's progress notes revealed:</p> <p>-Documentation on the Resident Log by nursing staff on 11/16/15 that "Resident refused renal diet this am. Resident had a regular plate with scrambled eggs and pancakes".</p> <p>-Documentation on the Resident Log by nursing staff on 11/17/15 that "Resident continues to be non-compliant with diet".</p> <p>-Documentation on the Resident Log by nursing staff on 11/18/15 that "Resident requested ham and eggs this morning".</p> <p>Review of Resident #1's laboratory results report from the dialysis center revealed:</p> <p>-On 8/05/15 a potassium level of 5.2.</p> <p>-On 9/02/15 a potassium level of 5.2.</p> <p>-On 10/07/15 a potassium level of 5.5.</p> <p>-On 11/09/15 a potassium level of 5.3.</p> <p>-(Normal reference range on the laboratory report from the dialysis center for potassium was 3.5-5.0).</p> <p>Review of the diet list posted in the kitchen on 11/18/15 revealed Resident #1 was to receive a renal diet.</p>	D 273		

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STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL034035	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED R 11/18/2015
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D 273	<p>Continued From page 3</p> <p>Review of the facility's posted week-at-a glance breakfast menu for 11/18/15 revealed: -The facility's menu was approved by a registered dietician on 11/13/15. -The breakfast menu for a regular diet consisted of French toast, breakfast ham, fresh banana, hot or cold cereal, juice, coffee and milk.</p> <p>Review on 11/18/15 of the Daily Diet Modification Summary Report for the breakfast meal revealed Residents ordered a Liberalized renal diet were to be served: -4 oz French toast - 1 oz. beef patty -1/2 cup of applesauce -1/2 cup cream of wheat or 1 cup low salt corn flakes -3/4 cup apple juice, coffee. -Milk was to be limited to 1/2 cup per day.</p> <p>Observation on 11/18/15 between 8:47 am and 9:07 am of the breakfast meal served to Resident #1 revealed: -Resident #1 was served the following meal for breakfast: corn flakes with 1/2 cup milk, apple juice, coffee, ham, and French toast with sugar-free syrup. -Resident #1 consumed 100% of her meal.</p> <p>Review of the facility's "Resident Diet Substitution Requests" notebook entries from 10/15/15 to 11/18/15 revealed: -Resident #1 had 10 entries of non-compliance with her renal diet. -The entry notations included Resident #1's name, the meal of the entry, and notations of the food item(s) she was given. -Nine of 10 entries was for breakfast, with 5 of 10 requests for bacon or ham. -A breakfast entry dated 11/16/15 for "regular</p>	D 273		

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D 273	<p>Continued From page 4</p> <p>(diet) with scrambled eggs and pancakes. -A breakfast entry dated 10/29/15 for sausage gravy and biscuit. -A lunch entry dated 10/15/15 for a grilled cheese sandwich. (Dairy was limited on a renal diet.)</p> <p>Resident #1 was not available for an interview on 11/18/15.</p> <p>Interview on 11/18/15 at 12:15 pm with the Dialysis Center's charge nurse revealed: -She was not aware that Resident #1 was not compliant with her renal diet. -She was not aware if the facility had notified the Dialysis Center. "They might have spoken to another staff member", but was not aware of documentation of non-compliance in their records. -It was "very important in the resident's treatment" that they were aware of non-compliance. -"The resident does not have the mental capability to understand she is on a special diet".</p> <p>Interview on 11/18/15 at 12:55 pm with the Resident Care Coordinator (RCC) revealed the facility did not notify the Dialysis Center of Resident #1's non-compliance with her renal diet.</p> <p>Interview on 11/18/15 at 1:00 pm with Resident #1's primary care physician revealed: -He was aware of a "Resident Diet Substitution Requests" notebook because the staff gave it to him when he visited the facility every two weeks, but "I don't always look at it". -He was notified that Resident #1 wanted orange juice occasionally. -Resident #1 was "functional and helps her husband, and I do not want to do any changes that might affect that because she is in a good place now."</p>	D 273		

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D 273	<p>Continued From page 5</p> <p>-The Dialysis Center treated the Resident #1 based on her lab work, so did not feel her diet non-compliance was that important at this time. "Her lab work looks good."</p> <p>Interview on 11/18/15 at 2:40 pm with the Executive Director revealed: -The Medication Aide was to put the diet non-compliance log sheet in the "Resident Diet Substitution Requests" notebook and show the physician when he visited the facility. -Resident #1 planned to move to another facility at the end of the month. The move was to allow her to be at the same facility as her family member. -She understood it was important to notify the Dialysis Center when Resident #1 was non-compliant with her renal diet.</p> <p>Interview on 11/18/15 at 2:45 pm with the Health and Wellness Director revealed: -She had worked at the facility for 3 months. -She had "worked at a previous facility that used a hemodialysis communication form for communications between the facility and the Dialysis Center, and would look into implementing something like it here".</p> <p>Refer to the interview on 11/18/15 at 11:50 am with the RCC.</p> <p>Refer to the interview on 11/18/15 at 2:00 pm with the Dining Service Coordinator.</p> <p>Refer to the interview on 11/18/15 at 2:00 pm with the first shift Medication Aide.</p> <p>B. Review of Resident #2's current FL 2 dated 6/17/15 revealed: -Diagnoses included hypertension, Paralysis</p>	D 273		

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NAME OF PROVIDER OR SUPPLIER BROOKDALE REYNOLDA ROAD	STREET ADDRESS, CITY, STATE, ZIP CODE 2980 REYNOLDA ROAD WINSTON SALEM, NC 27106
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D 273	<p>Continued From page 6</p> <p>Agitans, slow transit constipation, Parkinson's, depression.</p> <p>-No diet order on the FL 2 except for "double portions of fluids with meals".</p> <p>Review of Resident #2's record revealed:</p> <p>-A physician's order dated 6/19/15 for Nectar thick liquids.</p> <p>-A physician's order dated 8/12/15 for "May have milk with his cereal".</p> <p>-A physician's order dated 8/24/15 for No Added Salt (NAS) diet.</p> <p>-A physician's order dated 10/10/15 for pureed diet with nectar thick liquids.</p> <p>-A Licensed Health Professional Support evaluation form dated 11/16/15 documented Resident #2 was receiving speech therapy twice a week.</p> <p>Review of results from a modified barium swallow study performed on 10/01/15 revealed:</p> <p>-Test was performed due to Resident #2's complaints of difficulty swallowing.</p> <p>-Resident #2 is "at a high risk for aspiration", "regardless of consistency".</p> <p>-Recommendations post study included: "Continue on nectar thick liquids. For solids, very soft, moist foods with finely chopped meats with gravy. Downgrade to pureed solid as needed." -"Aggressive swallow rehabilitation", and "repeat procedure in 3 months".</p> <p>Review of the Resident diet list posted in the kitchen on 11/18/15 revealed Resident #2 was to receive a pureed diet with Nectar thick liquids.</p> <p>Review of the facility's posted week-at-a glance breakfast menu for 11/18/15 revealed:</p> <p>-The facility's menu was approved by a registered dietician on 11/13/15.</p>	D 273		

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D 273	<p>Continued From page 7</p> <p>-The breakfast menu for a regular diet consisted of French toast, breakfast ham, fresh banana, hot or cold cereal, juice, coffee and milk.</p> <p>Review on 11/18/15 of the Daily Diet Modification Summary Report for the breakfast meal revealed residents ordered a pureed diet were to be served:</p> <ul style="list-style-type: none"> -Two scoops pureed French toast served with syrup. -Pureed ham served with 1 oz. gravy puree. -A banana that was to be peeled and pureed. -Pureed grain, pasta, or hot cereal, or 1/2 cup cream of wheat in place of the cold cereal option. -Pulp free orange juice, milk and coffee. <p>Observation on 11/18/15 between 8:50 am and 9:15 am of the breakfast meal served to Resident #2 revealed:</p> <ul style="list-style-type: none"> -Resident #2 was served the following meal for breakfast: rice cereal in milk (noted to be pink liquid in bowl), 2 hard-boiled eggs, 1 cup grits, wheat bread, a banana cut in half, a chocolate milk shake (thickened), and thickened cranberry juice. -Resident #2 crushed eggs with a fork and swallowed them without difficulties. -Resident #2 consumed his 100% of his meal except for the bread and banana. -He did not drink the pink liquid remaining in his cereal bowl. <p>Interview on 11/18/15 at 9:15 am with Resident #2 revealed:</p> <ul style="list-style-type: none"> -He had been a resident at the facility for one year. -He had problems swallowing and was working with a speech therapist. -He was on thickened liquids and was supposed to have pureed foods. 	D 273			

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D 273	<p>Continued From page 8</p> <ul style="list-style-type: none"> -He used milk to moisten his cereal, but "I do not drink it". "I am ok with milk". -The cereal milk was pink today as "I sometimes pour my thickened cranberry juice in it". -He did not like most pureed foods: "It usually ruins the taste. Sometimes I cannot eat it". -"The viscosity of pureed is ok, but I cannot eat some things because of the taste. At those times I request rice cereal. I eat a lot of cereal, so am worried about my nutrition." -He did well with "hard-boiled eggs and over-light eggs. Breakfast is good for me." -He was having a tooth extracted in the afternoon and was going to eat cereal or skip lunch. <p>Interview on 11/18/15 at 11:40 with a Dietary Aide revealed:</p> <ul style="list-style-type: none"> -She had gotten into the habit of asking Resident #2 what he wanted to eat since he refused his pureed diet frequently. -Resident #2 "ate a lot of rice cereal". -When residents refused a meal or requested another option off their menu, it was noted by the staff on a log sheet kept in the kitchen. <p>Review of the facility's "Resident Diet Substitution Requests" notebook entries from 10/15/15 to 11/18/15 revealed:</p> <ul style="list-style-type: none"> -Resident #2 had 27 entries of non-compliance with his pureed diet over 15 different days. -Fifteen of 27 entries were for breakfast, with requests for boiled eggs or over easy eggs, and wheat bread or grits. -Five of 27 entries were for lunch, with requests for rice cereal or oatmeal or boiled eggs with bread. -Seven of 27 entries were for dinner, with requests for regular diet or cereal or eggs with bread, and one request for a grilled cheese sandwich. 	D 273		

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D 273	<p>Continued From page 9</p> <p>Interview on 11/18/15 at 1:00 pm with Resident #2's primary care physician revealed:</p> <ul style="list-style-type: none"> -Resident #2 had swallowing issues and was working with speech therapy. -He was aware that Resident #2 was not happy with the pureed diet. -He was aware of a "Resident Diet Substitution Requests" notebook because the staff gave it to him when he visited the facility every two weeks, but "I don't always look at it". -He felt that Resident #2's quality of life was impacted, and residents have the right to eat what they want. -It was recently discussed with the facility to suggest getting a waiver signed by the family to allow Resident #2 to eat what he wishes. The physician "wants everyone on board about diet and risks to the resident if it is not pureed." -He was not willing to change the diet order for Resident #2 without further discussion with all involved. <p>Interview on 11/18/15 at 2:40 pm with the Executive Director revealed:</p> <ul style="list-style-type: none"> -The Medication Aide was to put the diet non-compliance log sheet in the "Resident Diet Substitution Requests" notebook and show the physician when he visited the facility. -She was not aware if a Negotiated Risk waiver was discussed with Resident #2's Power of Attorney (POA), but said the Health and Wellness Director (HWD) might have that information. -Resident #2 did not have any family. His previous Power of Attorney (POA) died recently. She was not sure how involved the new POA was. <p>Interview on 11/18/15 at 14:45 with the HWD revealed:</p>	D 273		

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D 273	<p>Continued From page 10</p> <ul style="list-style-type: none"> -She had worked as the HWD at this facility for 3 months. -She had spoken with Resident #2's primary care physician after the facility's "At Risk" meeting which was held this morning. It was held every 2 weeks. -It was discussed this morning about getting Resident #2's POA to sign a Negotiated Risk waiver related to diet, but had not been discussed with the POA yet. -She was not sure how involved Resident #2's new POA was. <p>Interview by telephone on 11/18/15 at 3:15 pm with Resident #2's Speech Therapist revealed:</p> <ul style="list-style-type: none"> -A barium swallow was done that said Resident #2 was "ok with texture foods with nectar thickened liquids". -"I changed Resident #2 to pureed diet because the resident was frustrated with his previous diet. He would start coughing which embarrassed him. He was good with the pureed diet the first few days, then he started refusing it." -The Resident and Speech Therapist worked out some soft foods he could safely swallow like hard boiled eggs, fried and soft eggs, bananas, grits and similar foods. -Resident #2 "has broken partials that are currently getting repaired, and has some teeth needing extraction. His dental problems are causing eating difficulties." -Resident #2 was inconsistent with eating the pureed foods. -She would discuss Resident #2's diet with the physician, "maybe to incorporate a list of acceptable foods that were not pureed". <p>Refer to interview on 11/18/15 at 11:50 am with the Resident Care Coordinator (RCC).</p>	D 273			

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D 273	<p>Continued From page 11</p> <p>Refer to interview on 11/18/15 at 2:00 pm with the Dining Service Coordinator.</p> <p>Refer to interview on 11/18/15 at 2:00 pm with a first shift Medication Aide.</p> <p>Interview on 11/18/15 at 11:50 am with the RCC revealed:</p> <ul style="list-style-type: none"> -When a resident is noncompliant with their diet, the Medication Aide (MA) was to make a notation in the Resident's record. -The facility's kitchen staff was to document on a flowsheet in the kitchen that is given to the MA to place in a "Resident Diet Substitution Requests" notebook. This notebook was given to the physician to review when he visited every two weeks. -The MA was responsible for notifying the physician of any dietary non-compliance. -There was no process in place to document the physician reviewed the non-compliance log sheet. <p>Interview on 11/18/15 at 2:00 pm with the Dining Service Coordinator revealed:</p> <ul style="list-style-type: none"> -She had worked at the facility since August 2015. -The facility had "lots on noncompliant residents. We cannot tell a Resident no". -When a resident refused or requested food off their ordered diet the Dietary aides fill out a "Resident Diet Substitution Requests" log sheet located in the kitchen with the Resident's name, meal notation was for, and notations specific to refusal and foods served. -The Cook was responsible for giving this noncompliance form to the MA to put in the facility's Resident Diet Substitution Requests notebook. -She was not aware what was done after she gave the log sheet to the MA. 	D 273		

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL034035	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____		(X3) DATE SURVEY COMPLETED R 11/18/2015
NAME OF PROVIDER OR SUPPLIER BROOKDALE REYNOLDA ROAD			STREET ADDRESS, CITY, STATE, ZIP CODE 2980 REYNOLDA ROAD 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 273	Continued From page 12 Interview on 11/18/15 at 2:00 pm with a first shift MA revealed: -The non-compliance log sheet filled out by the kitchen staff was placed in a "Resident Diet Substitution Requests" notebook and given to the physician when he visited the facility.	D 273			

The following is a summary of the Plan of Correction for Brookdale Reynolda Road. This Plan of Correction is in regards to the Corrective Action Report dated December 1, 2015. This Plan of Correction is not to be construed as an admission of or 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.

10ANCAC 13F.0407(a)(5) NC Health Care Registry

(a) Each staff person at an adult care home shall:

(5) have no substantiated findings listed on the North Carolina Health Care Personnel Registry according to G.S. 131E-256;

- An audit was completed on associate files on 11/18/15 by Business Office Coordinator.
- Identified employees missing documentation of North Carolina Personal Registry review were checked in the Health Care Registry with documentation placed in their file on 11/18/15.
- A tracking system will be developed for tracking compliance by the Business Office Coordinator/Executive Director/Designee no later than 12/16/15.
- Going forward, this tracking system will be reviewed for completion for new associates by the Business Office Coordinator/Executive Director/Designee at least on a weekly basis for the next 30 days.
- Thereafter the tracking system will be checked at least monthly by the Executive Director/Designee for compliance.

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 resident's records

- Current residents who are noted to be non-compliant with their diets will have communication, in addition to the present system, with their MD noted and placed in their charts by the Health and Wellness Director/Resident Care Coordinator/Designee by 12/16/15.
- Residents who are on Dialysis will have documentation regarding diet non-compliance completed and sent with them to their Dialysis treatment sessions by the Health and Wellness Director/Resident Care Coordinator/Designee.
- Residents who are non-compliant with current diet orders will be reviewed for the possibility of on-going documentation of awareness of the consequences of continued non-compliance by the Health and Wellness Director/Resident Care Coordinator/Designee by 12-16-15.
- The Health and Wellness Director/Resident Care Coordinator/Designee will review available documentation assuring that MD's are directly notified of diet non-compliance on a weekly basis for the next 60 days.
- There after, the Health and Wellness Director/Resident Care Coordinator/Designee will review available documentation to the resident MD's on at least a weekly basis.

