

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL034069	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED R 03/15/2016	
NAME OF PROVIDER OR SUPPLIER THE BRADFORD VILLAGE OF KERNERSVILLE - WES		STREET ADDRESS, CITY, STATE, ZIP CODE 602 PINEY GROVE ROAD KERNERSVILLE, NC 27284		
(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 March 15, 2016.	{D 000}		
{D 309}	<p>10A NCAC 13F .0904(e)(3) Nutrition and Food Service</p> <p>10A NCAC 13F .0904 Nutrition and Food Service (e) Therapeutic Diets in Adult Care Homes: (3) The facility shall maintain an accurate and current listing of residents with physician-ordered therapeutic diets for guidance of food service staff.</p> <p>This Rule is not met as evidenced by: Based on observations, interviews, and record reviews, the facility failed to maintain an accurate and current listing of residents with physician-ordered therapeutic diets (No Concentrated Sweets and mechanical soft) for guidance of food service staff for 2 of 5 sampled residents (Residents #1 and #2).</p> <p>The findings are:</p> <p>A. Review of Resident #2's current hospital-generated FL-2 dated 02/22/16 revealed: -Diagnoses included acute encephalopathy, dementia, and hypertension. -There was no diet order included on the FL-2.</p> <p>Review of hospital discharge instructions dated 02/25/16 revealed an order for a regular diet.</p> <p>Review of the therapeutic diet list posted in the kitchen revealed Resident #2 was to be served a NCS diet.</p> <p>Review of Resident #2's record revealed a physician's order dated 10/13/15 for a No</p>	{D 309}	<ul style="list-style-type: none"> • All resident's diets were reviewed by the Administrator, Resident Care Coordinator and Dietary Coordinator immediately after being notified by the survey team. • All resident's diets will be review by Resident Care Coordinator and Dietary Coordinator on a monthly basis. • Resident Care Coordinator will review FL'2 of residents returning from the hospital and will notify the doctor if resident returns with a change in their original diet. 	3/17/16

Approved 4/15/16 Kay Parsons

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

TITLE

(X6) DATE

STATE FORM

6899

ZPQE12

If continuation sheet 1 of 15

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<p>{D 309}</p>	<p>Continued From page 1</p> <p>Concentrated Sweets (NCS) diet with mechanical soft meats.</p> <p>Review of a physician's order clarification dated 03/15/16 revealed the resident was to be served a NCS diet with mechanical soft meats.</p> <p>Observation on 03/15/16 of the lunch meal revealed: -Resident #2 was served approximately 1/2 cup unground stew beef (beef with chunks of potatoes, slices of carrots and peas in brown gravy) over 3/4 cup rice, 1/2 cup chopped broccoli, a dinner roll, 8 ounces of 2% milk, and 1/2 cup regular strawberry ice cream. -The resident consumed 50% of the stew beef over rice, 10% of the chopped broccoli, 25% of the dinner roll, 100% of the milk and 100% of the ice cream without problems.</p> <p>Interview on 03/15/16 at 12:54 pm with Resident #2 revealed: -She was unaware she was ordered a therapeutic diet. -She was not diabetic and had no chewing or swallowing problems.</p> <p>Refer to interview on 03/15/16 at 2:46 pm with the Dietary Manager.</p> <p>Refer to interview on 03/15/16 at 3:49 pm with the Resident Care Coordinator.</p> <p>B. Review of Resident #1's current FL-2 dated 10/13/15 revealed: -Diagnoses included cerebral palsy, hypertension, and anemia. -A physician's order for a No Concentrated Sweets (NCS) diet.</p>	<p>{D 309}</p>	
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<p>{D 309}</p>	<p>Continued From page 2</p> <p>Review of Resident #1's record revealed: -A physician's diet order dated 02/02/16 for a NCS diet. -A physician's order dated 07/07/15 for a NCS diet and "not to follow order for processed diet".</p> <p>Review of the therapeutic diet list posted in the kitchen revealed Resident #1 was to be served a NCS "processed" diet.</p> <p>Observation on 03/15/16 of the lunch meal revealed: -Resident #1 was served approximately 1/2 cup stew beef (beef with chunks of potatoes, slices of carrots and peas in brown gravy) over 3/4 cup rice, 1/2 cup chopped broccoli, a dinner roll, 8 ounces of 2% milk, and 1/2 cup regular strawberry ice cream. -The resident consumed 100% of the stew beef over rice, none of the broccoli or dinner roll, 100% of the milk, and 100% of the ice cream.</p> <p>Interview on 03/15/16 at 12:50 pm with Resident #1 revealed: -She used to be diabetic but was not diabetic any more. -She was not on any special diet; she ate whatever she wanted to eat.</p> <p>Refer to interview on 03/15/16 at 2:46 pm with the Dietary Manager.</p> <p>Refer to interview on 03/15/16 at 3:49 pm with the Resident Care Coordinator.</p> <p>Interview on 03/15/16 at 2:46 pm with the Dietary Manager (DM) revealed: -It was the responsibility of the Resident Care Coordinator (RCC) to update the posted therapeutic list and ensure it was accurate.</p>	<p>{D 309}</p>	
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<p>{D 309}</p>	<p>Continued From page 3</p> <p>-The current RCC had "left for awhile" around the end of January 2016, and her replacement during the time she was gone "didn't know" about updating the therapeutic diet list.</p> <p>-The current RCC added some updates to the list as new orders came in, but the entire list had not been updated since before the RCC left in January.</p> <p>-She was not aware the currently posted therapeutic diet list was not accurate.</p> <p>Interview on 03/15/16 at 3:49 pm with the RCC revealed:</p> <p>-It was her responsibility to update and ensure the accuracy of the posted therapeutic diet list. - She updated the list at the end of October or beginning of November, 2015.</p> <p>-She left the facility in December 2015, returned at the beginning of February 2016, and became the RCC again on 02/20/16.</p> <p>-She had "not looked at it" since becoming the RCC again because she had "not got to it yet". - She was not aware the currently posted therapeutic diet list was not accurate.</p>	<p>{D 309}</p>	
<p>D 310</p>	<p>10A NCAC 13F .0904(e)(4) Nutrition and Food Service</p> <p>10A NCAC 13F .0904 Nutrition and Food Service (e) Therapeutic Diets in Adult Care Homes: (4) All therapeutic diets, including nutritional supplements and thickened liquids, shall be served as ordered by the resident's physician.</p> <p>This Rule is not met as evidenced by: TYPE B VIOLATION</p>	<p>D 310</p>	

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D 310	<p>Continued From page 4</p> <p>Based on observations, interviews, and record reviews, the facility failed to ensure therapeutic diets (No Concentrated Sweets and mechanical soft) were served as ordered by the physician for 4 of 5 sampled residents (Residents #1, #2, #3, and #4).</p> <p>The findings are:</p> <p>Review of the Week-At-A-Glance Menu revealed: -Milk was on the menu to be served at every meal. -A substitute meal plan was being served for the 03/15/16 lunch meal. -The lunch meal planned for 03/15/16 was stew beef, rice, broccoli, rolls, and dessert.</p> <p>Review of the therapeutic menu spreadsheets for individual menu items revealed: -Residents were to be served 1/2 cup rice, 1/2 cup chopped broccoli, 1 roll, and 1/2 cup ice cream. -Stew beef was not listed on the therapeutic spreadsheets; however, there was a listing for pot roast, which was to be ground for residents on mechanical soft diets. -Residents on No Concentrated Sweets (NCS) diets were to be served skim milk and low-sugar ice cream.</p> <p>Observation on 03/15/16 at 3:10 pm of the current food supply revealed: -There were 21 gallons of 2% milk in the cooler. - There was no skim milk available to serve to the residents. -There was no "low-sugar" ice cream available to serve to the residents.</p> <p>A. Review of Resident #2's current hospital-generated FL-2 dated 02/22/16 revealed:</p>	D 310	
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D 310	<p>Continued From page 5</p> <p>-Diagnoses included acute encephalopathy, dementia, and hypertension.</p> <p>-There was no diet order included on the FL-2.</p> <p>Review of hospital discharge instructions dated 02/25/16 revealed an order for a regular diet.</p> <p>Review of the therapeutic diet list posted in the kitchen revealed Resident #2 was to be served a NCS diet.</p> <p>Review of Resident #2's record revealed a physician's order dated 10/13/15 for a No Concentrated Sweets (NCS) diet with mechanical soft meats.</p> <p>Review of a physician's order clarification dated 03/15/16 revealed the resident was to be served a NCS diet with mechanical soft meats.</p> <p>Observation on 03/15/16 of the lunch meal revealed:</p> <p>-Resident #2 was served approximately 1/2 cup unground stew beef (beef with chunks of potatoes, slices of carrots and peas in brown gravy) over 3/4 cup rice, 1/2 cup chopped broccoli, a dinner roll, 8 ounces of 2% milk, and 1/2 cup regular strawberry ice cream.</p> <p>-The resident consumed 50% of the stew beef over rice, 10% of the chopped broccoli, 25% of the dinner roll, 100% of the milk and 100% of the ice cream without problems.</p> <p>Interview on 03/15/16 at 11:00 am with the Dietary Manager (DM) revealed:</p> <p>-Resident #2 was on "processed" meats, but the (canned) stew beef was "already processed so much" she "didn't need to do anything to it". - She did not know the resident was supposed to be served low sugar ice cream.</p>	D 310	
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D 310	<p>Continued From page 6</p> <p>-She did not know the resident was supposed to be served skim milk.</p> <p>Interview on 03/15/16 at 12:54 pm with Resident #2 revealed:</p> <p>-She was unaware she was ordered a therapeutic diet.</p> <p>-She was not diabetic and had no chewing or swallowing problems.</p> <p>Refer to interviews on 03/15/16 at 11:00 am and 2:46 am with the Dietary Manager.</p> <p>Refer to interview on 03/15/16 at 3:00 pm with a cook.</p> <p>Refer to interview on 03/15/16 at 3:32 pm with the Administrator.</p> <p>Refer to interview on 03/15/16 at 3:49 pm with the Resident Care Coordinator (RCC).</p> <p>B. Review of Resident #3's current FL-2 dated 12/15/15 revealed:</p> <p>-Diagnoses included dementia, Diabetes Mellitus Type II, and hypertensive heart and chronic kidney disease.</p> <p>-A physician's order for a No Concentrated Sweets (NCS) diet.</p> <p>Review of the therapeutic diet list posted in the kitchen revealed Resident #3 was to be served a NCS diet.</p> <p>Observation on 03/15/16 of the lunch meal revealed:</p> <p>-Resident #3 was served approximately 1/2 cup stew beef (beef with chunks of potatoes, slices of carrots and peas in brown gravy) over 3/4 cup rice, 1/2 cup chopped broccoli, a dinner roll, 8</p>	D 310	
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D 310	<p>Continued From page 7</p> <p>ounces of 2% milk, and 1/2 cup regular strawberry ice cream.</p> <p>-The resident consumed 25% of the stew beef over rice, 100% of the dinner roll, none of the chopped broccoli, 100% of the milk and 100% of the ice cream.</p> <p>Interview on 03/15/16 at 12:40 pm with Resident #3 revealed:</p> <p>-She did not know whether or not she was ordered a therapeutic diet.</p> <p>-She "got the same" food as everybody else.</p> <p>-Staff checked her fingerstick blood sugars (FSBS) three times a day and the results were "pretty good". (The American Diabetes Association (ADA) recommends blood sugar levels be maintained at 90 to 130.)</p> <p>Review of Resident #3's February 2016 FSBS documentation revealed:</p> <p>-Resident #3's FSBS was checked twice daily at 6:30 am and 4:30 pm.</p> <p>-The 6:30 am FSBS ranged from 77 to 276.</p> <p>-The 4:30 pm FSBS ranged from 107 to 365.</p> <p>Review of Resident #3's FSBS documentation from 03/01/16 through 03/15/16 revealed: -</p> <p>Resident #3's FSBS was checked twice daily at 6:30 am and 4:30 pm.</p> <p>-The 6:30 am FSBS ranged from 81 to 217.</p> <p>-The 4:30 pm FSBS ranged from 185 to 343. -</p> <p>The FSBS on 03/15/16 at 4:30 pm was 265.</p> <p>Refer to interviews on 03/15/16 at 11:00 am and 2:46 am with the Dietary Manager.</p> <p>Refer to interview on 03/15/16 at 3:00 pm with a cook.</p> <p>Refer to interview on 03/15/16 at 3:32 pm with the</p>	D 310	
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D 310	<p>Continued From page 8</p> <p>Administrator.</p> <p>Refer to interview on 03/15/16 at 3:49 pm with the Resident Care Coordinator (RCC).</p> <p>C. Review of Resident #4's current FL-2 dated 04/14/15 revealed: -Diagnoses included cerebral palsy, sleep apnea, and morbid obesity. -A physician's order for a No Concentrated Sweets (NCS) diet.</p> <p>Review of the therapeutic diet list posted in the kitchen revealed Resident #4 was to be served a No Concentrated Sweets (NCS) diet.</p> <p>Observation on 03/15/16 of the lunch meal revealed: -Resident #4 was served approximately 1/2 cup stew beef (beef with chunks of potatoes, slices of carrots and peas in brown gravy) over 3/4 cup rice, 1/2 cup chopped broccoli, a dinner roll, 8 ounces of 2% milk, and 1/2 cup regular strawberry ice cream. -The resident consumed 100% of the stew beef over rice, none of the chopped broccoli or dinner roll, 10% of the milk and 100% of the ice cream.</p> <p>Interview on 03/15/16 at 12:42 pm with Resident #4 revealed: -He was not aware he was ordered a therapeutic diet. -He was served the "same (food) as everybody else". -Staff checked his fingerstick blood sugars (FSBSs) 2 or 3 times a day. -His FSBS results were "good". (The American Diabetes Association (ADA) recommends blood sugar levels be maintained at 90 to 130.)</p>	D 310	
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D 310	<p>Continued From page 9</p> <p>Review of Resident #4's February 2016 FSBS documentation revealed: -Staff checked the resident's FSBS twice daily at 6:30 am and 4:30 pm. -The 6:30 am FSBS ranged from 132 to 235. -The 4:30 pm FSBS ranged from 127 to 290.</p> <p>Review of Resident #4's FSBS documentation from 03/01/16 through 03/15/16 revealed: -Staff checked the resident's FSBS twice daily at 6:30 am and 4:30 pm. -The 6:30 am FSBS ranged from 149 to 278. - The 4:30 pm FSBS ranged from 111 to 243. -The FSBS on 03/15/16 at 4:30 pm was 177.</p> <p>Refer to interviews on 03/15/16 at 11:00 am and 2:46 am with the Dietary Manager.</p> <p>Refer to interview on 03/15/16 at 3:00 pm with a cook.</p> <p>Refer to interview on 03/15/16 at 3:32 pm with the Administrator.</p> <p>Refer to interview on 03/15/16 at 3:49 pm with the Resident Care Coordinator (RCC).</p> <p>D. Review of Resident #1's current FL-2 dated 10/13/15 revealed: -Diagnoses included cerebral palsy, hypertension, and anemia. -A physician's order for a No Concentrated Sweets (NCS) diet.</p> <p>Review of the therapeutic diet list posted in the kitchen revealed Resident #1 was to be served a NCS "processed" diet.</p> <p>Review of Resident #1's record revealed a physician's diet order dated 02/02/16 for a NCS</p>	D 310	
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D 310	<p>Continued From page 10</p> <p>diet.</p> <p>Observation on 03/15/16 of the lunch meal revealed: -Resident #1 was served approximately 1/2 cup stew beef (beef with chunks of potatoes, slices of carrots and peas in brown gravy) over 3/4 cup rice, 1/2 cup chopped broccoli, a dinner roll, 8 ounces of 2% milk, and 1/2 cup regular strawberry ice cream. -The resident consumed 100% of the stew beef over rice, none of the broccoli or dinner roll, 100% of the milk, and 100% of the ice cream.</p> <p>Interview on 03/15/16 at 12:50 pm with Resident #1 revealed: -She used to be diabetic but was not diabetic any more. -She was not on any special diet; she ate whatever she wanted to eat. -Staff checked her fingerstick blood sugars (FSBSs) twice daily and the result "stayed between 80 and 100". (The American Diabetes Association (ADA) recommends blood sugar levels be maintained at 90 to 130.)</p> <p>Review of the February 2016 FSBS documentation revealed: -Resident #1's FSBS was checked twice daily at 6:00 am and 9:00 pm. -The 6:00 am FSBS ranged from 72-156. -The 9:00 pm FSBS ranged from 86-314.</p> <p>Review of Resident #1's FSBS documentation from 03/01/16 through 03/15/16 revealed: - Resident #1's FSBS was checked twice daily at 6:30 am and 9:00 pm. -The 6:30 am FSBS ranged from 85-148. -The 9:00 pm FSBS ranged from 96-168.</p>	D 310	
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D 310	<p>Continued From page 11</p> <p>Refer to interviews on 03/15/16 at 11:00 am and 2:46 am with the Dietary Manager.</p> <p>Refer to interview on 03/15/16 at 3:00 pm with a cook.</p> <p>Refer to interview on 03/15/16 at 3:32 pm with the Administrator.</p> <p>Refer to interview on 03/15/16 at 3:49 pm with the Resident Care Coordinator (RCC).</p> <p>Interview on 03/15/16 at 11:00 am with the Dietary Manager (DM) revealed she only used the Week-At-A-Glance menu as a guide for serving the residents and stated, "I don't have anything else to go by".</p> <p>Additional interview on 03/15/16 at 2:46 pm with the Dietary Manager (DM) revealed:</p> <ul style="list-style-type: none"> -She only used the Week-At-A-Glance menu as a guide for serving the residents. -For residents on NCS diets, she "just don't add any extra sugar"; otherwise, she served them the "same as everybody else". -When questioned about therapeutic spreadsheets, the DM stated the spreadsheets were available in a binder on the shelf, but she only looked at them if she was not sure about something. -She estimated that she referred to the therapeutic spreadsheets a couple of times within a six-month period. -She routinely ordered the food and always ordered 2% milk. -She was not aware residents on NCS diets were supposed to be served skim milk and she had never ordered any skim milk. -She did not know residents on NCS diets were supposed to be served low-sugar ice cream. 	D 310	
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STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL034069	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED R 03/15/2016
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NAME OF PROVIDER OR SUPPLIER THE BRADFORD VILLAGE OF KERNERSVILLE - WES	STREET ADDRESS, CITY, STATE, ZIP CODE 602 PINEY GROVE ROAD KERNERSVILLE, NC 27284
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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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D 310	<p>Continued From page 12</p> <p>-The DM retrieved a 4-ounce container of sherbet from the freezer and indicated that was what she usually gave to residents on NCS diets, but gave regular ice cream today in order to "change it up".</p> <p>-She was unaware the sherbet she indicated contained 21 grams of sugar, which was nearly double the amount in the regular ice cream served during the 03/15/16 lunch meal.</p> <p>Interview on 03/15/16 at 3:00 pm with a cook revealed:</p> <p>-She had worked at the facility for about 7 years. - She have never seen or referenced the therapeutic menu spreadsheets.</p> <p>-She was unaware residents on NCS diets were supposed to be served skim milk.</p> <p>-All residents were routinely served 2% milk daily.</p> <p>Interview on 03/15/16 at 3:32 pm with the Administrator revealed:</p> <p>-She routinely provided general oversight of the kitchen and meal service.</p> <p>-It was the Resident Care Coordinator's (RCC's) responsibility to monitor and ensure accuracy of diet orders and meal service.</p> <p>-The Administrator was not aware the kitchen staff were not using the therapeutic spreadsheets as a guide for serving meals to residents on physician-ordered therapeutic diets.</p> <p>Interview on 03/15/16 at 3:49 pm with the Resident Care Coordinator (RCC) revealed: - She did not know there were therapeutic spreadsheets which corresponded with the Week-At-A-Glance menus to indicate serving sizes and changes to be made for residents with physician-ordered therapeutic diets.</p> <p>-After reviewing the therapeutic spreadsheets, the RCC stated she had never seen them before.</p> <p>-There was currently no system in place for</p>	D 310	<ul style="list-style-type: none"> Note: The Dietary Coordinator has worked for the facility for almost 2 years. She has been the Dietary Coordinator for about one year.
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STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL034069	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED R 03/15/2016
NAME OF PROVIDER OR SUPPLIER THE BRADFORD VILLAGE OF KERNERSVILLE - WES		STREET ADDRESS, CITY, STATE, ZIP CODE 602 PINEY GROVE ROAD KERNERSVILLE, NC 27284	
(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

Division of Health Service Regulation

<p>D 310</p>	<p>Continued From page 13</p> <p>monitoring to ensure staff served the correct diets ordered by the physician.</p> <p>On 03/15/16, the Administrator submitted a Plan of Protection as follows:</p> <ul style="list-style-type: none"> -Staff would be immediately inserviced on therapeutic diets. -Beginning immediately, all dietary staff would be directed to use therapeutic diet spreadsheets as a guide to serve the meals. -The Resident Care Coordinator (RCC) or Administrator would monitor weekly to ensure ongoing compliance. <p>DATE OF CORRECTION FOR THE TYPE B VIOLATION SHALL NOT EXCEED APRIL 29, 2016</p>	<p>D 310</p>	<ul style="list-style-type: none"> • Staff would be immediately in serviced on therapeutic diets. • Beginning immediately, all dietary staff would be directed to use therapeutic diet spreadsheets as a guide to serve the meals. • The Resident Care Coordinator (RCC) or Administrator would monitor weekly to ensure ongoing compliance. 	<p>3/17/16</p>
<p>{D912}</p>	<p>G.S. 131D-21(2) Declaration of Residents' Rights</p> <p>G.S. 131D-21 Declaration of Residents' 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 observations, interviews, and record reviews, the facility failed to ensure residents received care and services which were adequate, appropriate, and in compliance with relevant federal and state laws and rules and regulations regarding Nutrition and Food Service.</p> <p>The findings are:</p>	<p>{D912}</p>		

<p>STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION</p>	<p>(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:</p> <p>HAL034069</p>	<p>(X2) MULTIPLE CONSTRUCTION</p> <p>A. BUILDING: _____</p> <p>B. WING _____</p>	<p>(X3) DATE SURVEY COMPLETED</p> <p>R 03/15/2016</p>	
<p>NAME OF PROVIDER OR SUPPLIER</p> <p>THE BRADFORD VILLAGE OF KERNERSVILLE - WES</p>		<p>STREET ADDRESS, CITY, STATE, ZIP CODE</p> <p>602 PINEY GROVE ROAD KERNERSVILLE, NC 27284</p>		
<p>(X4) ID PREFIX TAG</p>	<p>SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)</p>	<p>ID PREFIX TAG</p>	<p>PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)</p>	<p>(X5) COMPLETE DATE</p>

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<p>{D912}</p>	<p>Continued From page 14</p> <p>Based on observations, interviews, and record reviews, the facility failed to ensure therapeutic diets (No Concentrated Sweets and Mechanical Soft) were served as ordered by the physician for 4 of 5 sampled residents (Residents #1, #2, #3, and #4). [Refer to Tag 310, 10A NCAC 13F .0904(e)(4) (Type B Violation).]</p>	<p>{D912}</p>	<ul style="list-style-type: none">Residents rights were review by all staff and posted in the staff break room.	<p>4/15/16</p>
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