

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>FCL017010</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>R</b> <b>03/24/2016</b>
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NAME OF PROVIDER OR SUPPLIER  <b>JEFFERSON FAMILY CARE HOME #4</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>495 STALEY BOSWELL ROAD</b> <b>YANCEYVILLE, NC 27379</b>
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C 000	Initial Comments	C 000		
C 074	<p>10A NCAC 13G .0315(a)(1) Housekeeping and Furnishings</p> <p>10A NCAC 13G .0315 Housekeeping And Furnishings</p> <p>(a) Each family care home shall:</p> <p>(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 interviews, the facility failed to have clean walls, intact ceilings, clean, rust-free heating vents in walls and ceilings, and floors free of trip hazards kept clean and in good repair. The findings are:</p> <p>A tour of the facility was conducted from 11:30am to 1:00pm om 3/22/16.</p> <p>Observations in the dining room revealed:</p> <ul style="list-style-type: none"> <li>-The ceiling finish in the corner of the dining room near the hall door was peeling off. The peeling section of popcorn ceiling measured approximately 6 inches in length from each side of the corner of the ceiling, and looked like a triangle hanging down from the ceiling.</li> <li>-There were yellow stains around the damaged portion of the dining room ceiling, indicating a possible leak.</li> <li>-The heating vent in the dining room, located next to the dining room hutch, was rusted and dirty.</li> <li>-The brick fireplace was dusty overall.</li> </ul>	C 074		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE \_\_\_\_\_ TITLE \_\_\_\_\_ (X6) DATE \_\_\_\_\_

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C 074	<p>Continued From page 1</p> <p>Observations in the kitchen revealed: -Walls of the pantry were smudged and dirty. -The floor of the pantry was dirty and littered with food particles. -Two small areas (approximately 4 inches square each) of the kitchen floor were covered with duct tape.</p> <p>Observations in the residents' bathroom revealed: -The heating vent was rusted and dirty. -The floor and moldings were dusty and dirty around the tub and toilet. -Bathroom grouting was moldy and dirty around toilet and on tub.</p> <p>Observations in residents' bedrooms revealed: -Blinds were dusty, with bent or broken slats on some blinds. -Heating vents in resident bedrooms were dirty and dusty.</p> <p>Confidential interviews with 3 of 6 residents revealed: -The facility's cleanliness today was typical. -Residents were satisfied with the cleanliness and condition of the facility. -Facility staff "tidy up" the facility by straightening up furniture, vacuuming carpets, wet-mopping the hard floors, cleaning bathrooms, cleaning clutter and trash out of the facility. -No residents could recall any repairs to the facility in the past year.</p> <p>Interview with the Supervisor-in-Charge at 2:15pm on 3/22/16 revealed: -Her priorities were administering medications, cooking, and conducting activities/socializing with residents. -Housekeeping was not a priority for her. She did what was needed, like laundry and keeping</p>	C 074		

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C 074	<p>Continued From page 2</p> <p>bathrooms, bedrooms, and the living room orderly. She did not have time to do deep cleaning because of her other job duties. -The Administrator was aware that repairs were needed at the facility.</p> <p>Telephone interview with the Administrator on 3/22/16 at 5:30pm revealed: -She was aware the dining room ceiling needed to be repaired. The facility roof was repaired last year, now she needed to find someone to repair the ceiling. -She was aware the kitchen floor needed to be repaired. She planned to find someone to repair the gouges in the kitchen floor. -She was aware of the rusted and dirty heating vents throughout the facility and the poor condition of the shower, tub, and toilet areas of the resident's bathroom. -She will provide additional cleaning products to deep clean the facility, but the problem was motivating staff to perform deep cleaning. -She had recently taken over administrator duties at this facility, but had not given the facility the time needed to keep it in shape. -She will immediately find a contractor to help get it in order.</p>	C 074		
C 076	<p>10A NCAC 13G .0315(a)(3) Housekeeping and Furnishings</p> <p>10A NCAC 13G .0315 Housekeeping and Furnishings (a) Each family care home shall: (3) have furniture clean and in good repair; This Rule shall apply to new and existing homes.</p> <p>This Rule is not met as evidenced by:</p>	C 076		

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C 076	<p>Continued From page 3</p> <p>Based on observation and interview, the facility failed to assure the kitchen counter, dish drainer, dining room chairs and hutch, lamp, and wooden medication storage cabinet were clean and in good repair in the kitchen and dining room. The findings are:</p> <p>Observation of the kitchen on 3/22/16 at 11:30am revealed:</p> <ul style="list-style-type: none"> <li>-The finish on the kitchen counter to the right of the sink was worn down through the top layer.</li> <li>-The plastic dish drainer holding washed tableware was cracked and scratched up. White patches, and brown-gray and green mold, dirt and debris were present on the scarred areas.</li> </ul> <p>Observation of the furniture in the dining room on 3/22/16 at 2:00pm revealed:</p> <ul style="list-style-type: none"> <li>-A vinyl armchair at the dining room table had a slit in the fabric with the stuffing coming out.</li> <li>-Three wooden chairs had brown dirt and food particles on the legs.</li> <li>-The back of one wooden dining chair was missing.</li> <li>-There was one brown metal folding chair at the dining room table.</li> <li>-The wooden hutch had the finish worn off on the top and a handle for one of the drawers was broken.</li> <li>-The locked medication cabinet above the dining room hutch had gray and black streaks on the doors.</li> <li>-The lamp on the dining room hutch was missing a lampshade.</li> </ul> <p>Confidential interviews with three residents revealed:</p> <ul style="list-style-type: none"> <li>-One resident said new dining room chairs would be nice, but he can sit in the current chairs, too.</li> <li>-Residents were not concerned with soiled or</li> </ul>	C 076		

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C 076	<p>Continued From page 4</p> <p>damaged finishes on the dining room furniture, medicine cabinet, or the kitchen counter.</p> <ul style="list-style-type: none"> <li>-Two residents stated everyone had received new mattresses and had their bedroom furniture repaired "about a year or two ago".</li> <li>-There were no complaints about furnishings.</li> </ul> <p>Interview with the Supervisor-in-charge (SIC) on 3/22/16 at 4:30pm revealed:</p> <ul style="list-style-type: none"> <li>-The SIC was responsible for keeping the facility clean, administering medications and providing personal care for residents as needed.</li> <li>-The SIC had been working in the facility since April 2014, and the condition of the furniture had been the same since hire.</li> <li>-The Administrator knew the kitchen counter needed to be fixed.</li> <li>-The Administrator was supposed to be getting new dining room chairs soon.</li> <li>-The SIC asked the Administrator for a new dish drainer, none has been provided.</li> <li>-The SIC did not know if the missing lampshade was going to be replaced.</li> <li>-The Administrator was aware that repairs were needed at the facility.</li> </ul> <p>Telephone interview with the Administrator at 5:30pm on 3/22/16 revealed:</p> <ul style="list-style-type: none"> <li>-She was not aware folding chairs were not to be used in the dining room on a permanent basis.</li> <li>-She would talk to the SIC about housekeeping and cleaning furniture on a regular basis.</li> <li>-Further furniture additions would be forthcoming.</li> <li>-She had recently taken over administrator duties at this facility, but had not given the facility the time needed to keep it in shape.</li> <li>-She will immediately find a contractor to help get it in order.</li> </ul>	C 076		

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C 292	Continued From page 5	C 292		
C 292	<p>10A NCAC 13G .0905 (d) Activities Program</p> <p>10A NCAC 13G .0905 Activities Program</p> <p>(d) There shall be a minimum of 14 hours of a variety of planned group activities per week that include activities that promote socialization, physical interaction, group accomplishment, creative expression, increased knowledge and learning of new skills. Homes that care exclusively for residents with HIV disease are exempt from this requirement as long as the facility can demonstrate planning for each resident's involvement in a variety of activities. Examples of group activities are group singing, dancing, games, exercise classes, seasonal parties, discussion groups, drama, resident council meetings, book reviews, music appreciation, review of current events and spelling bees.</p> <p>This Rule is not met as evidenced by: Based on observations, interview, and review of the facility's Activity Program calendar for March 2016, the facility failed to ensure a minimum of 14 hours per week of a variety of planned group activities that promoted socialization, physical interaction, group accomplishment, creative expression, increased knowledge and learning of new skills for residents.</p> <p>The findings are:</p> <p>Review of the Activity Program calendar posted in the dining room for March 2016 revealed: -One activity daily with no scheduled time, and a duration or 1 to 3 hours. -Activities were scheduled for 10 to 12 hours weekly.</p>	C 292		

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C 292	<p>Continued From page 6</p> <p>The Activity schedule included the following:                      -1 hour of church on Sundays;                      -2 hours of games on Mondays;                      -1 hour of arm or leg exercises or 2 hours of games on Tuesdays;                      -1 hour of bible study on Wednesdays;                      -2 hours of puzzles, coloring, games, or cooking on Thursday;                      -2 hours of games, 1 hour walk, or 3 hour outing on Fridays;                      -1 to 2 hours of games on Saturdays.</p> <p>Review of the March 2016 activity calendar revealed one hour of leg exercises was scheduled. No specific time for this activity was noted.</p> <p>Observation on 3/22/16 from 11:00am to 6:00pm during the survey revealed:                      -No activities were offered by the Supervisor-in-charge (SIC) for the six residents of the facility.                      -The residents were either sitting in the living room watching television or smoking cigarettes on the front porch.                      -The SIC sat with the residents in the living room and watched TV for a few minutes, and checked on those residents who sat on the front porch approximately every 30 minutes.</p> <p>Confidential interviews with 3 of the 6 residents revealed:                      -They liked to play cards in the evening.                      -They did not participate in many of the activities on the Activity calendar.                      -The main activity was watching movies and TV shows on the facility television; war themes and Westerns were favorites.                      -One resident enjoyed yardwork and gardening.                      -One resident enjoyed shopping trips.</p>	C 292		

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C 292	<p>Continued From page 7</p> <ul style="list-style-type: none"> <li>-One resident liked to help the SIC with cooking.</li> <li>-They went on outings 1 to 2 times a month, depending on when a resident had a physician's appointment.</li> <li>-They often walked up and down the road in front of the facility, and visited another facility at the end of the road to use their vending machines.</li> <li>-They would like to go out in the community more often.</li> </ul> <p>Interview with the Supervisor-in-charge (SIC) on 09/10/2014 at 10:30 a.m. revealed:</p> <ul style="list-style-type: none"> <li>-She developed the Activity calendar, based on previous activity calendars of the facility.</li> <li>-The residents liked to watch cowboys and Indians on the television all day everyday, so no other activities were offered.</li> <li>-She accompanied residents on walks in the neighborhood, to encourage them to exercise and if they wanted to visit the facility up the road for snack items from their vending machines.</li> <li>-She was not aware that there should be at least 14 hours of activities per week, with defined start and end times.</li> <li>-She did not know that there should be at least one outing every other month.</li> <li>-The activities documented on the calendar did not always take place as schedule.</li> <li>-She had other duties to complete, and they sometimes interfered with the activity schedule.</li> </ul> <p>Telephone interview with the Administrator on 3/22/16 at 5:30pm revealed:</p> <ul style="list-style-type: none"> <li>-Staff were supposed to be doing activities with the residents.</li> <li>-She was not aware the SIC was to offer 14 hours of activities per week.</li> <li>-There was no monitoring plan in place to assure 14 hours of activities were offered per week.</li> </ul>	C 292		

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C 320	Continued From page 8	C 320		
C 320	<p>10A NCAC 13G .1002 (f) Medication Orders</p> <p>10A NCAC 13G .1002 Medication Orders</p> <p>(f) The facility shall assure that all current orders for medications or treatments, including standing orders and orders for self-administration, are reviewed and signed by the resident's physician or prescribing practitioner at least every six months</p> <p>This Rule is not met as evidenced by: Based on observation, interview, and record review the facility failed to assure all current orders for medications and treatments were reviewed and signed by the resident's physician or prescribing practitioner at least every six months for 1 of 3 sampled residents (#2). The findings are:</p> <p>Review of Resident #2's current FL-2 dated 6/28/15 revealed the following diagnoses: -Diabetes mellitus -Dementia -Hypertension -Prostate cancer.</p> <p>Review of medication orders on the FL-2 dated 6/28/15 revealed Resident #2 was prescribed: -Albuterol 20mcg - inhale 2 puffs twice daily (for shortness of breath) -Aspirin 81mg tablet taken orally once daily(prescribed for cardiovascular disease -Atorvastatin 1/2 of an 80mg tablet by mouth at bedtime (for treatment of dyslipidemia/heart disease) -Docusate Sodium 100mg capsule, take 1 capsule by mouth twice daily (for constipation) -Fluoxetine 20mg capsule once daily (for</p>	C 320		

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C 320	<p>Continued From page 9</p> <p>psychosis)</p> <ul style="list-style-type: none"> <li>-Novolog insulin 100U/ml, take 6 units daily (for diabetes mellitus)</li> <li>-Lantus insulin 100U/ml, take 30 units subcutaneously at bedtime (for diabetes mellitus)</li> <li>-Milk of Magnesia -take 1 tablespoon by mouth daily as needed (for constipation)</li> <li>-Slo-Niacin 500mg - take 4 tablets by mouth daily (used to slow atherosclerosis development)</li> <li>-Omeprazole 20mg capsule, take 2 capsules twice daily, 30 minutes before a meal (for heartburn)</li> <li>-Seroquel 300mg tablet, take 1 tablet by mouth at bedtime (for psychosis)</li> <li>-Zolpidem 10mg tablet, take 1 tablet at bedtime (for sleep).</li> </ul> <p>Further review of the medical record revealed no six month updated review of all medications and treatments prescribed for Resident #2..</p> <p>Interview with the Supervisor-in-Charge (SIC) on 3/22/16 at 4:00pm revealed:</p> <ul style="list-style-type: none"> <li>-She did not have records of all of Resident #2's physician visits.</li> <li>-Resident #2 saw several doctors at a local veterans ' hospital.</li> <li>-This hospital did not send copies of their records to the facility.</li> <li>-The facility kept documentation in the resident record of each physician visit and each physician's medication prescription from that visit.</li> <li>-The facility updated all medication orders on the FL-2 whenever a new FL-2 was needed. -She was not aware that all medication orders had to be reviewed by the resident's physician each six months.</li> <li>-She did not know the resident's physician had to sign off on the medication orders every six months.</li> </ul>	C 320		

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C 320	<p>Continued From page 10</p> <p>-She had never noticed the rule under Medication Orders that required the six-month medication review.</p> <p>Telephone interview with the Administrator at 5:30pm on 3/22/15 revealed:</p> <ul style="list-style-type: none"> <li>-The facility prepared the resident's FL-2 on a yearly basis for physician's signed orders.</li> <li>-The facility did not redo any orders until the FL-2 was due again.</li> <li>- She was not aware a physician had to sign off on all medications prescribed a resident's physicians every six months.</li> <li>-The facility kept documentation in the resident record of each physician visit and each physician's medication prescription from that visit.</li> </ul>	C 320		