

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: FCL013034	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 06/16/2016
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NAME OF PROVIDER OR SUPPLIER THE CARRIAGE HOUSE OF CAREMOOR	STREET ADDRESS, CITY, STATE, ZIP CODE 4838 CAREMOOR PLACE KANNAPOLIS, NC 28081
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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 Cabarrus County Department of Social Services conducted an annual survey on 05/16/16.	C 000		
C 249	<p>10A NCAC 13G .0902(c)(3)(4) Health Care</p> <p>10A NCAC 13G .0902 Health Care (c) The facility shall assure documentation of the following in the resident's record: (3) written procedures, treatments or orders from a physician or other licensed health professional; and (4) implementation of procedures, treatments or orders specified in Subparagraph (c)(3) of this Rule.</p> <p>This Rule is not met as evidenced by: Based on observations, interviews, and record reviews, the facility failed to ensure weekly weights were obtained as ordered by the physician for 1 of 3 sampled residents (Resident #1).</p> <p>The findings are:</p> <p>Review of Resident #1's current FL-2 dated 05/06/16 revealed: -Diagnoses included chronic kidney disease and pulmonary hypertension. -A physician's order for weekly weights on Mondays.</p> <p>Review of the Resident Register revealed the resident was admitted to the facility on 05/06/16.</p> <p>Review of the May 2016 Medication Administration Record (MAR) revealed: -Weekly weights were scheduled to be obtained on 05/09/16, 05/16/16, 05/23/16, and 05/30/16.</p>	C 249	<p>The staff will weigh Residents per doctors orders, the staff at The Carriage House knows that if their scale breaks they are to get the scale chair at Caremoor to use.</p> <p>The managers now have a notebook with a check off list that will allow them to monitor charts, MAR's, Medicines, weights, Blood pressures and pulse. MARs will be done weekly charts will be monitored monthly.</p>	6/27/16

Division of Health Service Regulation
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

Anita Under Director of Operations

TITLE

(X6) DATE

6/27/16

STATE FORM



Reviewed and accepted for care, RN 5/1/16

Division of Health Service Regulation

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C 249	<p>Continued From page 2</p> <p>consistently obtained as ordered.</p> <p>-She was not sure why the resident's weight was ordered weekly, unless it was a carry-over order from the previous facility.</p> <p>-The resident did not have a diagnosis of congestive heart failure, but was on nutritional supplements; however, she did not see any "standout reason" for the weekly weights.</p> <p>Interview on 06/16/16 at 12:30 pm with Resident #1 revealed she did not know how often the weights were obtained or any specific reason for them.</p> <p>Observation on 06/16/16 at 11:55 am of the facility scale revealed "batt" appeared in the display screen when the scale was pressed.</p> <p>A weight obtained on 06/16/16 at 12:10 pm with a scale borrowed from the sister facility next door revealed the resident's weight was 98.</p>	C 249		6/27/16