	HAL100002	A. BUILDING: _____ B. WING _____	COMPLETED R 08/18/2016

NAME OF PROVIDER OR SUPPLIER

MOUNTAIN MANOR ASSISTED LIVING

STREET ADDRESS, CITY, STATE, ZIP CODE

WEST BURNSVILLE CHURCH ROAD
BURNSVILLE, NC 28714

(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 and the Yancey County Department of Social Services conducted an annual and follow-up survey on August 17, 2016 and August 18, 2016.	D 000		
D 161	10A NCAC 13F .0504(a) Competency Validation For LHPS Tasks 10A NCAC 13F .0504 Competency Validation For Licensed Health Professional Support Task (a) An adult care home shall assure that non-licensed personnel and licensed personnel not practicing in their licensed capacity as governed by their practice act and occupational licensing laws are competency validated by return demonstration for any personal care task specified in Subparagraph (a)(1) through (28) of Rule .0903 of this Subchapter prior to staff performing the task and that their ongoing competency is assured through facility staff oversight and supervision. This Rule is not met as evidenced by: Based on interviews and record review, the facility failed to assure 2 of 5 sampled staff (Staff B and C) was competency validated for Licensed Health Professional Support (LHPS) tasks. The findings are: 1. Review of Staff B's personnel record revealed: -A hire date of 9/29/15 as a Personal Care Aide (PCA) and Medication Aide (MA). -There was no documentation of the LHPS competency validation. Interview with Staff B on 8/17/16 at 3:00pm revealed:	D 161	Facility will ensure that all LHPS documentation is in each employee chart. Auditing of employee charts will be done as a part of the facility's QA program. This auditing will be done by the director and Executive Assistant. -9/1/2016	

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

Somer Ray Executive Assistant 9/22/16

STATE FORM 6899 YH7H11 If continuation sheet 1 of 9

REVIEWED AND Accepted 9/29/2016

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION A. BUILDING: B. WING	(X3) DATE SURVEY COMPLETED
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D 161	Continued From page 1 -When hired she worked as a PCA and received training in January 2016 to be a MA. -She had received resident care training. -Today she was a MA. Staff B was not on duty on 8/18/16 for a follow-up interview. Refer to telephone interview with the LHPS nurse on 8/18/16 at 10:33am. Refer to interview with the Director and Executive Assistant on 8/18/16 at 11:30am. 2. Review of Staff C's personnel record revealed: -A hire date of 7/1/16 as a PCA and MA. -There was no documentation of the LHPS competency validation. Telephone interview with Staff C on 8/18//16 at 7:30am revealed: -She worked as a PCA and had been in training to be a MA. -She had received resident care training. -She primarily worked third shift. -When on duty she regularly checked on resident care needs and was required to check resident incontinent care needs every two hours during third shift. -She had previously worked at the facility. Staff C was not available on 8/18/16 for a follow-up interview. Refer to telephone interview with the LHPS nurse on 8/18/16 at 10:33am. Refer to interview with the Director and Executive Assistant on 8/18/16 at 11:30am.	D 161		

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D 161	Continued From page 2 Telephone interview with the LHPS nurse on 8/18/16 at 10:33am reveled: -She used to be the LHPS nurse for the facility (the facility recently changed pharmacy services). -As LHPS nurse, she would conduct the 80 hour personal care training, the 5 hour and 10 hour medication aide training and competency validate staff. -She would complete the required forms, including the competency validation checklist for LHPS tasks. -She provided the facility with a copy of the form and kept one for her records. -She remembered competency validating both Staff B and Staff C. -She no longer had a copy of the checklist because when the facility changed pharmacy's she shredded all her records. Interview with the Director and Executive Assistant on 8/18/16 at 11:30am revealed: -The facility's contracted pharmacy provided the LHPS trainings and competency validations. -They did not know why the LHPS competency validation was not in Staff B's or C's personnel record. The checklists might have been misplaced when they both changed positions at the facility in October 2015.	D 161		
D 297	10A NCAC 13F .0904(d)(1) Nutrition And Food Service 10A NCAC 13F .0904 Nutrition And Food Service (d) Food Requirements in Adult Care Homes: (1) Each resident shall be served a minimum of three nutritionally adequate, palatable meals a day at regular hours with at least 10 hours between the breakfast and evening meals.	D 297	Facility meal times changed to provide at least 10 hours between Breakfast and Evening meals. Breakfast served at 730am, Lunch 1230pm, and Supper at 530pm. Effective 8/22/2016	

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D 297	Continued From page 3	D 297		

This Rule is not met as evidenced by:
Based on observation, interview, and record review, the facility failed to assure residents were served three nutritionally adequate, palatable meals a day at regular hours with at least 10 hours between the breakfast and evening meals.

The findings are:

An interview with the Executive Director on 8/17/16 at 9:15am revealed:
-Breakfast was served in the dining room at 8:30am.
-Lunch was served in the dining room at 12:30pm.
-Some residents preferred to eat in their rooms and staff delivered their meal trays to them.

Confidential interviews with twelve residents on 8/17/16 and 8/18/16 revealed:
-4 out of 12 residents interviewed reported going hungry at times.
-2 out of 12 residents interviewed reported meal timing affected their appetite "We weren't hungry when they served supper yesterday" on 8/17/16.
-6 out of 12 residents interviewed reported not being offered a daily bedtime snack.
-8 out of 12 residents interviewed reported keeping their own snacks in their rooms.
-The food was "pretty good." "Sometimes we don't like it." An alternate meal choice was offered "sometimes." "We always manage to eat something."
-The food "it's worse than sorry. Pitiful. They have more pork than I've ever seen in my life. The food is either burnt or its raw."
-"The foods just gotten worse and worse. What we get it's not much of it. Yesterday they served fish, beets, and potatoes. The beet juice got all

Division of Health Service Regulation

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D 297	Continued From page 4 over all the other foods on the plate." -The food is "decent." -"I'm not fond of the food. We were getting our food cold..." -One resident stated she "would go hungry if they didn't have their own food." A second interview with the Executive Director on 8/17/16 at 11:45am revealed: -There were two kitchen staff. Each kitchen staff prepared and served all three meals. -Meal times were breakfast at 8:30am, lunch at 12:30pm, and dinner at 4:30pm. -There were eight residents who ate their meals in their rooms. -Residents who ate their meals in their rooms were served first, then the residents in the dining room were served. Interview with Cook #1 on 8/17/16 at 12:15pm revealed: -When on duty, she prepared and served all three meals. -There were eight residents who ate their meals in their rooms. -Residents who ate their meals in their rooms were served first, then the residents in the dining room were served. Observation of the lunch meal service on 8/17/16 at 12:20pm to 1:10pm revealed: -At 12:23pm Cook #1 started preparing trays and the Personal Care Aides started delivering the meals to the residents who ate their meals in their rooms. -At 12:46pm the residents in the dining room started to receive their trays. -At 12:55pm the last dining room tray was delivered. -Residents were served vegetable lasagna,	D 297		

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D 297	Continued From page 5 mixed vegetables, garlic bread, pudding, milk, and tea. Observation in the main dining room on 8/17/16 at 4:30pm revealed eight residents were seated and waiting for supper to be served. Interview with Cook #2 on 8/18/16 at 10:37am revealed: -When on duty, she prepared and served all three meals. -Her normal work hours were 7am to 5pm on varying days for 30 hours per week. Observation in the main dining room on 8/18/16 at 9:00am revealed a majority of the residents were still seated and eating breakfast. A third interview with the Executive Director on 8/18/16 at 11:45am revealed: -"We had a problem years ago with our residents complaining supper was too late being served at 5pm." -"Our residents like to go to bed early." -She was unaware of the regulation which required the three meals be served within a 10 hour time frame. -She would reevaluate their current menu schedule and rearrange it to make sure there were at least 10 hours between the breakfast and supper meals.	D 297		
D 298	10A NCAC 13F .0904(d)(2) Nutrition And Food Service 10A NCAC 13F .0904 Nutrition And Food Service (d) Food Requirements in Adult Care Homes: (2) Foods and beverages that are appropriate to residents' diets shall be offered or made available	D 298	Facility will ensure that snacks are provided 3 x day per regulation. Snacks to be served at 10am, 2pm, and 7pm. All snacks will be offered to each resident including those residents in their rooms at that time. Snacks to be monitored by the SIC on each shift. 8//18/2016	

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D 298	Continued From page 6	D 298		

to all residents as snacks between each meal for a total of three snacks per day and shown on the menu as snacks.

This Rule is not met as evidenced by:
Based on observation, interview, and record review, the facility failed to assure that snacks were offered or made available to all residents between each meal, for a total of three snacks per day, and shown on the menu as snacks.

The findings are:

Interview with the Executive Director on 8/17/16 at 9:10am revealed 27 residents currently resided in the facility.

Confidential interviews with twelve residents on 8/17/16 and 8/18/16 revealed:
-2 out of 12 residents interviewed agreed snacks were offered or made available to residents consistently three times a day.
-Snacks are served two times a day "before lunch and at night."
-Snacks "had gotten to be served once a day. They bring them around. I don't care for the sugar free cookies they give."
-We get snacks "in the morning" and "sometimes at night."
-We are offered snacks twice a day at 10:00am and 2:00pm . "Whether you take them is your option. We do get snack at night. Sometimes we have to ask for it. We got cookies last night."
-"I usually get an evening snack whether they give me one or not. I have snacks in my room."
-One resident received snacks two days out of the week after dinner and would "sometimes go hungry."
-Another resident was given an evening snack 2

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D 298	Continued From page 7 or 3 days a week and "would go hungry" if they didn't have their own food. -Another resident would get a snack "every once in a while" after supper from staff. -Two residents stated whether evening snack was provided was based on which staff worked on second shift. Some second shift staff gave out snack and other second shift staff did not. Review of the posted facility menu on 8/17/16 revealed: -One snack was listed per day. -The snack was listed only as "Snack of the day" and did not detail what was to be served. Observation on 8/17/16 at 10:00am revealed a Personal Care Aide offering applesauce and beverage of choice to two residents for the morning snack. Observation on 8/18/16 at 10:05am revealed a Personal Care Aide offering chocolate ice cream and water to two residents for the morning snack. Interview with Staff A, Medication Aide (MA)/Personal Care Aide (PCA), on 8/17/16 at 11:10am revealed: -She usually worked first shift. -Snack was served to residents at 10:00am and 2:00pm on first shift. -The kitchen staff were responsible for putting snack items on the cart and then the PCA's would take the cart around and offer snacks to the residents. Interview with the Cook #1 on 8/17/16 at 12:15pm revealed: -Kitchen staff prepared the 10:00am and 2:00pm snack cart. The PCAs delivered the snacks to the residents.	D 298		

Division of Health Service Regulation

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D 298	Continued From page 8 -The second shift PCA's would come into the kitchen and get the 8:00pm snack. Interview with Staff B, MA/PCA, on 8/17/16 at 3:00pm revealed: -She worked second shift. -The PCA's were responsible for passing evening snacks. -When she passed out snacks, she went door to door and handed them out usually around 7:00pm. Interview with Staff C, MA/PCA, on 8/18/16 at 7:30am revealed: -She worked third shift. -Residents rarely were awake during the night. -"Snacks were available" if a resident asked for something to eat during third shift. Interview with the Executive Director on 8/18/16 at 11:45am revealed: -The facility policy was to serve snacks to residents three times per day. -"We do offer residents snacks on a tray and there's enough for everyone." -She had observed snacks being served two times a day to residents routinely during first shift.	D 298		