

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>HAL099009</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING: _____	(X3) DATE SURVEY COMPLETED  <b>08/27/2016</b>
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NAME OF PROVIDER OR SUPPLIER  <b>PINEBROOK RESIDENTIAL CENTER 1</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>244 HARRISON AVENUE YADKINVILLE, NC 27055</b>
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D 000	Initial Comments	D 000		
	The Adult Care Licensure Section conducted an annual survey on June 14-16, 20 and 27, 2016.			
D 034	10A NCAC 13F .0302 (f) Design And Construction  10A NCAC 13F .0302 Design And Construction  (f) The facility shall have current sanitation and fire and building safety inspection reports which shall be maintained in the home and available for review  This Rule is not met as evidenced by: Based on observations, interviews and record review the facility failed to have a current fire inspection report in the home and available for review.  The findings are:  Record review of the current Fire Prevention Inspection revealed a completion date of 11/12/2014 with no violations noted.  Interview with the Maintenance Manager on 6/16/16 at 3:00pm revealed: -Fire Prevention Inspections were done yearly. -The inspection completed on 11/12/14 was the most current. -He did not have an appointment scheduled for the Fire Prevention Inspection to be completed. -He had called 3 times to set up the inspection, but was unsuccessful. -He realized it was past due during the last construction survey dated 5/9/16.	D 034		

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

*Dana Hamlin*

TITLE

*Director of Operations*

(X6) DATE

*9/6/16*

STATE FORM

SBU611

If continuation sheet 1 of 30

Reviewed & accepted 10/19/16 *Jennifer Ende RN*

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D 034	<p>Continued From page 1</p> <p>-He was responsible for making sure the inspections were current.</p> <p>-All of the fire extinguishers were checked in October 2015, and were current.</p> <p>Interview with the Administrator and Operations Manager (OM) on 6/16/16 at 3:45pm revealed:</p> <p>-They were aware of the inspection being due.</p> <p>-The Maintenance Manager was responsible for scheduling the inspections.</p> <p>Observation on 6/20/16 revealed the Fire Marshal's truck was parked outside of the building.</p> <p>Interview with the OM on 6/21/16 revealed there had only been a Fire System Test on March 28, 2016 with a "passed" score.</p> <p>Record review of information received from the OM on 6/23/16 revealed:</p> <p>-A Fire Prevention Inspection was completed on 6/20/16.</p> <p>-The main building had no violations.</p> <p>-The kitchen and laundry had citations for "ceiling clearance, must maintain 24 inches clear space for non sprinklered, may not run electrical cord through door passage, must cover all exposed electrical wiring".</p> <p>-The facility had 30 days to correct the citations.</p>	D 034		
D 049	<p>10A NCAC 13F .0305 (d) Physical Environment</p> <p>10A NCAC 13F .0305 Physical Environment</p> <p>(d) The requirements for the bedroom are:</p> <p>(1) The number of resident beds set up shall not</p>	D 049		

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D 049	<p>Continued From page 2</p> <p>exceed the licensed capacity of the facility;</p> <p>(2) There shall be bedrooms sufficient in number and size to meet the individual needs according to age and sex of the residents, any live-in staff and other persons living in the home. Residents shall not share bedrooms with staff or other live-in non-residents;</p> <p>(3) Only rooms authorized as bedrooms shall be used for residents' bedrooms;</p> <p>(4) Bedrooms shall be located on an outside wall and off a corridor. A room where access is through a bathroom, kitchen, or another bedroom shall not be approved for a resident's bedroom;</p> <p>(5) There shall be a minimum area of 100 square feet excluding vestibule, closet or wardrobe space in rooms occupied by one person and a minimum area of 80 square feet per bed, excluding vestibule, closet or wardrobe space, in rooms occupied by two people;</p> <p>(6) The total number of residents assigned to a bedroom shall not exceed the number authorized for that particular bedroom;</p> <p>(7) A bedroom may not be occupied by more than two residents.</p> <p>(8) Resident bedrooms shall be designed to accommodate all required furnishings;</p> <p>(9) Each resident bedroom shall be ventilated with one or more windows which are maintained operable and well lighted. The window area shall be equivalent to at least eight percent of the floor space and be provided with insect screens. The window opening may be restricted to a six-inch opening to inhibit resident elopement or suicide. The windows shall be low enough to see outdoors from the bed and chair, with a maximum 36 inch sill height; and</p> <p>(10) Bedroom closets or wardrobes shall be</p>	D 049		

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D 049	<p>Continued From page 3</p> <p>large enough to provide each resident with a minimum of 48 cubic feet of clothing storage space (approximately two feet deep by three feet wide by eight feet high) of which at least one-half shall be for hanging clothes with an adjustable height hanging bar.</p> <p>This Rule is not met as evidenced by: Based on observations, interviews, and record review the facility failed to assure nine resident rooms and five common area windows had insect screens.</p> <p>The findings are:</p> <p>Observation of one resident room on 6/14/16 at 1:30pm revealed the window was shut, and no window screen was present.</p> <p>Observation of a second resident room on 6/15/16 at 8:00am revealed the window was open approximately 4 inches and no window screen was present.</p> <p>Observation of the common bath/shower room between Room 112 and 116 on 6/15/16 at 8:35am revealed: -The window was open approximately 3 inches, and no screen was present. -There were several mosquitoes and flies present in the bathroom.</p> <p>Observation of the exterior of the facility on 6/15/16 at 9:40am revealed: -A total of 16 windows in the facility with no window screens. -9 resident rooms were missing window screens (Rooms #106, 111, 115, 117, 118, 119, 122, 123,</p>	D 049		

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D 049	<p>Continued From page 4 and 124).</p> <ul style="list-style-type: none"> <li>-A total of 6 window screens were missing from the two common bath/shower rooms, the back hallway window near Room 119, the Wi-Fi-Room, and the front lobby.</li> <li>-One window screen was missing in an office beside of the Wi-Fi room.</li> <li>-Room 101 and 121 had window screens, but they had fallen out and were hanging on the ledge of the window frame.</li> </ul> <p>Confidential interviews with two residents revealed:</p> <ul style="list-style-type: none"> <li>-One resident said he never opened the window and stated "It won't open."</li> <li>-A second resident stated "I don't open my window, it's never had a screen."</li> </ul> <p>Interview with a first shift Personal Care Aide on 6/16/16 at 2:15pm revealed no residents had complained to her about the missing window screens.</p> <p>Review of the current Building Sanitation Report dated 2/19/16 revealed a general comment related to vermin control, "If windows are to be left open such as in the restrooms, screens are required. Replace damaged screens where needed."</p> <p>Interview with the Maintenance Director on 6/16/16 at 3:00pm revealed:</p> <ul style="list-style-type: none"> <li>-He was aware of the missing window screens in the facility.</li> <li>-He was responsible for having them replaced.</li> </ul> <p>Interview with the Operations Manager on 6/16/16 at 3:45pm revealed:</p>	D 049		

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D 049	Continued From page 5  -She was aware of the missing window screens in the facility. -She was working with the Maintenance Director to have them replaced.	D 049		
D 287	<p>10A NCAC 13F .0904(b)(2) Nutrition And Food Service</p> <p>10A NCAC 13F .0904 Nutrition And Food Service (b) Food Preparation and Service in Adult Care Homes:</p> <p>(2) Table service shall include a napkin and non-disposable place setting consisting of at least a knife, fork, spoon, plate and beverage containers. Exceptions may be made on an individual basis and shall be based on documented needs or preferences of the resident.</p> <p>This Rule is not met as evidenced by: Based on observations, interviews and record reviews, the facility failed to assure residents were provided with a complete set of flatware that included a knife and fork in order for residents to eat food without having to use their hands or cut up food with a spoon.</p> <p>The findings are:</p> <p>Interview with the Operations Manager (OM) on 6/14/16 at 11:00am revealed the facility census was 24.</p> <p>Observation of the lunch meal on 6/14/16 at 12:20pm revealed: -There were two dining rooms connected by a</p>	D 287		

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D 287	<p>Continued From page 6</p> <p>doorway.</p> <ul style="list-style-type: none"> <li>-There were 5 tables in the Main Dining Room (MDR) and 15 chairs.</li> <li>-There were 7 tables in the 2nd dining room and 9 chairs.</li> <li>-At each place setting in both dining rooms were napkins, salt, pepper, sugar and sugar substitutes, glasses filled with water and an extra glass for a beverage of choice.</li> <li>- There was no flatware at any of the place settings.</li> <li>-Not all residents entered the dining room at the same time.</li> <li>-The meal consisted of: fried chicken, potatoes, vegetable blend, a roll and strawberries and bananas.</li> <li>-All residents had a spoon only for this meal.</li> <li>-All of the residents were offered second helpings of all food items.</li> </ul> <p>Interview with the 1st shift Medication Aide (MA) on 6/14/16 at 12:30pm revealed:</p> <ul style="list-style-type: none"> <li>-The residents only received spoons for meals; "not even forks, so no one gets hurt."</li> <li>-She was not aware of any previous accidents involving knives or forks.</li> <li>-There were no knives or forks in the building.</li> <li>-There were knives in the main kitchen.</li> <li>-There were no residents who had become angry because they could not have a knife.</li> <li>-There were not any residents who asked for knives or forks, but if they did, they were told that only spoons were available.</li> <li>-All of the residents had orders written by the facility Primary Care Provider (PCP) for spoons only.</li> <li>-The residents were not assessed by the PCP prior to writing an order to have only a spoon at</li> </ul>	D 287		

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D 287	<p>Continued From page 7</p> <p>meals.</p> <p>Random interviews with 12 residents on 6/14/16 and 6/20/16 revealed:</p> <ul style="list-style-type: none"> <li>-One resident stated, "They have never had knives or forks."</li> <li>-The same resident stated, it "bothers me" but he had never told anyone because he "figures that's just the way it is."</li> <li>-The same resident spreads jelly with the "handle" of his spoon.</li> <li>-The same resident cuts ham with his spoon.</li> <li>-The same resident had lived in other places but had not encountered not having knives or forks.</li> <li>-The same resident stated, "I celebrate when I go to the hospital and get a fork and knife."</li> <li>-Another resident stated, "You don't get any knives or forks."</li> <li>-The same resident stated, "The meat is always easy to cut or they serve it diced."</li> <li>-The same resident stated, "I only eat rolls with my fingers."</li> <li>-The same resident stated, "It is hard to pick up food like beans and spaghetti with a spoon."</li> <li>-The same resident stated, "They just wanted us to have spoons."</li> <li>-Two residents stated "It would be nice to have them."</li> <li>-Roast beef, salad, and spaghetti was difficult to eat with a spoon.</li> <li>-"Have to use my fingers to put salad and spaghetti on the spoon."</li> <li>-Six residents were never given an explanation for the reason they only get spoons.</li> <li>-"You can cut ham" with a spoon.</li> <li>-"I take the spoon and make it like a knife."</li> <li>-Four residents stated "I've never asked for one."</li> <li>-"I just tear up waffles with my hand."</li> </ul>	D 287		

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D 287	<p>Continued From page 8</p> <ul style="list-style-type: none"> <li>-One resident had never seen any residents try to hurt each other.</li> <li>-"Can't cut up stuff" with a spoon, but it did not make him feel bad to not have a fork or knife available.</li> <li>-"They won't let us have them."</li> <li>-One resident said it was hard to cut up food with a spoon.</li> <li>-"I eat ham with my fingers."</li> <li>-It was difficult to eat pancakes with a spoon.</li> <li>-One resident stated he "ate with my fingers before."</li> <li>-One resident had never eaten with his fingers.</li> <li>-The facility had only used spoons since one resident was admitted.</li> <li>-Three residents were able to eat all foods with a spoon.</li> <li>-One resident stated the facility was "fraid we might kill each other."</li> <li>-"I guess it's a hazard."</li> <li>-"It's a pain in the butt to eat with just a spoon."</li> <li>-One resident said he would like a "plastic fork or knife."</li> <li>-One resident stated that having a fork or knife would "make it feel like home."</li> <li>-"I have to cut food with a spoon and use my hands at times."</li> <li>-One resident had lived in the facility for over five years and had never been given a fork or knife.</li> </ul> <p>Interview with the OM on 6/15/16 at 8:00am revealed:</p> <ul style="list-style-type: none"> <li>-"I will give out forks" if residents request one.</li> <li>-"I've got like 4 boxes."</li> <li>-She did not know if the facility admission packet informed residents upon admission that knives and forks were not offered.</li> <li>-No one had ever asked her about having a knife</li> </ul>	D 287		

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D 287	<p>Continued From page 9</p> <p>or a fork.</p> <p>-She did not know if all residents had physician's orders in their record prohibiting them from having a knife or a fork.</p> <p>Record review revealed a Physician's Order Form that was signed by the Primary Care Provider (PCP) that stated "State regulations requires this facility to use a complete place setting consisting of a knife, fork and spoon. Forks or knives are considered potential weapons in our facility due to the clientele that we serve. The following physician's order allows the resident to have only a spoon at each meal."</p> <p>Observation of the breakfast meal on 6/15/16 at 8:14am revealed:</p> <p>-The meal consisted of scrambled eggs, toast with jelly and butter, and cream of wheat.</p> <p>-All residents had a spoon only for this meal.</p> <p>Observation of the storage area in the facility's kitchen on 6/15/16 at 9:15am revealed there were 2 unopened boxes of forks (32 count each) and 2 unopened boxes of knives (32 count each).</p> <p>Interview with kitchen staff on 6/15/16 at 9:15am revealed residents were allowed to have a fork or a knife if they requested it.</p> <p>Interview with the Clinical Director (CD) on 6/15/16 at 3:45pm revealed:</p> <p>-They did not use forks or knives for "safety reasons" (so residents would not harm one another).</p> <p>-The information was reviewed with residents in the admission packet.</p>	D 287		

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D 287	<p>Continued From page 10</p> <ul style="list-style-type: none"> <li>-"We go over it with them."</li> <li>-The residents "have access to forks and knives if needed."</li> <li>-"I don't really watch the meals."</li> <li>-"Staff cuts meat up with a spoon."</li> </ul> <p>Interview with the 1st shift Personal Care Aide (PCA) on 6/16/16 at 2:15pm revealed:</p> <ul style="list-style-type: none"> <li>-She had worked in the facility for nine months as a PCA.</li> <li>-She only had one resident to ask for a fork and knife.</li> <li>-He was not given a fork or knife.</li> <li>-"I cut food up if needed."</li> <li>-"They don't complain about not having them."</li> </ul> <p>Observation of the lunch meal on 6/20/16 at 12:06pm revealed:</p> <ul style="list-style-type: none"> <li>-There were 11 residents present in the MDR and 6 residents in the 2nd dining room.</li> <li>-Not all residents entered the dining room at the same time.</li> <li>-The meal consisted of a slice of ham approximately 1/4 inch thick, green beans, mashed potatoes, cornbread and mandarin orange slices.</li> <li>-Six residents were observed to pick up their ham slice with their fingers to eat it.</li> <li>-Seven residents were observed to cut their ham slice with the bowl of their spoon.</li> <li>-One resident, who had cut his own ham slice with the bowl of his spoon, was observed to cut up the ham slice of another resident, who was sitting at this table.</li> <li>-One resident was using his hands to hold the ham in place, so he could cut it with his spoon, and was having difficulty getting the ham onto the spoon.</li> </ul>	D 287		

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D 287	<p>Continued From page 11</p> <p>-One resident ate all of the items on his plate except the ham.</p> <p>Interview with the facility's Primary Care Provider (PCP) on 6/20/16 at 12:45pm revealed:</p> <p>-She had been providing care to residents in the facility for 1 year and 2 months.</p> <p>-She was aware that the residents only used spoons for all meals.</p> <p>-The facility had used only spoons for all meals as long as she had been at the facility.</p> <p>-She had signed the standard order for "spoons only" for all residents, but had not assessed each resident for their individual ability to use forks and knives.</p> <p>-"There may be residents that could use forks and knives, but others may not be safe."</p> <p>-"I don't recommend the use of forks and knives in the building, it's not safe."</p> <p>Telephone interview with the Kitchen Manager on 6/21/16 at 11:37am revealed:</p> <p>-He had worked in the facility for 4 years, and they had always used spoons only.</p> <p>-They did not use forks and knives for safety issues "per MD orders."</p> <p>-They had forks and knives in the storage area of the kitchen.</p> <p>-He was unaware of any incidents involving forks or knives, and had only witnessed arguments in the dining room.</p> <p>-Residents that requested a fork or knife would be assisted by the PCAs.</p> <p>Telephone interview with the OM on 6/21/16 at 12:00pm revealed:</p> <p>-They had not used forks or knives for "a long, long time."</p>	D 287		

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NAME OF PROVIDER OR SUPPLIER  <b>PINEBROOK RESIDENTIAL CENTER 1</b>		STREET ADDRESS, CITY, STATE, ZIP CODE <b>244 HARRISON AVENUE YADKINVILLE, NC 27055</b>		
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D 287	Continued From page 12  -She never had anyone ask for a fork or knife. -She stated it was for the safety of the residents. -She did not know if the PCP had assessed each resident for the ability to use a fork and knife, and stated "I'm fairly new, I would think the MD knows that." -Staff would cut up foods if needed.  Telephone interview with a Mental Health Provider on 6/21/16 at 12:50pm revealed: -She was aware that the residents only used spoons for all meals. -She was unaware of any incidents involving forks or knives. -She had not assessed each resident for their individual ability to use forks and knives.  Telephone interview with the Administrator on 6/27/16 at 12:55pm revealed: -She had been working in the facility since 2008 and the residents had not used forks and knives during that time. -There were incidents that happened in the past (before 2008) at other facilities that caused this facility to only use spoons. -The PCPs had never assessed each residents individual ability to use a fork and knife.	D 287		
D 315	10A NCAC 13F .0905(a)(b) Activities Program  10A NCAC 13F .0905 Activities Program (a) Each adult care home shall develop a program of activities designed to promote the residents' active involvement with each other, their families, and the community. (b) The program shall be designed to promote active involvement by all residents but is not to	D 315		

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D 315	<p>Continued From page 13</p> <p>require any individual to participate in any activity against his will. If there is a question about a resident's ability to participate in an activity, the resident's physician shall be consulted to obtain a statement regarding the resident's capabilities.</p> <p>This Rule is not met as evidenced by: Based on observations and interviews the facility failed to develop a program of activities in the adult care home designed to promote the residents' active involvement with each other, their families, and the community, as evidenced by all activities were held at another facility located on the same property.</p> <p>The findings are:</p> <p>Observations during the survey revealed there were no activities held in the facility.</p> <p>Review of the posted June 2016 Activity Calendar revealed scheduled activities as follows: -6/14/16 Bible study from 9-10am, memory journals from 10am-12pm, and resident store at 1pm. -6/15/16 Bible study from 9-10am, gardening outside from 10am-12pm, and resident store at 1pm. -6/16/16 Bible study from 9-10am, Bingo from 10:30am-12:30pm, and resident store at 1pm. -6/20/16 Bible study from 9-10am, Mon-Mad-Libs from 10:30am-12:30pm, and resident store at 1pm. -6/27/16 Bible study from 9-10am, coloring from 10am-12pm, and resident store at 1pm.</p>	D 315		

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D 315	<p>Continued From page 14</p> <p>Confidential interviews with 4 residents on 6/14/16 revealed: -They have a calendar for activities. -"They (activities) are OK." -"I don't do activities." -"They have Bingo at the other building, but none here." -Activities were done at 10:00am in building #2.</p> <p>Confidential interviews with staff revealed: -All activities were done in building #2. -"Some residents go and participate." -"They don't mind going to building #2." -"A few participate." -All activities were done in the Activity Room in building #2.</p> <p>Confidential interviews with 2 residents on 6/16/16 revealed: -"I went to Bingo today over at the other building. I don't mind going there for activities." -"I don't mind going down to building #2 for activities, I've been there for Bingo and letter writing."</p> <p>Interview with the Activity Director (AD) on 6/16/16 at 3:18pm revealed: -She had worked in the facility for 9 months. -Activities included Bingo, word search, coloring, and letter writing. -All activities were held in building #2. -The facility Activity Room was located in building #2. -There were 6 residents that participated in Bingo from building #1. -"They don't mind coming here (building #2)." -She had not received any complaints from the residents about having all activities in building</p>	D 315		

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D 315	<p>Continued From page 15</p> <p>#2. -"The residents don't see it as two different buildings." -"They like coming to building #2."</p> <p>Confidential interview with 1 resident on 6/20/16 revealed: -There were no activities in the facility. -If you don't want to go (to building #2), you don't do activities." -"Don't offer anything here (in building #1)." -They had asked him on 2 or 3 occasions what he would like to do.</p> <p>Interview with the Clinical Director (CD) and Resident Care Coordinator (RCC) on 6/20/16 at 1:30pm revealed: -The AD was responsible for activities in both buildings. -Ice cream socials were held in building #1 each month (this was not listed on the activity calendar). -Cook-outs and picnics were held on the patio area at building #2. -Residents attended activities at building #2 on their own, they were not forced to go. -The RCC had worked in the facility since 2011 and had always observed "most" activities were held in building #2. -The AD kept an activity log.</p> <p>A second interview with the AD on 6/20/16 at 3:00pm revealed: -They don't normally have planned activities at building #1. -She used the same activity calendar for both buildings and all activities were held in building #2.</p>	D 315		

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D 315	Continued From page 16  -Most of the residents that participated in activities were from building #2. -She was trained to do all activities in building #2.  Interview with the Operations Manager (OM) on 6/20/16 at 3:20pm revealed: -She had worked as the OM since October 2015. -All residents go to building #2 for activities. -"We have talked about changing the activity program." -They have dances for all residents on the patio at building #2. -"We have more room at building #2." -"We have done it (activities) this way as long as I've worked here." -All the residents in building #1 were men and they did not participate much. -She had talked to the residents about what they would like to do.	D 315		
D 338	10A NCAC 13F .0909 Resident Rights  10A NCAC 13F .0909 Resident Rights An adult care home shall assure that the rights of all residents guaranteed under G.S. 131D-21, Declaration of Residents' Rights, are maintained and may be exercised without hindrance.  This Rule is not met as evidenced by: <b>TYPE B VIOLATION</b> Based on observations, interviews and record reviews, the facility failed to protect residents from exploitation by implementing a resident work program for which residents were not given fair or equitable compensation for work completed	D 338		

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D 338	<p>Continued From page 17</p> <p>that benefited the facility.</p> <p>The findings are:</p> <p>Interview with the Operations Manager (OM) on 6/15/16 at 8:00am revealed:</p> <ul style="list-style-type: none"> <li>-There was a "work program" that residents participated in.</li> <li>-"I have people coming to me wanting to do stuff, then some don't want to do anything."</li> <li>-The residents who wanted to participate could "earn" a \$1.00 per credit through the facility store.</li> <li>-There was a list of different things residents could choose from, which included wiping down door knobs, picking up paper off the ground, and picking up cigarette butts.</li> <li>-The work program was not required but the residents get snacks "free."</li> <li>-Resident who did not participate in the work program could purchase drinks at the resident store for \$.25.</li> <li>-Residents who participated in the work program had to get a supervisor to "sign off they did it."</li> <li>-Even if a participating resident experienced a "bad" day, they still received their credit if they did their work.</li> <li>-Store credit was not taken away from residents for "bad" behavior.</li> </ul> <p>Interview with the 1st shift Medication Aide (MA) on 6/16/16 at 9:10am revealed:</p> <ul style="list-style-type: none"> <li>-Certain residents had certain jobs they did periodically on various days.</li> <li>-The participating residents were assigned jobs through the activities department.</li> <li>-Jobs included wiping down hand rails, picking up cigarette butts, and sweeping the porch.</li> </ul>	D 338		

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D 338	<p>Continued From page 18</p> <ul style="list-style-type: none"> <li>-She thought participating residents told other residents about the program.</li> <li>-She did not know how many residents participated in the work program.</li> <li>-When a resident completed their assignment, they brought their form to her and she would sign it off.</li> <li>-She usually would tell them to come and get her and "I'll watch them do it for a few minutes."</li> <li>-The participating residents had to have a signature to get "paid."</li> <li>-The work program was not used punitively.</li> </ul> <p>Interview with the 1st shift Personal Care Aide (PCA) on 6/16/16 at 2:15pm revealed:</p> <ul style="list-style-type: none"> <li>-"They enjoy doing it, we tell them about it and they find out from other residents."</li> <li>-The residents get paid \$1 store credit per day and never get it taken away. They get credit weekly."</li> </ul> <p>Interview with the OM and Administrator on 6/16/16 at 3:45pm revealed:</p> <ul style="list-style-type: none"> <li>-The funds for the work program come from the owner of the facility.</li> <li>-He buys items for the store and the residents are able to use their earned work credit to buy items at a low cost.</li> <li>-"We have residents that want to participate. They ask if there is an open job they can do."</li> <li>-The residents got signatures each day for work completed and at the end of the week they received \$5 in store credit.</li> </ul> <p>Observations on 6/20/16 at 10:45am and 5:30pm revealed one resident cleaning door knobs and wiping down handrails, and a second resident sweeping the outside patio of the</p>	D 338		

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D 338	<p>Continued From page 19 facility.</p> <p>Interview with Housekeeping Staff on 6/20/16 at 10:46am revealed: -She would go behind the residents and perform the task as well. -If a resident does not perform their assigned task the Housekeeping Staff does it that day.</p> <p>Interview with the 1st shift MA on 6/20/16 at 1:23pm revealed: -Staff did not ask residents to participate in the program. -Staff would do the work if a resident did not. -The PCP assessed the residents' ability to participate. -"It gives independence to the residents."</p> <p>Interview with the Activities Director (AD) on 6/20/16 at 3:06pm revealed: -She had been in her position for 9 months. -She was responsible for the resident work program. -"You don't have to do it." -"It lets (the residents) feel like they're a part of society." -Housekeeping was responsible for sweeping but the residents like to sweep outside areas. -She was not sure how residents found out about the program. -Residents do not have credits taken away for behaviors. -The program has "never been that way."</p> <p>Interviews with the OM on 6/20/16 at 3:30pm and 5:06pm revealed: -She knew about the work program because she had previously been employed with the facility in</p>	D 338		

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D 338	<p>Continued From page 20</p> <p>another position about 4 or 5 years ago. To her knowledge, nothing had changed with the program since that time.</p> <p>-She did not know how residents found out about the program.</p> <p>-She thought residents found out about the program by "word of mouth."</p> <p>-Residents came to "us" and say, "I want to be on the work program."</p> <p>-It was "absolutely not" punitive.</p> <p>-She did not know where the work program originated; she could ask the facility owner.</p> <p>-The participating residents had their "paper" in their possession and the paper is signed by staff.</p> <p>-If the participating resident did not feel like doing an assignment for one day, they would receive \$4.</p> <p>-The work program was voluntary and "you can ask any resident here. They aren't made to do it."</p> <p>-She thought the program changed from cash to credit "early part of 2016" due to some residents spending the money on items that were not allowed in the facility, but stated "I really don't know."</p> <p>-She had not received any complaints from residents regarding compensation.</p> <p>-She did not know if the residents were assessed by the PCP prior to participating in the program.</p> <p>Interviews with participating residents on various days and times regarding the work program revealed:</p> <p>-One resident stated "I get credit for helping out in the store, turn in slip at end of week and get to buy things with credit I earn."</p> <p>-"I like working in the store, it keeps me busy, gives me something to do."</p>	D 338		

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D 338	<p>Continued From page 21</p> <ul style="list-style-type: none"> <li>-One resident had participated in the program for 4 years.</li> <li>-"I get store credit, get cardboard boxes from kitchen and take to dumpster, I want to do it."</li> <li>-"My job is just boxes...it's not that hard, some people just clean door knobs, some jobs are harder."</li> <li>-The same resident spent 30 minutes on Mondays, Tuesdays, Thursdays, and Fridays, and 45 minutes on Wednesdays doing his assigned task.</li> <li>-"We used to get paid cash, but that changed to credit sometime after Christmas."</li> <li>-The same resident stated he was able to buy sodas, snacks, and tobacco products at the store.</li> <li>-"Cigarettes are \$1 per pack."</li> <li>-One resident stated he was paid \$1.00 per day to perform his job and he did it 5 days per week.</li> <li>-"Yea I like doing it."</li> <li>-"I get store credit, it changed to credit when (name of current OM) arrived, used to get cash, now it's \$1 credit per day."</li> <li>-"It (the work program) has changed for the better since (OM) got here."</li> <li>-"I wash door knobs, it takes me ten minutes to do my job each day. I asked for the job - I saw other residents doing jobs so I just asked to do it."</li> <li>-"If I don't work, I don't get paid, it doesn't bother me."</li> <li>-"We don't have money, we can get extra snacks that last us a whole week with the \$5 credit."</li> <li>-One resident heard about the work program from a PCA.</li> <li>-"I was gonna try and help out around here."</li> <li>-The same resident did not keep track of the time he spent doing his assignment but he did it "for</li> </ul>	D 338		

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D 338	<p>Continued From page 22</p> <p>about an hour the other day", time spent doing his assignment depended on whether or not he picked up cigarette butts on the same day.</p> <p>-One resident stated he "loves" the store credit because the amount left over one week is rolled over on to the next week and if he received cash, he would spend it but the credit rolls over.</p> <p>-One resident stated the pay was not fair and that he would rather "have more."</p> <p>-The same resident stated "I was paid \$1 an hour as a boy."</p> <p>-The same resident stated the work was worth \$5 per hour, but he had never told anyone about it.</p> <p>-"Two months ago we got cash, not sure why it changed (to credit). I would rather have money in my pocket."</p> <p>-"I don't know who does my job if I'm not here."</p> <p>-The same resident stated that his work credit was never taken away from him.</p> <p>-One resident stated his job was to gather trash in the building. He spent 10 minutes per day on his job.</p> <p>-"They don't pay much, but the pay is fair to me."</p> <p>-"Don't take money away from us."</p> <p>-One resident spent 30 minutes per day gathering trash from the dining room in building #2.</p> <p>-He had been participating in the work program for 2 weeks.</p> <p>-Another resident had told him about the program.</p> <p>-The same resident stated "The pay is fair."</p> <p>-One resident pushed the food trays back to the kitchen for 2 meals per day. He spent 10 minutes per day on this task.</p> <p>-The same resident stated that staff would do his task if he did not and he would not get paid for the day.</p>	D 338		

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NAME OF PROVIDER OR SUPPLIER  PINEBROOK RESIDENTIAL CENTER 1		STREET ADDRESS, CITY, STATE, ZIP CODE 244 HARRISON AVENUE YADKINVILLE, NC 27055		
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D 338	Continued From page 23  Interview with the facility PCP on 6/20/16 at 12:45pm revealed: -She saw residents every 30 days. -"I have an idea of what they can do and can't do. If something changes I let (name of Resident Care Coordinator and Clinical Director) know. If they can't participate I will notify staff." -All residents from building #1 were capable to participate in the work program. -"I feel this (work program) keeps the residents busy and active and that it is a good thing."  Telephone interview with the Business Office Manager (BOM) on 6/21/16 at 9:46am revealed the AD was responsible for keeping up with the residents' account balance for earned credit.  Telephone interview with a Mental Health Provider (MHP) on 6/21/16 at 12:50pm revealed: -She was aware of the facility's work program. -She was the MHP for 5 residents that were involved in the work program. -She had not assessed each resident for their individual ability to participate in the program, but stated all 5 residents were able to participate. -She would notify the facility if there were changes to a resident's ability to participate. -She stated the residents would benefit from more activities in the facility and from other community involvement. -"They do enjoy it, they like having something to do, it is beneficial to them." -"They always want more money, but I have never had a complaint about the pay being unfair."  Telephone interview with the AD on 6/21/16 at	D 338		

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NAME OF PROVIDER OR SUPPLIER  <b>PINEBROOK RESIDENTIAL CENTER 1</b>		STREET ADDRESS, CITY, STATE, ZIP CODE <b>244 HARRISON AVENUE YADKINVILLE, NC 27055</b>		
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D 338	<p>Continued From page 24</p> <p>3:28pm revealed:</p> <ul style="list-style-type: none"> <li>-She did not have a policy or written description for the work program.</li> <li>-She was unaware if the residents had been assessed by their PCP.</li> <li>-She kept a weekly report of each resident's credit balance.</li> <li>-She began working in September 2015 and the program changed from cash to credit "around November 10th 2015."</li> <li>-She had not received any complaints from residents regarding the amount of compensation earned.</li> <li>-She stated the compensation was adequate.</li> </ul> <p>Interview with a 1st shift MA on 6/27/16 at 10:05am revealed:</p> <ul style="list-style-type: none"> <li>-"I assume the pay is fair."</li> <li>-She had never had any complaints about the pay.</li> <li>-She was unsure of when the program changed from cash to credit.</li> </ul> <p>Interview with participating residents on 6/27/16 at various times regarding the work program revealed:</p> <ul style="list-style-type: none"> <li>-"The pay is fair, I don't do that much. I would still do it even if they did not pay us."</li> <li>-"I can't complain about the pay, I'm happy with it. I would still do work if I didn't get credit."</li> <li>-"I would still do the work if I did not get credit."</li> <li>-One resident stated he did not know if the pay was fair and he was not sure if he would still do his assignment if he did not receive store credit, but he did not think he would.</li> <li>-Another resident stated the pay was not fair and he would not do his assignment if he did not receive store credit.</li> </ul>	D 338		

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D 338	<p>Continued From page 25</p> <p>-A third resident stated he would continue to do his assignment even if he did not receive store credit. -"I would not do the work if I didn't get credit."</p> <p>Confidential interview with one resident revealed: -He had stopped participating in the work program because the pay was unfair. -He stated his assignment took 30 minutes each day to complete. -It was "too much to do for just a dollar." -"In the real world you get paid more than one dollar." -He would not participate in the program if he was not compensated. -He stated that \$7.25 per hour would be an acceptable amount of pay, and that meant he should have been paid around \$18 per week.</p> <p>Interview with one resident's Guardian on 6/27/16 at 12:38pm revealed: -The Guardian was unaware that the resident was participating in the work program. -The Guardian was never given information about the work program. -The Guardian visited the facility monthly.</p> <p>Interview with the Housekeeping Supervisor on 6/27/16 at 10:20am revealed: -Staff would complete the work if residents did not. -"We do all of the tasks anyway, just gives them something that makes them feel like they are able to do something." -"It changed from cash to credit because residents would loan money to each other and never get it back, it (credit) is easier to keep up with."</p>	D 338		

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D 338	<p>Continued From page 26</p> <p>-"The amount paid is fair, items in store are cheap." -She had not heard any resident complain about the compensation. -"The residents just clean with soap and water, we go behind them and use disinfectant."</p> <p>A second interview with the BOM on 6/27/16 at 10:29am revealed: -The work program changed from cash to credit in January 2016. -The facility was supposed to change to credit 2 years ago but had a "miscommunication." -The residents do not complain about getting credit instead of cash, "they like it better."</p> <p>Telephone interview with the Administrator on 6/27/16 at 12:55pm revealed: -She was unsure of when the work program changed from cash to credit. -It was changed "so residents would not buy alcohol or drugs" with the cash. -Residents were not assessed by the PCP prior to working in the facility.</p> <p>In summary, there were 8 residents that participated in the work program. Five residents stated the pay was fair, two residents stated the pay was not fair, and one resident was unable to decide. When asked if they would continue to do the work without compensation, four said they would continue to do the work and four said they would not. All 8 residents enjoyed participating in the work program.</p> <hr/> <p>The facility provided the following Plan of Protection on 7/01/2016:</p>	D 338		

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D 338	Continued From page 27  -The facility will discuss the work program with different agencies including State, DSS, guardians, and mental health providers. -The facility will make changes that are suggested by the agencies. -If unable to make the work program acceptable, the facility will discontinue this voluntary activity.  THE DATE OF CORRECTION FOR THIS TYPE B VIOLATION SHALL NOT EXCEED AUGUST 11, 2016.	D 338		
D911	G.S. 131D-21(1) Declaration of Residents' Rights  G.S. 131D-21 Declaration of Resident's Rights Every resident shall have the following rights: 1. To be treated with respect, consideration, dignity, and full recognition of his or her individuality and right to privacy.  This Rule is not met as evidenced by: TYPE B VIOLATION  Based on observations, interviews and record reviews, the facility failed to ensure residents were treated with respect and dignity and full recognition of his or her individuality related to the provision of a complete set of flatware that included a knife and fork.  The findings are:  Based on observations, interviews and record reviews, the facility failed to assure residents were provided with a complete set of flatware	D911		

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D911	<p>Continued From page 28</p> <p>that included a knife and fork in order for residents to eat food without having to use their hands or cut up food with a spoon. [Refer to Tag 287, 10A NCAC 13F .0904(b)(2) Nutrition and Food Service].</p> <p>_____</p> <p>The facility provided the following Plan of Protection on 6/22/16:                      -Each resident will be assessed by the Primary Care Provider to determine if spoon only order is appropriate.                      -Facility will emphasize to the Primary Care Provider the resident rights and independent choice aspects of this subject.                      -Ensure all residents are assessed for the use of fork/knife.</p> <p>THE DATE OF CORRECTION FOR THIS TYPE B VIOLATION SHALL NOT EXCEED AUGUST 11, 2016.</p>	D911		
D914	<p>G.S. 131D-21(4) Declaration of Residents' Rights</p> <p>G.S. 131D-21 Declaration of Residents' Rights Every resident shall have the following rights:                      4. To be free of mental and physical abuse, neglect, and exploitation.</p> <p>This Rule is not met as evidenced by:                      Based on observations, interviews and record reviews, the facility failed to protect residents from exploitation, as evidenced by the utilization of a resident work program for which residents were not given fair or equitable compensation for work completed that benefited the facility.</p>	D914		

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D914	Continued From page 29  The findings are:  Based on observations, interviews and record reviews, the facility failed to protect residents from exploitation by implementing a resident work program for which residents were not given fair or equitable compensation for work completed that benefited the facility. [Refer to Tag 338, 10A NCAC 13F .0909 Resident Rights (Type B Violation)].	D914		

Pinebrook Residential Center Inc, Building 1  
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Tag	Page	Plan of Correction	Date complete
D 034	1	<p>Inspection was completed on 6/20/16. Calls had been made to Fire Inspector to have the inspection completed. He stated to Operations Director he had over 1600 businesses to inspect, but would be back on track shortly. A call to request inspection will be made prior to being due by the Operations manager or designee to ensure that inspection is done in timely manner. This will be placed in QA minutes as a reminder to call at appropriate times. The findings from inspection was corrected and Fire Inspector notified of corrections</p>	7/18/16
D 049	2	<p>Window screens will be repaired. Repairs have begun and will be completed as soon as possible, Building inspection will be completed monthly by Administrator or designee. Building inspections will be reviewed in quarterly QA meetings.</p>	9/30/16
D 287	5	<p>Each resident will have an assessment by the primary care provider to determine if a spoon only order is appropriate. Facility will emphasize to the primary care provider the residents' rights. Facility will ensure that the results of the resident assessments are documented in the residents' files. Facility will follow physician orders regarding place settings. Full place settings will remain available in the facility to be used as stated in physician order. Facility will ensure that all meals are served in a manner appropriate to eat without the use of a knife or fork.</p> <p>Physician's findings during assessment will be added to current diet sheet which will be updated as needed, or if there is a change. Administrator or designee will review diet sheets on a monthly basis for accuracy.</p> <p>Pinebrook disputes that the place setting given to residents constitutes a Type B violation, because the facility is</p>	8/11/16

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		<p>following the valid physicians' orders, maintained in the residents' files, as the facility is required to do. Pinebrook cannot choose to disregard those orders.</p> <p>In addition, similar spoon only orders are part of a contested case currently before the OAH and scheduled for trial in September. Given the current dispute as to the orders, any further corrective action should wait for the court's determination, which will inform the conduct of both parties.</p>	
D 315	13	<p>Activities are held daily with required number of hours meeting weekly requirements. A separate calendar will be kept by building 1 and building 2 with some activities being in both buildings along with outside activities and outings. The activity calendar will be approved by Administrator monthly before posting.</p> <p>Administrator or designee will monitor calendars to ensure that activities are being offered in both buildings.</p>	8/1/2016
D 338	16	<p>Pinebrook will ensure that resident participation in the AWP is on an entirely voluntary basis. Management will ensure that any resident who elects to participate in the AWP—and the guardian where applicable—sign a written statement that participation is voluntary, that residents who participate will receive \$1 store credit but not any monetary compensation, and that the resident is voluntarily choosing to participate. Pinebrook will contract with a mental health professional to review the AWP to ensure it is not misusing residents or otherwise used inappropriately as a tool for coercion, discipline, or control.</p> <p>Especially in light of the recent revision to N.C. Gen. Stat. § 131D-34, defining "substantial risk" as the risk of an outcome that is "substantially certain to materialize if immediate action is not</p>	8/11/16

Pinebrook Residential Center Inc, Building 1  
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		<p>taken,” Pinebrook disputes that the AWP constitutes a Type B violation for risk of exploitation. Pinebrook receives no material benefit from the AWP, and maintains the AWP for the benefit of the residents—not the facility. Thus, there is no immediate risk of exploitation of the residents.</p> <p>In addition, the AWP is part of a contested case currently before the OAH and scheduled for trial in September. Given the current dispute as to the AWP, any further corrective action should wait for the court's determination, which will inform the conduct of both parties.</p>	
D 911	26	See Tag D 287	8/11/16
D 914	27	See Tag D 338	8/11/16