

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 12/31/2014
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 345354	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED C 12/04/2014
NAME OF PROVIDER OR SUPPLIER PINEY GROVE NURSING AND REHABILITATION CENTER			STREET ADDRESS, CITY, STATE, ZIP CODE 728 PINEY GROVE ROAD KERNERSVILLE, NC 27284		
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F 000	INITIAL COMMENTS	F 000			
F 334 SS=E	<p>483.25(n) INFLUENZA AND PNEUMOCOCCAL IMMUNIZATIONS</p> <p>The facility must develop policies and procedures that ensure that --</p> <p>(i) Before offering the influenza immunization, each resident, or the resident's legal representative receives education regarding the benefits and potential side effects of the immunization;</p> <p>(ii) Each resident is offered an influenza immunization October 1 through March 31 annually, unless the immunization is medically contraindicated or the resident has already been immunized during this time period;</p> <p>(iii) The resident or the resident's legal representative has the opportunity to refuse immunization; and</p> <p>(iv) The resident's medical record includes documentation that indicates, at a minimum, the following:</p> <p>(A) That the resident or resident's legal representative was provided education regarding the benefits and potential side effects of influenza immunization; and</p> <p>(B) That the resident either received the influenza immunization or did not receive the influenza immunization due to medical contraindications or refusal.</p> <p>The facility must develop policies and procedures that ensure that --</p> <p>(i) Before offering the pneumococcal immunization, each resident, or the resident's</p>	F 334		12/30/14	

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

TITLE

(X6) DATE

Electronically Signed

12/26/2014

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

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F 334	<p>Continued From page 1</p> <p>legal representative receives education regarding the benefits and potential side effects of the immunization;</p> <p>(ii) Each resident is offered a pneumococcal immunization, unless the immunization is medically contraindicated or the resident has already been immunized;</p> <p>(iii) The resident or the resident's legal representative has the opportunity to refuse immunization; and</p> <p>(iv) The resident's medical record includes documentation that indicated, at a minimum, the following:</p> <p>(A) That the resident or resident's legal representative was provided education regarding the benefits and potential side effects of pneumococcal immunization; and</p> <p>(B) That the resident either received the pneumococcal immunization or did not receive the pneumococcal immunization due to medical contraindication or refusal.</p> <p>(v) As an alternative, based on an assessment and practitioner recommendation, a second pneumococcal immunization may be given after 5 years following the first pneumococcal immunization, unless medically contraindicated or the resident or the resident's legal representative refuses the second immunization.</p> <p>This REQUIREMENT is not met as evidenced by: Based on record reviews and staff interview, the facility failed to annually educate 5 of 5 sampled residents or their legal representatives on the benefits and potential side effects of the influenza and pneumonia vaccine. (Residents #3, 5, 35, 36,</p>	F 334	<p>DISCLAIMER: Piney Grove Nursing & Rehabilitation Center acknowledges receipt of the Statement of Deficiencies and proposes this Plan of Correction to the extent that</p>		

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F 334	<p>Continued From page 2 and #64).</p> <p>Findings included:</p> <p>Throughout the survey period of 12/1/14 through 12/4/14, reviews of the facility ' s immunization records for 5 of 5 sampled residents revealed the residents received the influenza vaccine during the month of November 2014. The pneumonia vaccine was not administered to any of the 5 sampled residents at this time. However; the signed consent forms giving the facility permission to administer both vaccines were outdated. Also, there was no documentation available to indicate each resident or the resident's legal representative received education regarding the benefits and potential side effects of the immunizations for the influenza season which began October 2014.</p> <p>Review of the facility's immunization records revealed: Resident #3 received the influenza vaccine on 11/4/14, but the most recent consent form was signed on 12/26/12; Resident #5 received the influenza vaccine on 11/5/14 and the pneumovax on 8/8/12, but the consent form was signed on 4/1/03; Resident #35 received the influenza vaccine on 11/10/14 and the pneumovax on 7/4/11, but the consent form was signed on 6/13/11; Resident #36 received the influenza vaccine on 11/4/14 and the pneumovax on 10/1/11, but the consent form was signed on 7/12/12; and, Resident #64 received the influenza vaccine on 11/5/14 and the pneumovax on 11/1/08, but the consent form was signed on 4/23/10.</p> <p>During an interview on 12/2/14 at 4:00pm, the</p>	F 334	<p>the summary of the findings is factually correct and in order to maintain compliance with applicable rules and provisions of quality of care of residents. The Plan of Correction is submitted as a written allegation of compliance.</p> <p>Piney Grove Nursing & Rehabilitation <input type="checkbox"/>s response to this Statement of Deficiencies does not denote agreement with the Statement of Deficiencies nor does it constitute an admission that any deficiency is accurate. Further, Piney Grove Nursing & Rehabilitation reserves the right to refute any of the deficiencies on this Statement of Deficiencies through informal Dispute Resolution formal appeal procedure and/or any other administrative or legal proceeding.</p> <p>F334 SS=E</p> <p>The facility has policies and procedures in place to ensure all current residents and new admissions receive information on the benefits and potential side effects of the influenza and pneumonia vaccine.</p> <p>The identified residents #3, 5, 35, 36, and #64 or their legal representatives will be contacted by the DON, QI nurse, and/or SDC and will be given written education on the benefits and potential side effects of the influenza and pneumococcal vaccines. The education given will be documented in each residents medical record by the DON, QI nurse, and/or SDC by Tuesday, December 30, 2014. A QI</p>		

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F 334	Continued From page 3 DON (Director of Nursing) revealed that the residents or the residents' legal representatives were provided the education materials regarding the influenza and the pneumonia immunizations during the admission process. The DON stated that because the influenza and pneumonia educational materials and consent forms were provided and signed during the admission process, the facility was not required to provide the information or have consent forms signed every year.	F 334	<p>tool will be used to verify that education was received by each above identified resident or their legal representative and documented in each residents medical record. The Pre-Immunization Audit tool will be completed by 12/30/14.</p> <p>100% of all the other residents or their legal representatives will be contacted by the DON, QI nurse and/or SDC and will be given written education on the benefits and potential side effects of the influenza and pneumococcal vaccines. The education given will be documented in each resident's medical record by the DON, QI nurse, and/or the SDC by Tuesday, December 30, 2014. The Pre-Authorization Audit Tool will be used to verify that education was received by all other residents identified and/or their legal representative and documented in all other residents' medical record. 12/30/14</p> <p>The facility has policies and procedures in place that ensure that all new residents or their legal representatives upon admission will receive education on the benefits and potential side effects of the influenza and pneumonia vaccines. The DON, QI nurse, and/or the SDC will monitor five times weekly that each new admission has received education on the benefits and potential side effects of the influenza and pneumococcal vaccines. A QI tool will be used to verify that education was received by each above identified resident or their legal representative and was documented in each residents medical record. The QI tool will be completed five</p>		

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F 334	Continued From page 4	F 334	<p>times weekly on an ongoing basis. This system will be in place by Tuesday, December 30, 2014.</p> <p>Annually, beginning in September 2015, all residents or their legal representatives will receive education on the benefits and potential side effects of the influenza and pneumococcal vaccines. The education given will be documented in each residents medical record by the DON, QI nurse and/or the SDC. A QI tool will be completed to ensure that all annual education that has been given is documented in all other residents' medical record by December 30, 2015.</p> <p>100% of all nursing staff will be in-serviced on our policies and procedures for influenza and pneumococcal vaccines. This in-service will include the education that each resident or their legal representative must receive on the benefits and potential side effects of the influenza and pneumococcal vaccines. This education will be completed by Tuesday, December 30, 2014.</p> <p>The DON and or Administrator will present to the Executive Committee the findings from the QI tools concerning each resident or their legal representative receiving education concerning the benefits and potential side effects of the influenza and pneumonia vaccines monthly for three months. The information from the monthly QI meetings will be presented at the next Executive QI</p>		

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F 334	Continued From page 5	F 334	committee meeting for recommendations for further monitoring beginning December 30, 2014.		
F 365 SS=D	<p>483.35(d)(3) FOOD IN FORM TO MEET INDIVIDUAL NEEDS</p> <p>Each resident receives and the facility provides food prepared in a form designed to meet individual needs.</p> <p>This REQUIREMENT is not met as evidenced by: Based on observation, record review, and interviews with the resident and staff the facility failed to provide a mechanically altered diet as needed for 1 of 1 sampled, edentulous resident (Resident #142).</p> <p>Findings included:</p> <p>Resident #142 was admitted on 11/14/14 with diagnoses that included heart failure, hypertension, and chronic obstructive pulmonary disease.</p> <p>The Admission Assessment dated 11/14/14 indicated Resident #142 could feed himself and was not on a mechanically altered diet.</p> <p>The diet order dated 11/15/14 indicated Resident #142 was on a cardiac, no added salt diet.</p> <p>The Dietary Supplement dated 11/19/14 indicated Resident #142 was on a regular consistency, cardiac diet, consumed "between 26-50% of all meals", "leaves 25% food uneaten at most meals", and had no chewing problems.</p>	F 365	<p>F365 SS=D The facility will have a system in place to ensure that residents are provided mechanically altered diets as needed for edentulous residents. 12/30/14</p> <p>The identified resident #142 was evaluated by speech therapy for an appropriate diet consistency on 12/3/14. The speech therapist downgraded the residents diet to mechanical soft on 12/3/14. 100% of all other residents were evaluated by the speech therapist for appropriate diet consistencies. These evaluations were completed by the speech therapist on 12/21/14. Any residents in need of mechanically altered diets were addressed by the speech therapist immediately upon completion of each evaluation. 12/30/14</p> <p>100% of all residents will be evaluated for any needed mechanically altered diet weekly by the speech therapist weekly for</p>	12/30/14	

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F 365	<p>Continued From page 6</p> <p>The Minimum Data Set (MDS) dated 11/21/14 indicated the resident was cognitively intact, had adequate hearing, clear speech, was understood and understands others. He did not reject evaluation or care, required limited assistance with eating, was on a therapeutic diet, and was not on a mechanically altered diet. The MDS further indicated he had no difficulty with his oral/dental status, including difficulty chewing or being edentulous, and he participated in the assessment.</p> <p>Record review of the November 14 - December 1, 2014 physician orders revealed no Speech Therapy or dietary consults had been ordered for Resident #142.</p> <p>Record review of the Menu Guide Report for November 27 - December 3, 2014 revealed the following cardiac, regular diet entrees:</p> <p>Thursday, November 27, 2014 Breakfast: oatmeal, egg substitute Lunch: oven fried chicken Dinner: soup, turkey melt</p> <p>Friday, November 28, 2014 Breakfast: grits, egg substitute Lunch: baked fish Dinner: sloppy joe</p> <p>Saturday, November 29, 2014 Breakfast: oatmeal, egg substitute Lunch: cranberry glazed pork roast Dinner: baked chicken</p> <p>Sunday, November 30, 2014 Breakfast: grits, egg substitute</p>	F 365	<p>four weeks, then monthly for three months. The DON, QI, or SDC will use a Food Consistency Monitoring QI tool for monitoring the evaluations completed by the speech therapist for appropriate mechanically altered diets as needed weekly for four weeks, then monthly for three months. The QI tool will be implemented by Tuesday, December 30, 2014.</p> <p>100% of all nursing staff to include RNs, LPNs, med aides, and CNAs will be in-serviced on mechanically altered diets for edentulous residents as well as all other residents. This in-service will include signs and symptoms as well as resident statements of difficulty chewing/eating any foods. This process will be for the referral of any resident identified as having chewing/eating difficulties to speech therapy for evaluation. The DON, QI Nurse, or Staff Facilitator will complete the education and in-service by December 30, 2014.</p> <p>The DON or Administrator will present any findings of QI monitoring tool for the completed evaluations by the speech therapist for any needed mechanically altered diets to the next quarterly Executive QI meeting for any recommendations for further monitoring. 12/30/14</p>		

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F 365	<p>Continued From page 7</p> <p>Lunch: steak Dinner: chicken salad sandwich</p> <p>Monday, December 1, 2014 Breakfast: oatmeal, egg substitute Lunch: pork roast Dinner: beef patty with noodles</p> <p>Tuesday, December 2, 2014 Breakfast: grits, egg substitute Lunch: beef patty with noodles Dinner: chicken a la orange</p> <p>Wednesday, December 3, 2014 Breakfast: cereal, egg substitute Lunch: grilled chicken breast Dinner: baked pork chop</p> <p>During an interview on 12/1/14 at 3:40 pm when asked about the food he received on his meal trays, Resident #142 stated, "They bring me food that I can't eat. I can't chew it. I had the rest of my teeth pulled before coming here and don't have dentures." He indicated he does not get mechanically altered food, has difficulty chewing what is given to him, and has reported his difficulty chewing/eating his food "to a lot of the nurses. I have told the ones who bring me my food and who work here on this hall."</p> <p>During an interview on 12/3/14 at 8:25 am Resident #142 indicated he does not have as much difficulty eating the breakfast meal due to the consistency of food such as eggs, oatmeal, and cereal. He indicated the meats at lunch and dinner are the most difficult for him to eat.</p> <p>During an interview with the Kitchen Supervisor on 12/3/14 at 11:25 am she indicated the</p>	F 365			

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F 365	<p>Continued From page 8</p> <p>physician writes an order for the consistency a newly-admitted resident needed and speech therapy does an initial screening of the resident at admission.</p> <p>During an interview with the Rehabilitation Director on 12/3/14 at 12:07 pm she stated, "We screen all new admissions. I know the speech therapist had spoken to him. We were just made aware by nursing this morning that the resident was complaining of chewing difficulties. [Speech Therapist (ST) #1] is down there now. He was screened at admission. Screening is just talking with the resident. We don't do a formal evaluation unless there is [a physician] order. We have not received an order about his need for [an evaluation]."</p> <p>During an interview with ST #1 on 12/3/14 at 12:15 pm regarding Resident #142's initial screen, she stated, "He was eating breakfast. With a screen we don't do hands on. I noticed he didn't have teeth, but I didn't see any problem. I just received an order to check him out today. I asked him today if he has had any problems and he said 'Yes' and that he had reported that to staff, but I had not gotten that information. Typically if the staff sees low intake they should report that. Today he was just downgraded to a mechanical soft diet." She further indicated the most difficult meat for the resident to eat without teeth "would probably be pork."</p> <p>The physician order dated 12/3/14 stated, "ST evaluation - Downgrade diet to [mechanical] soft cardiac."</p> <p>During an observation on 12/3/14 at 12:55 pm of Resident #142's lunch meal, he had eaten all of</p>	F 365			

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F 365	Continued From page 9 his meal which included rice, mechanically soft meat, and green beans. When asked about the change in the consistency of the food he stated, "I could eat that a lot better today." During an interview with the Director of Nursing on 12/3/14 at 2:50 pm she indicated she expected nursing staff to communicate concerns with chewing/eating/low intake to Speech Therapy, the physician, or the nurse practitioner so the resident could be evaluated.	F 365			