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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 345409 | (X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____ | | (X3) DATE SURVEY COMPLETED C 07/09/2015 |
| NAME OF PROVIDER OR SUPPLIER PEMBROKE CENTER | | | STREET ADDRESS, CITY, STATE, ZIP CODE 310 E WARDELL DRIVE PEMBROKE, NC 28372 | | |
| (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) COMPLETION DATE | |
| F 000 | INITIAL COMMENTS | F 000 | | | |
| F 372 SS=E | <p>There were no deficiencies as a result of the Complaint investigation survey of 7/9/15. Event ID#RPF11. Complaint Intake # NC00101107.</p> <p>483.35(i)(3) DISPOSE GARBAGE & REFUSE PROPERLY</p> <p>The facility must dispose of garbage and refuse properly.</p> <p>This REQUIREMENT is not met as evidenced by: Based on observations and interviews the facility failed to keep the dumpster door closed for one of one dumpsters and failed to make sure that the area around the dumpster was clean. The findings included: During the initial kitchen tour with the Certified Dietary Manager (CDM) on 7/6/15 at 4:16 PM the dumpster area was observed. The dumpster door that faced the building was observed to be open. Three disposable gloves were observed on the grassy area directly in front of the dumpster. At that time the CDM closed the dumpster door. During a second observation of the dumpster area with the CDM on 7/8/15 at 9:11 AM the dumpster door that faced the building was observed to be open. Three disposable gloves were observed on the grassy area directly in front of the dumpster and one disposable glove was observed on the ground beside the dumpster door. At that time the CDM closed the dumpster door. During a third observation of the dumpster area with the CDM on 7/9/15 at 10:23 AM the dumpster door was observed closed. Three</p> | F 372 | <p>"This Plan of Correction is prepared and submitted as required by law. By submitting the Plan of Correction. Pembroke Care and Rehabilitation Center does not admit that the deficiency listed on this form exist, nor does the Center admit to any statements, finding, facts or conclusions that form the basis for the alleged deficiency. The Center reserves the right to challenge in legal and/or regulatory or administrative proceedings the deficiency statements, fact, and conclusions that form the basis for the deficiency"</p> <p>1). It is the practice of this provider to dispose of garbage and refuse properly. The dumpster door was closed immediately and debris was immediately cleaned when it was brought to the employee's attention by the surveyor.</p> <p>2). It is the practice of this provider to dispose of garbage and refuse properly. The dumpster door was closed immediately and debris was immediately</p> | 7/17/15 | |

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

TITLE

(X6) DATE

Electronically Signed

07/17/2015

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 372 | Continued From page 1 disposable gloves were observed on the grassy area directly in front of the dumpster and one disposable glove was observed on the ground behind the dumpster. At that time the CDM picked up the gloves and placed into the dumpster. In an interview with the CDM on 7/9/15 at 10:27 AM she stated that she expected staff to pick up any trash that is on the ground. She stated that the maintenance man also checks daily on the dumpster area. In an interview with the Housekeeping manager on 7/9/15 at 10:56 AM she stated that all staff should pick up any items they find when out at the dumpster area and should close the dumpster door. | F 372 | cleaned when it was brought to the employee's attention by the surveyor. 3). 100% of the staff was re-educated by maintenance director from 7/10-13, 2015 on proper garbage disposal methods of refuse to include proper closure of dumpster to prevent pest harborage, and keeping the trash dumpster area clean and free of debris. 4). The Maintenance Director or designee will montior/audit the gargage dumpster for compliance hourly for 48hr from 0600am-2000hr, then 3 times daily for 2 weeks and random audits for three months, to evaluate proper disposal methods are being followed. Center will review compliance in QA meeting for 3 months. | | |