

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>345003</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____  B. WING _____		(X3) DATE SURVEY COMPLETED  <b>07/11/2018</b>
NAME OF PROVIDER OR SUPPLIER  <b>SILAS CREEK REHABILITATION CENTER</b>			STREET ADDRESS, CITY, STATE, ZIP CODE <b>3350 SILAS CREEK PARKWAY WINSTON-SALEM, NC 27103</b>		
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F 561 SS=E	<p>Self-Determination CFR(s): 483.10(f)(1)-(3)(8)</p> <p>§483.10(f) Self-determination. The resident has the right to and the facility must promote and facilitate resident self-determination through support of resident choice, including but not limited to the rights specified in paragraphs (f) (1) through (11) of this section.</p> <p>§483.10(f)(1) The resident has a right to choose activities, schedules (including sleeping and waking times), health care and providers of health care services consistent with his or her interests, assessments, and plan of care and other applicable provisions of this part.</p> <p>§483.10(f)(2) The resident has a right to make choices about aspects of his or her life in the facility that are significant to the resident.</p> <p>§483.10(f)(3) The resident has a right to interact with members of the community and participate in community activities both inside and outside the facility.</p> <p>§483.10(f)(8) The resident has a right to participate in other activities, including social, religious, and community activities that do not interfere with the rights of other residents in the facility. This REQUIREMENT is not met as evidenced by: Based on record review, resident and staff interviews the facility failed to honor the food choices for 10 of 10 residents (Resident #10, Resident #41, Resident #21, Resident #36, Resident #50, Resident #5, Resident #44, Resident #2, Resident #33 and Resident #8).</p>	F 561	<p>How the corrective action will be accomplished for those affected by the deficient practice:</p> <p>The previous Food from Outside Sources Use and Storage policy was revised on 7/16/2018 to no longer prevent the facility</p>	8/7/18	

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

TITLE

(X6) DATE

Electronically Signed

08/01/2018

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 561	<p>Continued From page 1</p> <p>Findings Included:</p> <p>A group interview with the resident council attended by 10 residents was conducted on 7/10/18 from 3:30 pm until 4:35 pm. The group expressed a concern that the facility would no longer provide them with peanut butter. The facility had told them the corporate office no longer allowed them to purchase or serve anything with peanut butter because there had been a choking incident at one of their other facilities. The group added hot dogs were also not allowed to be served to them. The group expressed they didn ' t feel like this was right and they should be provided with these food items if they were allowed on their diets and they weren ' t at risk for choking. The group unanimously agreed they would like to have hot dogs as a regular menu item and be available as a menu alternate item. They also missed being able to have peanut butter sandwiches and peanut butter crackers as a snack offering at night. The group expressed that many residents didn ' t have any family or financial resources to be able to access these food items on their own. They felt like their request for these food items was reasonable since they were not expensive food items.</p> <p>An interview on 7/10/18 at 4:45 pm with the Administrator revealed she had received a policy update from their corporate office that effective 6/1/18 the facility wasn ' t allowed to purchase or serve peanut butter to the residents. She stated it was her understanding there had been an issue at another facility that led to this policy.</p> <p>Review of a policy titled, "Food from Outside Sources Use and Storage" with a revision date of 6/1/18 stated "No cylinder-shaped meats encased</p>	F 561	<p>from not providing food like peanut butter and hot dogs for residents. Residents were informed of the new policy change on 7/16/2018 and it was reviewed in Resident Council again on 7/24/2018. Peanut butter sandwiches and hot dogs were added to the menu as an always available item, daily for lunch and dinner. Other snacks mentioned in the 2567 such as peanut butter crackers will be available to residents.</p> <p>Responsible: Ellen Rich, NHA and Corporate Dietary Representative</p> <p>How the facility will identify other residents having the potential to be affected by the same deficient practice and what action will be taken:</p> <p>All residents have the potential to be affected by F561. During the care planning and assessment period the CDM or designee will assess residents for food preferences. At any time during a resident's stay at the facility, residents have the right to express food preferences and the Dietary Department will attempt to honor the request/preferences within the confines of the physician ordered diet and assessed appropriate texture.</p> <p>Responsible: Robert Tysinger, CDM or designee</p> <p>What measures will be put in place or what system changes will be taken to ensure that the deficient practice will not</p>		

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F 561	<p>Continued From page 2</p> <p>by a skin nor peanut butter will be ordered, purchased, prepared, served, supplied or stored in the center for resident meals, resident snacks, special meal events, family meals and / or employee meal events. Examples of cylinder shaped meats encased by a skin are hot dots and / or Vienna sausages. Examples of peanut butter include peanut butter sandwiches and peanut butter and crackers".</p> <p>An interview on 7/11/18 at 8:30 am with the Dietary Manager (DM) revealed they have not been able to serve hot dogs to the residents since he started at the facility, not quite a year ago. He stated it was his understanding that the corporate office didn ' t allow any of their facilities to serve hot dogs. He added the residents had made numerous requests for hot dogs and he wished he was able to serve them on the menu and for special cook outs. The DM explained he was informed through a conference call that effective 6/1/18 they could no longer purchase or serve peanut butter. He added he believed someone had choked at another facility and now that wouldn ' t let any facilities serve peanut butter. The DM stated the residents had voiced concerns to him about not being able to have peanut butter sandwiches and peanut butter crackers for their night time snacks. He added peanut butter was a good source of protein for their snacks at night, especially for diabetics. The DM explained he served other types of sandwiches but the residents still requested peanut butter and they didn ' t understand why they couldn ' t have it anymore.</p> <p>A phone interview on 7/11/18 at 4:02 pm with the Corporate Dietary Representative revealed their facilities were not allowed to purchase or serve</p>	F 561	<p>recur:</p> <p>On 8/1/2018, the Resident Council President was asked to have weekly Resident Council meetings for one month with the presence of the Administrator. The Resident Council President agreed. The Resident Council will meet weekly for one month and monthly thereafter to determine if resident's food preferences have been honored.</p> <p>Responsible: Brittany Wilson, Activities Director or designee</p> <p>How the facility plans to monitor its performance to make sure that solutions are sustained. The facility must develop a plan for ensuring that correction is achieved and sustained. This plan must be implemented and corrective action must be evaluated for effectiveness. The plan of correction is integrated into the quality assurance system:</p> <p>The Administrator will review Resident Council minutes weekly for one month and monthly thereafter. Any deficiencies will be presented to facility scheduled QA &amp; A Committee meetings.</p> <p>Responsible: Brittany Wilson, Activities Director, and Ellen Rich, Administrator or designee</p> <p>Root Cause: There was a policy change on 6/1/2018 that limited certain food items on the menu such as peanut butter and hot dogs.</p>		

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F 561	Continued From page 3 hot dogs or peanut butter related to choking episodes at some of their other facilities. He stated neither of these food items can be provided by the facility or placed on the menu even at the request of the residents.  An interview on 7/11/18 at 5:38 pm with the Administrator revealed it was her expectation that resident ' s food choices were met within their ordered diet restrictions.	F 561			
F 679 SS=E	Activities Meet Interest/Needs Each Resident CFR(s): 483.24(c)(1)  §483.24(c) Activities. §483.24(c)(1) The facility must provide, based on the comprehensive assessment and care plan and the preferences of each resident, an ongoing program to support residents in their choice of activities, both facility-sponsored group and individual activities and independent activities, designed to meet the interests of and support the physical, mental, and psychosocial well-being of each resident, encouraging both independence and interaction in the community. This REQUIREMENT is not met as evidenced by: Based on record review, observations and staff and resident interviews, the facility failed to provide an activities program that met the activity preferences of 4 of 4 residents reviewed for activities (Resident #50, Resident #65, Resident #41 & Resident #8).  Findings included:  Review of the activities schedule for May, June and July 2018 revealed there was only 1 to 2	F 679	How the corrective action will be accomplished for those affected by the deficient practice:  The facility verified and confirmed that the Activities Dept. had immediately provided designated group or individual activities suited to meet each resident's needs and interest. An in-service by the Administrator was given to Activities' Staff regarding F679: Activities Meet	8/7/18	

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F 679	<p>Continued From page 4</p> <p>activities scheduled in the evening time (after 5:00 PM), which was either bingo or a bible study and 3 to 4 activities scheduled a day, in which activities were mainly scheduled between 10:30 AM and 2:30 PM. Many of the activities such as bingo, bible study and "room sessions" were repeated week to week.</p> <p>Resident council minutes were reviewed for the last 6 months and did not reveal any concerns with activities.</p> <p>1. Resident #50 (resident council president) was admitted to the facility on 1/11/15 with the current diagnosis of heart failure, diabetes and hypertension.</p> <p>Resident #50 annual Minimum Data Set (MDS) dated 2/15/18 revealed resident #50 was cognitively intact. The MDS revealed it was very important to the resident to have books, newspapers, magazines, music, to be around animals, do things with groups of people, go outside and participate in religious activities. The resident required extensive assistance with locomotion.</p> <p>Resident #50 was interviewed on 7/11/18 at 12:16 PM. She stated in the morning, there was an exercise activity but it was just a video that was put on the TV that residents could do if they wanted. She stated that residents do not usually go to that activity. She stated some residents had mentioned they wanted exercises and that was made available for them. She stated that on Wednesdays, they have people that come in and sing. She stated the activities are the same month to month unless there was a holiday. In the evenings, they only have BINGO on Mondays and</p>	F 679	<p>Interest/Needs of Each Resident on 7/31/2018.</p> <p>Responsible: Ellen Rich, NHA and Brittany Wilson, Activities Director</p> <p>How the facility will identify other residents having the potential to be affected by the same deficient practice and what action will be taken:</p> <p>The Activities Dept. identified all residents according to each comprehensive assessments and designated a specific program and schedule of activities that meet each resident's needs or interest. Resident groups have been established and have their designated areas, schedule and type of activities as specified for them.</p> <p>Responsible: Brittany Wilson, Activities Director or designee</p> <p>What measures will be put in place or what system changes will be taken to ensure that the deficient practice will not recur:</p> <p>The facility has posted their monthly activities calendar that indicate the groups of residents and type of ongoing program of activities designated for each groups of residents. Activity plan of care will be specific for each resident. On 8/1/2018, the Resident Council President was asked to have weekly Resident Council meetings</p>		

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F 679	<p>Continued From page 5</p> <p>bible study on Wednesdays. She stated there has been a lot of complaints in resident council that there are not activities in the evening times. She stated that different nursing assistants (NAs) do the activities in the evenings. She feels like the activities are the same each month and each activity was the same type of activity. The staff (activities director) doesn't want a lot of activities on the weekends because they don't want to come in. She stated they typically have 1 outing a month. She stated she was very involved in the activities and attends all the afternoon ones. She thinks the residents want activities that are a little more challenging.</p> <p>The Activities Director was interviewed on 7/10/18 at 3:18 PM. She stated there were 2 to 3 activities offered a day and 2 to 3 evening activities a week. She stated they also have an activities box where residents can grab activities out of. She tried to have a large variety of activities that were for a large age range. She stated they also have church groups that come out. They had a gardening activity this morning. She stated they also have bingo. She also added that they do an outing once a month. She stated there was a variety of activities such as gardening today. She stated she liked to do movement based activities. She stated they have 2 weekend activities on Saturday and Sunday each week and there was a weekend assistant or nursing assistant that does the weekend activities.</p> <p>An observation of activities was observed on 7/11/18 at 2:51 PM in the dining room. Resident #50 was participating in the trivia activity and the activity director was directing the activity.</p> <p>An interview was conducted with the Activities</p>	F 679	<p>for one month with the presence of the Administrator. The Resident Council President agreed. During the discussion of resident's preferences with the activity calendar the Activities Director will not be present to allow residents to express their opinions freely. Resident Council will meet weekly for one month, then monthly thereafter to determine the resident's preferences with the activity calendar.</p> <p>Responsible: Brittany Wilson, Activities Director or designee</p> <p>How the facility plans to monitor its performance to make sure that solutions are sustained. The facility must develop a plan for ensuring that correction is achieved and sustained. This plan must be implemented and corrective action must be evaluated for effectiveness. The plan of correction is integrated into the quality assurance system:</p> <p>The Activity Director will report on daily activity updates and changes to the Administrator. The administrator will review Resident Council minutes weekly for one month and monthly thereafter. Any deficiencies will be presented to facility scheduled QA &amp; A Committee meetings.</p> <p>Responsible: Brittany Wilson, Activities Director, and Ellen Rich, Administrator or designee</p> <p>Root Cause: The facility failed to provide specific</p>		

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F 679	<p>Continued From page 6</p> <p>Director again on 7/11/18 at 3:50 PM. She reported that staff helped with activities if a lot of residents from their assignment went to the activity. The Activities Director reported she facilitated all the activities. She reported a NA usually helped with evening and weekend activities. She reported a few residents had voiced concerns in a one on one meeting with her regarding more activities in the evenings. She reported when she questioned the residents (in resident council) on activities about what they would like to do, she did not get any response. The Activity Director reported the activities she scheduled usually had 10-12 participants except Bingo, which was well attended. She reported she started an activity bin in the activity area of the dining room for the evenings, which had board games and cards.</p> <p>An observation was made on 7/11/18 at 4:00 PM of the activity area, which was located in the corner of the dining room. The activity area had a computer, piano, books, videos, magazines and the activity bin with a sign out sheet that indicated that nothing had been signed out.</p> <p>The Administrator was interviewed on 7/11/18 at 4:54 PM. She stated that residents had expressed that they wanted a Wii (a video type game) in the June 2018 resident council meeting. She stated that the facility had a Wii and they were going to add it. They were listening to suggestions from residents. She also added that the residents really do enjoy planting plants. She stated that they heard about the Wii, and the issue was addressed. She would expect that the activities were resident centered, tailored to the needs, and cognitive abilities of the residents.</p>	F 679	activities per resident requests.		

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F 679	<p>Continued From page 7</p> <p>2. Resident #65 was admitted to the facility on 6/22/18 with the current diagnosis of atrial fibrillation, urinary tract infection and muscle weakness.</p> <p>Resident #65 admission Minimum Data Set (MDS) dated 6/29/18 revealed the resident was cognitively intact and the resident could participate in assessment and goal setting. It was very important for the resident to do things with groups of people, go outside, listen to music, be around animals, and do her favorite activities.</p> <p>Resident #65 had a care plan (updated 7/5/18) in place for activities that stated the resident preferred to chose her activity, both group and independent activities.</p> <p>Resident #65 was interviewed on 07/09/18 at 11:29 AM. She stated she thought they needed to do more activities at the facility as there were rarely activities on the weekends. She stated that they do have activities at night but thinks they need more activities to get residents active.</p> <p>The Activities Director was interviewed on 7/10/18 at 3:18 PM. She stated that Resident #65 spent a lot of time outside. Resident #65 had been to a few activities since she was here and had a lot of visitors. She stated the resident was offered puzzle books and had declined. She stated there were 2 to 3 activities offered a day and 2 to 3 evening activities a week. She stated they also have an activities box where residents can grab activities out of. She tried to have a large variety of activities that were for a large age range. She stated that they also have church groups come out. They had a gardening activity this morning. She stated that they also have bingo. She also</p>	F 679			



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F 679	<p>Continued From page 8</p> <p>added that they do an outing once a month. She stated there was a variety of activities such as gardening today. She stated she liked to do movement based activities. She stated they have 2 weekend activities on Saturday and Sunday each week and there was a weekend assistant or nursing assistant that does the weekend activities.</p> <p>An interview was conducted with the Activities Director again on 7/11/18 at 3:50 PM. She reported that staff helped with activities if a lot of residents from their assignment went to the activity. The Activities Director reported she facilitated all the activities. She reported a NA usually helped with evening and weekend activities. She reported a few residents had voiced concerns in a one on one meeting with her regarding more activities in the evenings. She reported when she questioned the residents (in resident council) on activities they would like to do, she did not get any response. The Activity Director reported the activities she scheduled usually had 10-12 participants except Bingo, which was well attended. She reported she started an activity bin in the activity area of the dining room for the evenings, which had board games and cards.</p> <p>An observation was made on 7/11/18 at 4:00 PM of the activity area, which was located in the corner of the dining room. The activity area had a computer, piano, books, videos, magazines and the activity bin with a sign out sheet that indicated that nothing had been signed out.</p> <p>The Administrator was interviewed on 7/11/18 at 4:54 PM. She stated that residents had expressed that they wanted a Wii (a video type</p>	F 679			

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F 679	<p>Continued From page 9</p> <p>game) in the June 2018 resident council meeting. She stated that the facility had a Wii and they were going to add it. They were listening to suggestions from residents. She also added that the residents really do enjoy planting plants. She stated that they heard about the Wii, and the issue was addressed. She would expect that the activities were resident centered, tailored to the needs, and cognitive abilities of the residents.</p> <p>3. Resident #41 was admitted to the facility on 1/22/16 with diagnoses that included diabetes mellitus, hypertension, and major depressive disorder.</p> <p>A review of Resident #41's annual MDS (Minimum Data Set) assessment dated 4/8/18 revealed Resident #41 was coded as minimally cognitively impaired. Active diagnoses included anxiety and depressive disorder. Resident #41's preferences for customary routine and activities were coded that the resident reported group activities, outdoor activities, and favorite activities were very important to her. The resident was coded as needing supervision with ambulation.</p> <p>A review of Resident #41's care plan dated 6/1/18 revealed the resident was care planned for activities and preferred bingo, socials, and church.</p> <p>An interview was conducted with Resident #41 on 7/9/18 at 3:41 PM. The resident reported "it is boring here." She reported she participated in the activities offered but "there aren't many activities here." Resident #41 reported there were very few evening activities offered. When Resident #41 was questioned if she had used the activity bin, she reported she had not. Resident #41 reported</p>	F 679			

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F 679	<p>Continued From page 10</p> <p>it would be nice to have some organized board games.</p> <p>An interview was conducted with the Activities Director again on 7/11/18 at 3:50 PM. She reported that staff helped with activities if a lot of residents from their assignment went to the activity. The Activities Director reported she facilitated all the activities. She reported a NA usually helped with evening and weekend activities. She reported a few residents had voiced concerns in a one on one meeting with her regarding more activities in the evenings. She reported when she questioned the residents (in resident council) on activities they would like to do, she did not get any response. The Activity Director reported the activities she scheduled usually had 10-12 participants except Bingo, which was well attended. She reported she started an activity bin in the activity area of the dining room for the evenings, which had board games and cards.</p> <p>An observation was made on 7/11/18 at 4:00 PM of the activity area, which was located in the corner of the dining room. The activity area had a computer, piano, books, videos, magazines and the activity bin with a sign out sheet that indicated that nothing had been signed out.</p> <p>The Administrator was interviewed on 7/11/18 at 4:54 PM. She stated that residents had expressed that they wanted a Wii (a video type game) in the June 2018 resident council meeting. She stated that the facility had a Wii and they were going to add that in there. They were listening to suggestions from residents. She also added that the residents really do enjoy planting plants. She stated that they heard about the Wii,</p>	F 679			

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

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OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>345003</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____  B. WING _____		(X3) DATE SURVEY COMPLETED  <b>07/11/2018</b>
NAME OF PROVIDER OR SUPPLIER  <b>SILAS CREEK REHABILITATION CENTER</b>			STREET ADDRESS, CITY, STATE, ZIP CODE <b>3350 SILAS CREEK PARKWAY WINSTON-SALEM, NC 27103</b>		
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F 679	<p>Continued From page 11 and the issue was addressed. She would expect that the activities were resident centered, tailored to the needs, and cognitive abilities of the residents.</p> <p>4. Resident # 8 was admitted to the facility on 12/22/17 with diagnoses that included chronic respiratory failure, diabetes mellitus, and renal disease.</p> <p>A review of Resident #8's quarterly MDS dated 4/9/18 revealed that the resident had no cognitive impairments. Resident #8's preferences for customary routine and activities were coded that the resident reported he was interested in small and large groups, sports, trips, music, reading and watching television and movies. The resident was coded as needing a wheelchair for mobility.</p> <p>A review of Resident #8's care plan revealed the resident preferred both group and independent activities.</p> <p>An interview was conducted with Resident #8 on 7/11/18 at 4:48 PM. The resident reported that there were not enough activities. He reported the facility needed to have a Wii game or board games. Resident #8 stated he had "nothing to do today but smoke and therapy." He reported "milk and cake are not an activity to me." He reported he was not made aware of an activity box in the activity area.</p> <p>An interview was conducted with the Activities Director again on 7/11/18 at 3:50 PM. She reported that staff helped with activities if a lot of residents from their assignment went to the activity. The Activities Director reported she</p>	F 679			

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F 679	<p>Continued From page 12</p> <p>facilitated all the activities. She reported a NA usually helped with evening and weekend activities. She reported a few residents had voiced concerns in a one on one meeting with her regarding more activities in the evenings. She reported when she questioned the residents (in resident council) on activities they would like to do, she did not get any response. The Activity Director reported the activities she scheduled usually had 10-12 participants except Bingo, which was well attended. She reported she started an activity bin in the activity area of the dining room for the evenings, which had board games and cards.</p> <p>An observation was made on 7/11/18 at 4:00 PM of the activity area, which was located in the corner of the dining room. The activity area had a computer, piano, books, videos, magazines and the activity bin with a sign out sheet that indicated that nothing had been signed out.</p> <p>The Administrator was interviewed on 7/11/18 at 4:54 PM. She stated that residents had expressed that they wanted a Wii (a video type game) in the June 2018 resident council meeting. She stated that the facility had a Wii and they were going to add it. They were listening to suggestions from residents. She also added that the residents really do enjoy planting plants. She stated that they heard about the Wii, and the issue was addressed. She would expect that the activities were resident centered, tailored to the needs, and cognitive abilities of the residents.</p>	F 679			