

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 345265	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 11/10/2022
NAME OF PROVIDER OR SUPPLIER BRIAN CENTER HEALTH & REHAB/YANCEYVILLE			STREET ADDRESS, CITY, STATE, ZIP CODE 1086 MAIN STREET NORTH YANCEYVILLE, NC 27379	
(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
E 000	Initial Comments	E 000		
F 000	An unannounced recertification and complaint investigation survey was conducted on 10/7/22 through 10/10/22. The facility was found in compliance with the requirement CFR 483.73, Emergency Preparedness. Event ID # QZU811 INITIAL COMMENTS	F 000		
F 584 SS=D	A recertification and complaint investigation survey was conducted from 10/7/22 through 10/10/22. Event ID# QZU811. The following intakes were investigated: NC00194582, NC00191438, NC00191716, NC00197257 and NC00194268 10 of the 11 complaint allegations were unsubstantiated. 1 of the 11 complaint allegations were substantiated resulting in deficiencies. Safe/Clean/Comfortable/Homelike Environment CFR(s): 483.10(i)(1)-(7) §483.10(i) Safe Environment. The resident has a right to a safe, clean, comfortable and homelike environment, including but not limited to receiving treatment and supports for daily living safely. The facility must provide- §483.10(i)(1) A safe, clean, comfortable, and homelike environment, allowing the resident to use his or her personal belongings to the extent possible. (i) This includes ensuring that the resident can receive care and services safely and that the physical layout of the facility maximizes resident independence and does not pose a safety risk. (ii) The facility shall exercise reasonable care for	F 584		12/1/22

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

TITLE

(X6) DATE

Electronically Signed

11/29/2022

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 584	<p>Continued From page 1</p> <p>the protection of the resident's property from loss or theft.</p> <p>§483.10(i)(2) Housekeeping and maintenance services necessary to maintain a sanitary, orderly, and comfortable interior;</p> <p>§483.10(i)(3) Clean bed and bath linens that are in good condition;</p> <p>§483.10(i)(4) Private closet space in each resident room, as specified in §483.90 (e)(2)(iv);</p> <p>§483.10(i)(5) Adequate and comfortable lighting levels in all areas;</p> <p>§483.10(i)(6) Comfortable and safe temperature levels. Facilities initially certified after October 1, 1990 must maintain a temperature range of 71 to 81°F; and</p> <p>§483.10(i)(7) For the maintenance of comfortable sound levels.</p> <p>This REQUIREMENT is not met as evidenced by:</p> <p>Based on observations and staff interviews the facility failed to clean resident rooms and repair broken floor tiles in resident rooms. The facility also failed to replace a torn, stained mattress and pillow for 1 of 1 resident reviewed for a clean and homelike room (Resident # 76).</p> <p>Findings included:</p> <p>On 11/07/22 at 3:22 PM an observation of room 414 revealed broken and stained floor tiles, dried clumps of feces on bathroom wall and brown stains on bathroom floor. Black and brown matter around base of toilet. A wet napkin and trash was</p>	F 584	<p>What corrective action will be accomplished for those residents found to have been affected by the deficient practice?</p> <p>The facility failed to clean resident room and repair broken floor tiles. Resident #76 room was immediately deep cleaned per professional standards and a repair slip completed for timely repair of broken floor tiles. The floor tiles were replaced on 11/28/22 in Resident #76 room.</p> <p>The facility also failed to replace a torn,</p>		

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F 584	<p>Continued From page 2 observed under the bed.</p> <p>An observation on 11/08/22 revealed room 414 had broken and stained floor tiles, dried clumps of feces on bathroom wall and brown stains on bathroom floor. There was black and brown matter around base of toilet. A wet napkin and trash was observed under the bed.</p> <p>On 11/09/22 at 11:20 AM an observation of room 414 revealed the bed was unmade and two flies were buzzing around on wet stains on the mattress. There were tears on the bottom of the stained mattress. There was no pillowcase on the pillow which had a tear across the whole pillow. There was a wet napkin and trash on floor under the bed. The bedroom floor was stained and had broken tiles on floor. There was a hole in wall behind door. Dried brown matter still on wall and floor in bathroom. The base of toilet stained with brown and black matter. The toilet had feces dried on toilet bowl and rim.</p> <p>On 11/09/22 at 11:35 AM an observation of room 414 and an interview was conducted with the Maintenance Director. He revealed the facility was in the process of renovating the facility. He further revealed the 400 hall was the next area to be renovated. He stated housekeeping oversees mattresses and pillows. He further stated anyone could electronically put in work orders and maintenance would order replacements for damaged items if needed. He stated housekeeping is responsible for cleaning mattresses and changing out damaged pillows. He said Resident #76 needed his mattress replaced because it was stained and torn. He explained the floors and bathroom fixtures needed to be replaced due to age related</p>	F 584	<p>stained mattress and pillow for 1 resident, Resident #76. The mattress was immediately removed and replaced with a brand new mattress, pillow immediately replaced with new pillow and linens placed on bed.</p> <p>How will you identify other residents having the potential to be affected by the same deficient practice and what corrective action will be taken:</p> <p>All residents have the potential to be affected by this deficient practice. A 100% audit of all resident rooms was completed on 11/28/22 and any issues noted were fixed and corrected immediately.</p> <p>The full house audit of all resident rooms was performed by the Regional Director of Housekeeping and the Infection Preventionist to ensure all Yanceyville Health and Rehabilitation housekeeping staff are appropriately providing competent and efficient housekeeping services to the entire facility to promote a clean, homelike environment. 100% audit of all mattresses and pillows in use to ensure no rips, tears or stains - if noted mattress/pillow was immediately replaced. Any broken floor tiles identified during these audits were also replaced.</p> <p>Inservice education was provided by the Regional Director of Housekeeping Services and Infection Preventionist beginning 11/28/22. Education will be completed by 12/1/22 on proper policies and procedures related to providing a</p>		

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F 584	<p>Continued From page 3 deterioration.</p> <p>In an interview on 11/09/22 at 11:50 AM, with a housekeeping staff pulled to the 400 hall, she stated the torn and stained mattress was not acceptable and should have been reported and replaced.</p> <p>On 11/09/22 at 11:53 AM an interview was conducted with a housekeeping staff assigned to room 414. She stated she only wiped beds down when they were deep cleaned. She said she had not reported that the mattress and pillow needed to be replaced. She did not have an answer as to why she had not reported the need to replace the damaged items. She explained she had swept and mopped room 414 the day before but she did not see the wet napkin and trash under the bed. She said she swept the bathroom but did not mop the floor or wipe down the wall to remove the feces on the wall.</p> <p>An interview was conducted with the Housekeeping District Manager on 11/09/22 at 12:00 PM. He stated the torn mattress had not been reported to him but needed to be replaced. He further stated the staff should have cleaned the floor and wall in the bathroom. He sprayed the wall with a cleaner and requested that the housekeeping staff sweep, mop, and clean the walls in the bathroom. He said he would replace the mattress and pillow immediately.</p> <p>An observation of room 414 on 11/09/22 at 12:00 PM revealed Resident #76 resting in bed. The bed had a new mattress, new pillow and clean linens. The bedroom floor and under the bed had been cleaned. The dried brown matter had been cleaned from the bathroom floor and wall. The</p>	F 584	<p>clean, safe environment. This education was provided to all facility staff to include: all contract/agency staff, all facility departments including nursing, dietary, maintenance, activities, social services, MDS, Therapy, Medical Records and Office Staff. All residents have a right to a safe, clean, comfortable, homelike environment, including but not limited to receiving treatment and supports for daily living, safely per the regulation.</p> <p>What measures will be put into place to ensure the deficient practice does not reoccur:</p> <p>Mandatory all staff education on policies and procedures related to proper and efficient housekeeping services that are expected to be provided to all facility residents in a timely and thorough manner. Immediate education/intervention was provided to the assigned housekeeper to Room 404, Resident #76 on 11/9/22. Full house education was initiated on 11/28/22 and will be completed on 12/1/22. All new hires and contract agency staff will have this mandatory education prior to working on the units. Daily ongoing observation and education will be provided also to maintain compliance by the Director of Housekeeping.</p> <p>How the corrective actions will be monitored to ensure the deficient practice will not reoccur, and what quality assurance program will be put into place:</p>		

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

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F 584	Continued From page 4 toilet bowl and around the toilet had been cleaned. An interview on 11/10/22 at 3:38 PM with the Administrator revealed the housekeeping department is staffed with a contracted company. She further revealed her expectation is that the resident rooms and bathrooms should be cleaned daily. She expected housekeeping staff to always maintain a clean environment and that mattresses and pillows should be replaced when torn or in need of repair.	F 584	To ensure ongoing compliance, the Director of Housekeeping, Director of Nursing and Infection Preventionist or designee will conduct random audits 5 times per week for 6 weeks, then 3 times per week for 6 weeks to ensure proper housekeeping services are being provided at Yanceyville Health and Rehab. Audits will include ensuring mattresses and pillows are not soiled, torn or ripped. If there are any areas of concern they will be fixed immediately. Audits will also note any broken floor tiles, which will also be immediately replaced if found. All new hires/contract agency staff will be educated on this policy and procedure during the orientation process prior to starting work. The results of our auditing process will be reported to monthly QAPI until such time that substantial compliance has been achieved and for a minimum of 3 months.	