

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

PRINTED: 07/17/2024
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 345014	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED C 06/18/2024
NAME OF PROVIDER OR SUPPLIER LINDEN PLACE CENTER FOR NURSING AND REHABILITATION			STREET ADDRESS, CITY, STATE, ZIP CODE 1201 CAROLINA STREET GREENSBORO, NC 27401		
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F 000	INITIAL COMMENTS	F 000			
F 584 SS=B	<p>A complaint investigation survey was conducted from 06/10/24 through 06/18/24. Event ID# 2D8L11. The following intakes were investigated NC00217935, NC00212881, NC00210425, NC00215779, NC00213758, NC00213342, NC002082812, NC00213307, NC00214815, NC00217821, NC00217622, NC00217816, NC00218334 NC00208838, NC00218258, and NC00218297. 5 of the 41 complaint allegations resulted in a deficiency.</p> <p>Safe/Clean/Comfortable/Homelike Environment CFR(s): 483.10(i)(1)-(7)</p> <p>§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.</p> <p>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 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</p>	F 584		7/3/24	

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

TITLE

(X6) DATE

Electronically Signed

07/03/2024

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 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 maintain clean and sanitary floors, ensure baseboards were in good repair and ensure the toilet was clean and in good repair in 2 of 3 rooms (rooms 138 and 142), ensure the light fixture was clean and a sink was in good repair in 1 of 3 rooms (room 142), and maintain cleanliness and sanitation in 1 of 2 linen closets and 1 of 1 dining room observed for maintenance of a sanitary and orderly interior.</p> <p>The findings included:</p> <p>Review of the Performance Improvement Project (PIP) worksheet dated 5/6/24 revealed the facility had decluttered resident's rooms and transitioned from contracted housekeeping services to in house. The facility documented results of their interventions as clean building, decreased pests, consistent housekeeping, deep cleaning and decluttering. To sustain improvement, the facility wrote consistent housekeeping and focus on</p>	F 584	<p>Toilets in rooms 138 and 142 have been addressed and are clean, in good repair. Room 142 light fixture has been cleaned and sink is in good repair. Baseboards have been put in place in rooms 138 and 142. The linen closets and dining room were cleaned. Floors in the facility have been cleaned.</p> <p>Residents residing in the facility have the potential to be affected by the deficient practice. A house audit was completed for cleanliness and areas in need of repair. Any areas identified in the initial audit were addressed.</p> <p>Education was provided by the Administrator and Regional Director of Operations to the facility staff regarding maintaining a safe, clean, homelike environment on June 11, 2024. The education included how to report areas</p>		

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F 584	<p>Continued From page 2</p> <p>being clutter-free, and constant contact with local pest exterminator for any pest seen. The PIP worksheet indicated it was ongoing and did not have a completion date.</p> <p>a. An observation of room 142 on 6/10/24 at 12:45 pm revealed a sink that was pulling away from the wall, the light fixture was full of dead bugs, the baseboards outside the bathroom were peeling away from the wall, the bathroom floor had debris and dust at the corners under the commode, a crack with an opening was noted in a corner wall of the bathroom and a dried brown material was on the commode lid. An additional observation was conducted on 6/11/24 at 11:50 am with the Administrator revealing the same findings. The Administrator stated he would have someone take care of those right away.</p> <p>During an interview with the resident in room 142 on 6/10/24 at 12:45 pm, the resident revealed the housekeepers came to clean everyday but did not do a thorough job. She stated there was a housekeeper that came by but the dried bowel movement on the commode lid was still there. She stated she could barely balance herself to wipe the lid or pick up something from the floor. She pointed at her light fixture and stated it was full of bugs since she got admitted and nobody came to clean it.</p> <p>b. An observation of room 138 on 6/11/24 at 9:30 am revealed dust or sandy material on the floor outside the bathroom. The baseboard was peeling away from the wall outside the bathroom. Debris was noted in the broken vinyl tile in the bathroom and dust noted on the corners of the bathroom.</p>	F 584	<p>that are found with less than desirable cleanliness, needing repair and/or housekeeping/maintenance attention. Housekeeping staff were instructed on cleaning all surfaces, light fixtures, toilets including the base, behind doorways, and common areas. Facility staff were educated on the system to make maintenance aware of the areas needing repair. Maintenance was educated on using the system alerts to know where areas of repair were identified.</p> <p>The Administrator and/or designee will complete an audit of 10 resident rooms five days a week for four weeks, then three days a week for four weeks, then two days a week for four weeks to ensure a safe, clean, homelike environment is maintained. The Administrator will gather concerns identified during these rounds and assign concerns to the appropriate person.</p> <p>The Administrator will also review the data for patterns and trends and will take this information to the Quality Assurance Performance Improvement Committee monthly x 3 months. The Quality Assurance Performance Improvement Committee will evaluate the effectiveness of the above plan and will add interventions or continued monitoring as needed.</p> <p>Date of Compliance: July 3, 2024</p>		

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F 584	<p>Continued From page 3</p> <p>During an observation and interview on 6/11/24 at 12:10 pm, the room looked the same with dust or sandy material on the floor beside the bathroom and debris in the broken vinyl tile and dust on the corners of the bathroom. The resident occupying the room stated the housekeepers came and cleaned every day. They swept and mopped around her belongings on the floor. She stated it was hard for her to pick up because of her back hurting. She stated she could not recall if they did a deep clean in her room.</p> <p>c. An observation of the south hall linen closet on 6/10/24 at 4:00 pm revealed dust and dirt accumulated on two corners of the floor. A follow up observation with the Administrator of the linen closet on 6/11/24 at 11:50 am revealed the same dust and dirt on both corners of the floor.</p> <p>d. An observation of the dining room on 6/11/24 at 10:30 am with the Regional Nurse Consultant revealed the back of the dining room doors were covered with dust and debris. The upper part of the doors had cobwebs on them. The Nurse Consultant stated she was going to inform the Administrator and left. Further inspection revealed the back of the vending machines inside the dining room had dust and debris. The upper portion had some cobwebs. A roach bait station was observed behind the vending machine and was full of dust and debris.</p> <p>During an interview on 6/11/24 at 9:35 am, Environment Specialist #1 stated cleaning each resident room consisted of collecting trash, wiping surfaces with a wet rag, sweeping and mopping the floors in the rooms. She cleaned the bathrooms next by wiping in there, sweeping and mopping the floor. She was assigned to rooms</p>	F 584			

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F 584	<p>Continued From page 4</p> <p>138 and 142 and had not cleaned them at that time.</p> <p>During an interview on 6/11/24 at 9:55 am, Floor Technician #1 stated they swept and mopped the hallways and the dining room every day. He stated they buffed the floor in the dining room weekly. He stated he swept and mopped the dining room after lunch on 6/10/24. He has not cleaned the dining room during the interview.</p> <p>During an interview on 6/11/24 at 11:45 am, the Administrator stated they had an ongoing PIP on environmental services which included pest control. The goal was to provide home like, clean, pest free environment. This started in March 2024. They decluttered and threw away some of the residents' old belongings. He stated the pests were coming from the residents' clutter. The maintenance staff were filling out cracks in the walls. The staff were supposed to submit work orders online if they see bugs or things needing repairs. The Administrator stated the department heads did daily rounds and submitted work orders if they saw stuff. The housekeepers were supposed to be deep cleaning the dining rooms and residents' rooms weekly. The Administrator was shown room #142's condition and the light fixture full of dead flies. He stated the Regional Nurse Consultant told him about the dining room. He stated he would have someone take care of those. The Administrator provided a copy of the PIP worksheet dated 5/6/24 to the surveyor.</p> <p>During a discussion on 6/11/24 at around 1:40 pm, the Regional Director of Operations was informed of the findings in the resident's rooms, the linen closet and the dining room. She presented the PIP on environmental services and</p>	F 584			

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F 584	Continued From page 5 stated it was ongoing. She stated she was not aware of the observations with the Administrator of room #142 and its bathroom, and the linen closet in the south hall.	F 584			
F 925 SS=B	Maintains Effective Pest Control Program CFR(s): 483.90(i)(4) §483.90(i)(4) Maintain an effective pest control program so that the facility is free of pests and rodents. This REQUIREMENT is not met as evidenced by: Based on observations, record review, resident and staff interviews, the facility failed to maintain an effective pest control program as evidenced by pests observed in 1 of 3 hallways (the hallway leading into the dining room) and in 2 of 3 residents' rooms (Rooms 138 and 142) reviewed for pest activity. The findings included: Review of the facility's Performance Improvement Project (PIP) dated 3/3/24 in Environmental Services revealed a problem with pest control. Interventions included decluttering residents' rooms, scheduling deep cleaning of rooms, weekly exterminator rounds, care planning for residents who hoarded and daily rounding by the administrator, social worker, maintenance and environmental services. This PIP did not have a date of completion. Review of the facility's invoices from a local pest control company as follows: 4/5/24 read in part: Treated kitchen area corner tile broke with roaches, treated side exit door	F 925	F925 Residents #138 and #142 rooms were inspected, cleaned, and treated for pests. The facility was inspected by the administrator and designees for pest sightings on 6/11/2024. No pest was seen at the time. Pest control services will continue to treat weekly and as needed. The Administrator educated staff to place work order in timely if pest were sighted. The department heads received education from the Administrator during the rounds they are to question the alert and oriented residents if they have seen pests. The department heads will do observations during their rounds. Staff were educated to report any sightings of pest immediately to the administrator. The administrator will call the pest control company and have maintenance to treat the room as well. New hires will be educated on how to place work order in if pest were sighted timely in orientation.	7/3/24	

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F 925	<p>Continued From page 6</p> <p>therapy and hallway restroom for German Roaches.</p> <p>4/12/24 read in part: Kitchen at Wi-Fi area German roach activity found alive and dead. Crack and crevice treatment, void treatment. Restrooms in patient rooms: 138, 146: crack and crevice treatment. No cockroaches were found. Preventive crack and crevice treatment south nurses' station, office, and south hallways, exit doors.</p> <p>4/19/24 read in part: Preventive spot treatment of hallway bathrooms, deep sink area, dishwashing area, kitchen office, kitchen area, and maintenance shop. Interior placement of bait in boiler room for American cockroaches. Please have dead roaches removed/floor cleaned under flour storage bins/table in kitchen (killed two roaches under flour bin).</p> <p>4/26/24 read in part: Unoccupied residents' rooms 137 and 157 crack and crevice treatment for ants. No ants or roaches found. Beauty salon, physical therapy, administrative office preventive spot treatment for roaches and ants. Kitchen preventive spot treatment.</p> <p>5/3/24 read in part: Completed inspection and proactive spot treatment for roach activity found in kitchen, kitchen office, little locker room, behind dishwasher around pipe opening collars, and deep sink area. Completed proactive spot treatment of offices and the scheduling office. Ants reported in scheduling room.</p> <p>Review of the facility's PIP worksheet dated 5/6/24 revealed the results of their interventions were: cleanliness of the building, decrease in</p>	F 925	<p>The administrator and/or designee will audit 10 rooms per hall (30) for four weeks, then 5 rooms per hall (15) for four weeks, then 3 rooms per hall (12) for four weeks to ensure no pests are sighted. Results of these audits will be reviewed at Quarterly Quality</p> <p>Assurance Meeting for three months for further problem resolution if needed. The administrator will review the results of weekly audits to ensure any issues identified are corrected. Date of compliance: July 3, 2024</p>		

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F 925	<p>Continued From page 7</p> <p>pests, consistent pest control/housekeeping, deep cleaning and de-cluttering. To sustain improvement, the facility wrote consistent housekeeping and focus on being clutter-free, and constant contact with local pest exterminator for any pest seen. The PIP worksheet indicated it was ongoing and did not have a completion date.</p> <p>Review of the facility's invoices from a local pest control company after the PIP follow up on 5/6/24 revealed:</p> <p>5/10/24 read in part: Preventive crack and crevice treatment for ants and roaches in unoccupied rooms 104, 107, 144, 146 and southside spa. Reported ants in room 109 - crack and crevice treatment. Caulked some more in kitchen at tile crack. Crack and crevice treatment of windows for ants reported in physical therapy room.</p> <p>5/17/24 read in part: Preventive spot treatment for unoccupied rooms (110, 109, 111, 137, 144 and 146), nurses stations, kitchen office, janitorial closet, behind drink machines, dining area, storage room and behind shredded dryer holder. Found and killed roaches around pipe opening collars under dishwashing machine and behind bending machine. Found one dead smokey brown roach in bathroom of room 144.</p> <p>5/24/24 read in part: Completed spot treatment of dishwashing area. Roach activity was found and treated behind pipe openings and control box. Caulked sealed off pipe openings and crevices of interior back corner, hole in floor. Seal off hole and repair damaged sheetrock at bottom wall or door frame of door leading to dining room. Hole had roach activity. Spot treatment in room 101.</p>	F 925			

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F 925	<p>Continued From page 8</p> <p>6/3/24 read in part: Inspected hallways, lobby areas, vending areas and interior traps. No observed activity at time of visit. No reported activity in patient rooms at time of inspection.</p> <p>a. An observation of room 142 was made on 6/10/24 at 12:45 pm revealed a fly flying around the light fixture. The room was occupied by a resident who stated she had flies flying around her face the other day and she was aggravated. She pointed to her light fixture in the room and stated it was full of dead flies since admission and she has not seen anyone clean the light fixtures. She stated her family member was going to report it. She stated she also saw brown bugs crawling out of the bathroom and thought they came from the cracks in the bathroom. The resident thought she saw the bugs after she came back from her orthopedic appointment on 6/4/24.</p> <p>b. An observation of room 138 was made on 6/11/24 at 9:30 am. The room was occupied at the time of the observation and the resident revealed she saw bugs coming in and out of her bathroom several times the other day (6/9/24). She told a staff but could not recall who it was. The resident has not seen anyone spray in her room. The bathroom was observed with baseboards peeling off the wall and a flattened broken vinyl tile folded over.</p> <p>c. An observation of common areas on 6/11/24 at 10:25 am revealed another fly circling the water sprinkler above the dining room door entrance. There were several residents in the dining room participating in activities.</p> <p>During an interview on 6/10/24 at 4:25 pm, Nurse</p>	F 925			

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F 925	<p>Continued From page 9</p> <p>Aide #1 stated a previous resident complained of seeing roaches in his room. She stated she saw roaches coming out of the linen closet the other week. She stated they submitted work orders when they see bugs.</p> <p>During an interview on 6/10/24 at 3:45 pm, Nurse Aide #2 stated she saw roaches and water bugs coming from the linen closet every now and then. She could not remember when she saw them last, but it was one day last week. She stated they report it to the nurses if they see them.</p> <p>During an interview on 6/10/24 at 4:05 pm, Nurse Aide #3 stated she saw roaches in the halls and in the residents' bathrooms when she worked third shift. She stated she saw them at the end part of May 2024. She was not aware of any residents that complained of bugs.</p> <p>During an interview on 6/11/24 at 9:35 am, Environmental Specialist #1 revealed she observed live baby roaches in a resident's room that morning and killed them. She stated she also saw flies in their break room. She stated the floor technicians and maintenance take care of the pest control. She stated somebody had been spraying in the facility.</p> <p>During an interview on 6/11/24 at 9:55 am, Floor Technician #1 stated they mop the hallways. He stated he saw a roach in his mop bucket several weeks ago and killed it. He stated he has not seen any in the washroom lately. He stated someone came and sprayed a week after he reported it.</p> <p>During an interview on 6/11/24 at 3:00 pm, Medication Aide #1 revealed she saw roaches</p>	F 925			

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F 925	<p>Continued From page 10</p> <p>around doors the other day. She could not remember which resident rooms had them. She stated they had been reporting it, but they kept seeing them.</p> <p>During an interview on 6/11/24 at 11:45 am, the Administrator stated they had an ongoing PIP on environmental services which included pest control. This started in March 2024, and it was for any bugs in the facility. He stated the exterminator was on contract monthly but was changed to weekly during the first week of May 2024. He stated the receipts were records of his rounds. The facility also called the exterminator as needed. The exterminator put bait traps all over the facility. He stated the PIP was ongoing and they tried to identify residents that hoarded and decluttered and threw away some of their old belongings. He stated the pests were coming from the residents' clutter. The maintenance staff were filling out cracks in the walls. The staff were supposed to submit work orders online if they see bugs or things needing repairs. The Administrator stated the department heads did daily rounds and submitted work orders if they saw stuff. The housekeepers were supposed to be deep cleaning the dining rooms and residents' rooms weekly. The Administrator was shown room #148's condition and the light fixture full of dead flies. He stated he will have someone take care of those. The Administrator provided a copy of their PIP worksheet to the surveyor.</p> <p>During a discussion on 6/11/24 at around 1:40 pm, the Regional Director of Operations presented the PIP on pest control and stated it was ongoing. She stated she was not aware of the flies in the resident's room, the light fixture full of dead flies and the fly above the dining room</p>	F 925			

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

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FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 345014	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED C 06/18/2024
NAME OF PROVIDER OR SUPPLIER LINDEN PLACE CENTER FOR NURSING AND REHABILITATION		STREET ADDRESS, CITY, STATE, ZIP CODE 1201 CAROLINA STREET GREENSBORO, NC 27401		
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F 925	Continued From page 11 door.	F 925		