

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTIONS		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 345573	(X2) MULTIPLE CONSTRUCTION A. BUILDING B. WING	(X3) DATE SURVEY COMPLETED 03/17/2026
NAME OF PROVIDER OR SUPPLIER Arbor Acres United Methodist Retirement Community			STREET ADDRESS, CITY, STATE, ZIP CODE 1250 Arbor Road , Winston Salem, North Carolina, 27104	
(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
E0000	Initial Comments An unannounced recertification survey was conducted from 03/15/26 through 03/17/26. The facility was found in compliance with the requirement CFR 483.73, Emergency Preparedness. Event ID #1F3766-H1.	E0000		03/30/2026
F0000	INITIAL COMMENTS An unannounced recertification survey was conducted from 3/15/26 through 3/17/26. Event ID #1F3766-H1.	F0000		03/30/2026
F0851 SS = F	Payroll Based Journal CFR(s): 483.70(p)(1)-(5) §483.70(p) Mandatory submission of staffing information based on payroll data in a uniform format. Long-term care facilities must electronically submit to CMS complete and accurate direct care staffing information, including information for agency and contract staff, based on payroll and other verifiable and auditable data in a uniform format according to specifications established by CMS. §483.70(p)(1) Direct Care Staff. Direct Care Staff are those individuals who, through interpersonal contact with residents or resident care management, provide care and services to allow residents to attain or maintain the highest practicable physical, mental, and psychosocial well-being. Direct care staff does not include individuals whose primary duty is maintaining the physical environment of the long term care facility (for example, housekeeping). §483.70(p)(2) Submission requirements. The facility must electronically submit to CMS complete and accurate direct care staffing information, including the following: (i) The category of work for each person on direct care staff (including, but not limited to, whether the	F0851	PLAN OF CORRECTION – F851: Payroll Based Journal (PBJ) Reporting Facility: Arbor Acres Tag: F851 – Payroll Based Journal Reporting Compliance Date: April 1, 2026 1. Identification of the Problem Arbor Acres acknowledges the survey findings indicating that PBJ data submitted to CMS did not accurately reflect Registered Nurse (RN) coverage. Specifically, certain required data fields were not properly transmitted within the PBJ file, resulting in the appearance of missing RN hours. Upon onsite review, the facility provided employee schedules, staffing logs, and timesheets confirming that RN coverage was maintained for a minimum of eight (8) consecutive hours each day, in accordance with federal regulatory requirements. A record review conducted on March 17, 2026, verified that RN coverage was continuous and complete from October 1, 2025 through March 17, 2026, with no gaps in required coverage. The identified issue was limited to the PBJ submission process and did not reflect actual staffing practices. 2. Corrective Action for Residents Affected	04/01/2026

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 reverse for further 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.

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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F0851 SS = F	<p>Continued from page 1 individual is a registered nurse, licensed practical nurse, licensed vocational nurse, certified nursing assistant, therapist, or other type of medical personnel as specified by CMS);</p> <p>(ii) Resident census data; and</p> <p>(iii) Information on direct care staff turnover and tenure, and on the hours of care provided by each category of staff per resident per day (including, but not limited to, start date, end date (as applicable), and hours worked for each individual).</p> <p>§483.70(p)(3) Distinguishing employee from agency and contract staff. When reporting information about direct care staff, the facility must specify whether the individual is an employee of the facility, or is engaged by the facility under contract or through an agency.</p> <p>§483.70(p)(4) Data format. The facility must submit direct care staffing information in the uniform format specified by CMS.</p> <p>§483.70(p)(5) Submission schedule. The facility must submit direct care staffing information on the schedule specified by CMS, but no less frequently than quarterly.</p> <p>This REQUIREMENT is NOT MET as evidenced by: Based on record review and staff interviews, the facility failed to submit accurate payroll data on the Payroll Based Journal (PBJ) report to the Centers for Medicare and Medicaid Services (CMS) related to Registered Nurse (RN) hours and licensed nursing coverage 24-hours per day. This was reviewed for 1 of 3 Federal Fiscal quarters for sufficient nurse staffing (Quarter 1 which ranged from October 1, 2025 through December 31, 2025).</p> <p>Findings included: Review of the PBJ for Federal Fiscal Year Quarter 1 2025 (October 1st through December 31st) revealed system triggers for no Registered Nurse (RN) hours from October 16th 2025 through December 31st 2025, as well as no licensed nursing coverage on October 5, 2025, October 11, 2025 and October 16, 2025 through December</p>	F0851	<p>Continued from page 1 There was no adverse impact to residents related to this PBJ reporting discrepancy. RN staffing coverage was consistently maintained in accordance with regulatory requirements.</p> <p>Corrective actions include:</p> <p>Reconstruction of PBJ files for the affected reporting period</p> <p>Verification of all RN hours using payroll records, staffing schedules, and daily staffing logs</p> <p>3. Systemic Changes to Prevent Recurrence</p> <p>Arbor Acres has implemented the following systemic improvements:</p> <p>1. Contracted Support with Forvis Mazars</p> <p>Arbor Acres has engaged Forvis Mazars to review and assist with PBJ submissions for the current and upcoming CMS reporting quarters</p> <p>Services include validation of coding, data mapping, and CMS XML compliance</p> <p>Facility leadership retains responsibility for the accuracy and completeness of PBJ submissions; Forvis Mazars provides technical review and guidance</p> <p>2. PBJ Training</p> <p>The facility Administrator will provide formal PBJ training to the facility Controller</p> <p>Training topics include:</p> <p>PBJ coding requirements</p> <p>File validation and quality assurance</p> <p>Prevention of data omissions</p> <p>CMS XML submission procedures</p> <p>Training Date: March 31, 2026</p>	

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F0851 SS = F	<p>Continued from page 2 31, 2025.</p> <p>Detailed review with the Assistant Director of Nursing (ADON) of the Posted Daily Nursing Staffing Forms, Daily Staffing Sheets, and the nursing staff time detail reports for October 5th through October 31st, for each day of November 2025 and for each day of December 2025 revealed there was an RN on site for at least 8 hours every 24 hours and there was licensed nursing coverage at the facility 24 hours a day for all aforementioned dates.</p> <p>On 3/17/26 at 11:00 AM, a joint interview with the Administrator and the Assistant Director of Nursing (ADON) was conducted. The Administrator said she became aware of a potential PBJ issue when she learned of a 1 star staffing rating on 2/17/26. The Administrator said the 1 star rating on 2/17/26 was the first they knew they had a problem with the PBJ report submissions for Quarter 1. The ADON said she did the scheduling and staffing and she always ensured there was RN and licensed nurse coverage every day but she did not do the final PBJ submissions to CMS. The Administrator said the final submission of the PBJ staffing data was done by the facility's Controller. The Administrator said they ensured they have RN coverage and nurse coverage every day.</p> <p>An interview with the facility's Controller was conducted on 3/17/26 12:33 PM. The Controller confirmed he had worked at the facility for 8 years and he had been doing the PBJ submissions for that duration. The Controller said he received all nurse staffing information from the online staffing computer system used by the facility, after staffing was entered and completed by the ADON. The Controller said he put all staffing information onto a computer spreadsheet and uploaded the spreadsheet into the staffing computer system, which system then converted the data from the spreadsheet file into a different type of file acceptable to CMS. The Controller added CMS did not accept spreadsheet files for PBJ submissions so this file conversion step had to be done. The Controller said he verified all actual nursing hours from the facility's payroll system to ensure he had all necessary nursing hour coverage for submission. The Controller confirmed, "I don't prorate hours down for only the 6 skilled beds specifically, I credit the RN for the actual hours required only". The Controller said he had to log into the CMS site where he submits payroll data in order to see CMS validation messages. The Controller said any validation message not only confirms the submission but also flags a potential issue. The Controller said he logs into the CMS system</p>	F0851	<p>Continued from page 2</p> <p>3. Re-Training of PBJ Coordinator</p> <p>The PBJ Coordinator has been re-trained on PBJ workflows, including timekeeping integration, coding accuracy, and verification processes</p> <p>4. Dual Review Verification Process</p> <p>All PBJ submissions will undergo a two-step review process:</p> <p>Initial review by the PBJ Coordinator</p> <p>Secondary review by the Director of Nursing (DON) or designee and/or Human Resources representative</p> <p>5. Strengthened Technical Controls</p> <p>IT has reviewed and corrected file export mapping to ensure all required PBJ data fields populate accurately within CMS XML files</p> <p>A standardized PBJ submission checklist has been implemented and is required prior to submission</p> <p>6. Enhanced Cross-Verification Process</p> <p>PBJ data will be cross-checked against:</p> <p>Daily staffing logs</p> <p>RN assignment sheets</p> <p>Payroll/timeclock data</p> <p>Official nursing schedules</p> <p>Any discrepancies will be resolved prior to submission</p> <p>4. Ongoing Monitoring and Quality Assurance</p>	

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F0851 SS = F	<p>Continued from page 3 once every quarter when he submits the payroll data. The Controller said he did not receive CMS alerts directly to his email. The Controller said he had not reached out to CMS specifically about this issue because he did not know about it, and said the Administrator also checked for issues and kept up with it. The Controller said he was at a loss to understand what was happening because he had all the data supporting required nursing coverage and he submitted it as he had it and the first he knew there was a problem with quarter 1 was at this interview.</p> <p>In a follow up interview with the Administrator on 3/17/26 at 2:20 PM, the Administrator said she did not reach out to CMS after 2/17/26 because she only knew they had dropped to a 1 star staffing rating but did not know why, as they had received no specific alert messages indicating a problem. The Administrator said the facility had therefore obtained a consultant to get assistance on ascertaining the reason for the drop and how to correct the issue as soon as possible to ensure their PBJ staffing data was submitted correctly but she did not know that RN and licensed nurse coverage was the issue until this survey.</p>	F0851	<p>Continued from page 3</p> <p>Forvis Mazars will assist with PBJ submission oversight for two reporting cycles</p> <p>The Director of Nursing (DON) or designee will conduct monthly PBJ audits to ensure ongoing accuracy and compliance</p> <p>Findings will be reviewed during Quarterly QAPI meetings</p> <p>Monitoring will continue for a minimum of six (6) months and until sustained compliance is demonstrated</p> <p>5. Completion Date</p> <p>Arbor Acres will be in full compliance with F851 by:</p> <p>April 1, 2026</p>	