

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

PRINTED: 08/10/2011
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 345494	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 07/27/2011
NAME OF PROVIDER OR SUPPLIER PEAK RESOURCES - GASTONIA			STREET ADDRESS, CITY, STATE, ZIP CODE 2780 X-RAY DR GASTONIA, NC 28054	
(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)	(X6) COMPLETION DATE
F 242 SS=D	<p>483.15(b) SELF-DETERMINATION - RIGHT TO MAKE CHOICES</p> <p>The resident has the right to choose activities, schedules, and health care consistent with his or her interests, assessments, and plans of care; interact with members of the community both inside and outside the facility; and make choices about aspects of his or her life in the facility that are significant to the resident.</p> <p>This REQUIREMENT is not met as evidenced by: Based on resident and staff interviews and record review, the facility failed to honor two (2) of three (3) sampled resident's preference not to be out of bed more than 45 minutes before breakfast (Resident #2 & #5).</p> <p>Findings include:</p> <p>1. Resident #5 was admitted to the facility on 8/3/2007 with a diagnosis of Rheumatoid Arthritis and Osteoporosis. The most recent Minimum Data Set (MDS) assessment of 6/27/2011 revealed the resident was cognitively intact with no problems with long or short term memory.</p> <p>Review of a Document provided by the Director of Nurses (DON) dated 7/01/2011 and titled: "These residents need to be dressed and/or up by 7am" (Early Schedule List) revealed Resident #5 identified as on that list.</p> <p>On 7/27/2011 at 9:00 AM Resident #5 was interviewed about her preferences to be on the "Early Schedule List" she stated: "they get me up awful early", when asked if she wanted to get</p>	F 242	<p>Filing the plan of Correction does not constitute admission that the deficiencies alleged did in fact exist. The plan of correction is filed as evidence of the facilities desire to comply with the requirements and to continue to provide high quality of care.</p> <p>Resident # 5 was interviewed by the DON and a new schedule was implemented for Resident to allow for her preference to stay in bed until after breakfast. After two days resident voiced that she would like to change this and get up between 6:30am and 7:00 am and her schedule was again changed per her preference. Resident was advised that she has the right to change her preference schedules at any time or alter them from day to day based on the way she feels that all she had to do was to communicate this to staff.</p>	7/28/11

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AUG 17 2011

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

Judith Ray

TITLE

Administrative

(X6) DATE

8/15/11

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 242	<p>Continued From page 1</p> <p>up early, the resident stated: "No!" Resident #5 further reported that she did not want to get up at 5:00 AM and had informed the staff who got her up each morning of this preference, but they continued to get her up each day at this time. Resident #5 stated: "I fall asleep waiting on breakfast which is served at 7:30-8:00 AM. It is usually 2 or 3 PM before I am laid back down and I have arthritis so it is hard to sit up so long."</p> <p>An additional interview with Resident #5 on 7/27/2011 at 11:20 AM revealed when asked about getting up early: "I thought there are just certain rules, I really am a night person rather than an early person".</p> <p>Interview with the DON on 7/27/11 at 2:00 PM confirmed Resident # 5 was on the Early Schedule List. The DON revealed she expected the Early Schedule List to be accurate with a resident's choices. She further revealed Resident #5 was asked every month for her preference. She also noted that she expected staff to communicate to each other if there was a change in a residents needs.</p> <p>2. Resident #2 was admitted to the facility on 7/29/05. A review of the latest Minimum Data Set (MDS) assessment of 4/4/2011 revealed the resident was severely impaired with short and long term memory. The MDS assessment also coded that Resident #2 required extensive to total assistance of 1-2 with daily care and mobility.</p> <p>Review of a Document dated 7/01/2011 revealed Resident #2 was on a list of residents who needed to be dressed and/or up by 7:00 AM.</p>	F 242	<p>Resident #2 has been removed from the up for breakfast schedule. All residents were interviewed by lead CNA and Don as to their preferences. 11-7 staff were also interviewed and asked to review list and to make recommendations or changes based off of their knowledge of residents who are resistive to getting up early. All shifts were in-serviced on communicating needed changes in preference schedules and plan of care sheets. Staff were informed of appropriate persons to notify on each shift so that changes could be made promptly.</p> <p>Facility has added an additional support staff to serve in the role as Resident/Family advocate. This nurse will conduct routine interviews with staff, residents and families. She will also keep choice schedules and plan of care sheets updated with the help of lead CNA. Weekly updated schedules will be brought to standards of care QA meetings weekly for review to monitor compliance on an ongoing basis.</p>	7/28/11 8/13/11 8/19/11

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F 242	<p>Continued From page 2</p> <p>During an interview on 7/27/2011 at 8:10 AM with (Nursing Assistant) NA #1, reported: I am in at 5:30 AM and Resident #2 is on the early schedule, night shift leaves her as one of the last ones gotten up as she acts agitated when gotten up so early.</p> <p>Interview with NA #2 on 7/27/2011 at 8:45 AM revealed she was responsible to keep the early schedule list updated. She further noted that Resident #2 was on the list for over a year. When asked how it was communicated to her if changes needed to be made she stated: "I ask the First shift Nurses", further noted when NA #2 was asked if she had ever asked the NA's from the night shift who got the Resident up what the Resident's reactions were, she stated: "No". NA #2 further revealed that no one had told her that Resident #2 did not like to get up early.</p> <p>Interview with the DON on 7/27/11 at 2:00 PM revealed she expected for the Early Schedule List to be accurate with a resident's choices. She further revealed Resident #2's family was asked every month for the resident's preference. She also noted that she expected staff to communicate to each other if there was a change in a resident's needs.</p>	F 242			