

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

PRINTED: 10/17/2019
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 345447	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 09/26/2019
NAME OF PROVIDER OR SUPPLIER EMERALD RIDGE REHAB AND CARE CENTER			STREET ADDRESS, CITY, STATE, ZIP CODE 25 REYNOLDS MOUNTAIN BOULEVARD ASHEVILLE, NC 28804	
(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	INITIAL COMMENTS	F 000		
F 584 SS=B	<p>A recertification and complaint investigation survey was conducted on 09/23/19 through 09/26/19. A total of 27 allegations were investigated and 1 allegation was substantiated.</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-</p> <p>§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>	F 584	10/17/19	

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

TITLE

(X6) DATE

Electronically Signed

10/11/2019

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>§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. This REQUIREMENT is not met as evidenced by: Based on observations and staff interviews, the facility failed to maintain clean rooms for 3 of 6 rooms, (#144, #142, #154), including room floors, bathrooms, and the attaching D-Hallway, where the areas were inspected for safe, clean and comfortable homelike environment.</p> <p>The findings included:</p> <p>An observation was conducted on 09/23/2019, at 9:00 AM and at 5:00 PM, as well as on 09/24/2019, at 8:00 AM and at 5:00 PM, and on 09/25/2019, at 8:00 AM and again at 10:30 AM, of the D-Hallway and resident living areas, #144, #142 and #154. The D-Hallway floors, resident room floors, bathroom floors and toilets, were dirty with dried food particles, food crumbs, reddish colored droplets, dried dark-yellowish liquid and dried brownish-green substance.</p> <p>Observations were made on 9/23/2019,</p>	F 584	<p>1) After performing a root cause analysis, the facility was able to determine that the mock survey rounds, as well as the daily housekeeping procedures were ineffective in identifying/rectifying housekeeping issues. On 9.25.2019, the D-hallway, rooms #142, #144 and #154 were cleaned immediately after the management team was notified of the issues observed by the Surveyor. All issues were rectified prior to the survey exit review.</p> <p>2)The Mock Survey Team and Housekeeping Supervisor have performed a house-wide inspection to include halls A-E as well as Resident rooms and bathroom, whether occupied or vacant.</p> <p>3)On 10.4.2019, the Executive Director provided re-education to the department managers' Mock Survey team regarding</p>		

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F 584	<p>Continued From page 2</p> <p>9/24/2019, and 9/25/2019 a at 8:30 AM, of room #142 revealed food particles, food crumbs on the floor and underneath the beds, and dried brownish-green substance on the tile floor between the A and B beds, along with dried brownish-green substance tracked to and out the resident's doorway and into the D-Hallway.</p> <p>Observations were made on 9/23/2019, 9/24/2019, and 9/25/2019, at 8:40 AM, of room #144 revealed food particles, food crumbs on the floor and underneath the beds and dried dark-yellowish liquid at the A-resident's bed and doorway to D Hallway.</p> <p>Observations on 9/23/2019, 9/24/2019, and 9/25/2019, at 8:45AM, of room #154 revealed reddish colored droplets on the resident's floor by both beds and dried brownish-green substance and dried dark-yellowish liquid on the resident's bathroom floor, baseboard molding, and toilet.</p> <p>An interview was conducted on 9/24/2019, at 11:00 AM, with Nurse Aide (NA) #1, who stated the rooms were not always cleaned by housekeeping on a daily basis and many times the NAs had to clean the rooms. NA #1 further stated they called the cleaning crew to clean the floors if a resident urinates, defecates or vomits on the floor, or, bathroom floor, and/or, toilet. NA #1 explained housekeeping was called if there was blood on the floor, however, the NAs usually end up doing the cleaning and housekeeping will come in afterwards and mop.</p> <p>An interview was conducted on 9/25/2019, at 8:05 AM, with the Housekeeper #1 who stated they were assigned to clean all the rooms and common areas in the facility. Housekeeper #1</p>	F 584	<p>the daily inspection expectation, up to and including education about the daily inspections of the cleanliness of the Resident rooms/bathrooms. The room assignments for the Mock Survey team were reassigned to allow the team a chance to inspect different rooms. Executive Director will educate new Mock Survey team members on the inspection process.</p> <p>On 10.17.2019, the Health Services Group Housekeeping Manager provided education to the housekeepers regarding the day-today cleaning expectations, from floor maintenance to overall dusting to bathroom cleanliness. In addition, this education included review of the process(es) to ensure vacant Residents rooms are 'admit ready'. New hires to be educated on cleaning procedures.</p> <p>4) The Health Services Group Manager or Designee will perform Quality Improvement Monitoring for Resident rooms beginning 10.04.2019. The QI Monitoring will be completed as follows: 10 rooms weekly for 6 weeks; 5 rooms weekly for 4 weeks and then 5 rooms every other week for 2 months. The Mock Survey team will continue to monitor the Resident rooms 5 days a week. Mock Survey results will be reviewed during the weekly morning meeting by the Executive Director. The HSG QI monitor will be reviewed with the Executive Director weekly and then cumulatively at the monthly QAPI meeting. The Executive Director will bring trends noted in the</p>		

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F 584	<p>Continued From page 3</p> <p>explained each hall had their own cleaning aid that worked from 8:00 AM to 3:30 PM, every day. The interview further revealed there was a hall tech that only cleaned the hallways and was responsible for the waxing and buffing for all floors.</p> <p>An Interview was conducted on 9/25/2019, at 10:50 AM, with the Housekeeping Manager (HM) concerning the daily housekeeping members' staffing, responsibilities and areas that are cleaned. The HM stated the daily staffing of the housekeeping members included; one hallway housekeeping tech and four housekeeping members, one each assigned to D-Hall, C-Hall and A-Hall. The A-Hall member was also responsible for B-Hall. All members were responsible for the cleaning of E-Hall. The housekeeping member's responsibilities included; cleaning, sweeping and mopping the rooms, bathrooms, wall care, bedside tables, removal of trash, replacing trash bags in the trash cans, cleaning environment spills and/or chemicals, and deep cleaning rooms, which included cleaning, stripping and re-waxing the floors after a resident was discharged from that room.</p> <p>An observation was conducted on 9/25/2019, at 10:55 AM, with the HM concerning the conditions of rooms #144, #142, #154, and D-Hallway where the HM stated this was unexpected and unacceptable and would take care of the cleaning of these rooms after he spoke with his housekeeping team.</p> <p>An interview was conducted on 9/25/2019, at 11:05 AM, with the Executive Director (ED) concerning the findings during an observation in rooms #144, #142, #154 and D-Hallway. The ED</p>	F 584	<p>Mock Survey to QAPI monthly meeting. Any trends noted on Mock Survey rounds will have specific QI monitors to address any issues. The QI monitoring schedule will be modified as needed by the QAPI team based on the reports from the QI Monitor and the Mock Survey team findings. The QAPI Committee consists of, but not limited to: Medical Director Executive Director, Director of Nursing, Assistant Director of Nursing, Social Services, Activities, Medical Records, Pharmacist, Maintenance, Dietary, Housekeeping, MDS Nurse.</p> <p>5) Completion date 10.17.2019.</p>		

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F 584	Continued From page 4 stated she could see the issues and would follow-up with the HM and what he plans to do now about this and how he will monitor these issues in the future. The ED stated all these issues would be addressed expediently.	F 584		