

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

PRINTED: 12/06/2021
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 345015	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED C 11/04/2021
NAME OF PROVIDER OR SUPPLIER CLAPP'S CONVALESCENT NURSING HOME INC			STREET ADDRESS, CITY, STATE, ZIP CODE 500 MOUNTAIN TOP DRIVE ASHEBORO, NC 27203		
(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 survey was conducted 11/1/21 through 11/4/21. The facility was found in compliance with the requirement CFR 483.73, Emergency Preparedness. Event ID # TCZQ11.	F 000			
F 732	INITIAL COMMENTS	F 000			
SS=B	A recertification and complaint survey with investigation was conducted from 11/1/21 to 11/4/21. The one complaint allegation was unsubstantiated. See # TCZQ11.				
	The 2567 was amended on 12/03/21 to reflect changes to the scope and severity as a result of the IDR.				
	Posted Nurse Staffing Information	F 732		11/15/21	
	CFR(s): 483.35(g)(1)-(4)				
	§483.35(g) Nurse Staffing Information.				
	§483.35(g)(1) Data requirements. The facility must post the following information on a daily basis:				
	(i) Facility name.				
	(ii) The current date.				
	(iii) The total number and the actual hours worked by the following categories of licensed and unlicensed nursing staff directly responsible for resident care per shift:				
	(A) Registered nurses.				
	(B) Licensed practical nurses or licensed vocational nurses (as defined under State law).				
	(C) Certified nurse aides.				
	(iv) Resident census.				
	§483.35(g)(2) Posting requirements.				
	(i) The facility must post the nurse staffing data specified in paragraph (g)(1) of this section on a				

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

TITLE

(X6) DATE

Electronically Signed

12/06/2021

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 732	<p>Continued From page 1</p> <p>daily basis at the beginning of each shift.</p> <p>(ii) Data must be posted as follows:</p> <p>(A) Clear and readable format.</p> <p>(B) In a prominent place readily accessible to residents and visitors.</p> <p>§483.35(g)(3) Public access to posted nurse staffing data. The facility must, upon oral or written request, make nurse staffing data available to the public for review at a cost not to exceed the community standard.</p> <p>§483.35(g)(4) Facility data retention requirements. The facility must maintain the posted daily nurse staffing data for a minimum of 18 months, or as required by State law, whichever is greater.</p> <p>This REQUIREMENT is not met as evidenced by:</p> <p>Based on record review and staff interview, the facility failed to accurately complete the daily nurse staffing information posting for 14 of 30 days reviewed (October 1 - November 1, 2021).</p> <p>Findings included:</p> <p>The daily schedule and the daily nurse staffing information posting were reviewed from October 1, 2021 through November 1, 2021. The nurse staffing information posting did not match the daily schedule for the licensed nurses on the following dates:</p> <p>10/1/21 (3rd shift) - the daily schedule has 1 Registered Nurse (RN) and 1 Licensed Practical Nurse (LPN) while the staff posting has 2 LPNs</p> <p>10/2/21 (1st shift) - the daily schedule has no RN while the staff posting has 1 RN</p> <p>10/5/21(1st shift) - the daily schedule has 2 RNs</p>	F 732	<p>This plan of correction will serve as the facility's allegation of compliance with requirements of 42 CFR, Part 483, Subpart B for long term care facilities. Preparation and submission of this plan of correction is in response to DHHS 2567 for the November 4, 2021 survey and does not constitute an agreement or admission of Clapp's Convalescent Nursing Home of the truth of the facts alleged or the correctness of the conclusions stated on the statement of deficiencies. This plan of correction is prepared and submitted because of the requirements of 42 CFR, Part 483, Subpart B throughout the time period stated in the statement of deficiencies. In accordance with state and federal law, however, submits this plan of correction to address the statement of deficiencies and</p>		

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F 732	<p>Continued From page 2</p> <p>while the staff posting has 1 RN 10/8/21 (1st shift) - the daily schedule has 1 RN and 5 LPNs while the staff posting has no RN and 4 LPNs 10/11/21 (1st shift) - the daily schedule has 5 LPNs while the staff posting has 4 LPNs 10/13/21 (1st shift) - the daily schedule has 4 LPNs while the staff posting has 3 LPNs 10/15/21 (1st shift) - the daily schedule has 3 LPNs while the staff posting has 2 LPNs 10/18/21 (1st shift) - the daily schedule has 4 LPNs while the staff posting has 3 LPNs 10/20/21 (1st shift) - the daily schedule has 4 LPNs while the staff posting has 3 LPNs 10/22/21 (1st shift) - the daily schedule has 5 LPNs while the staff posting has 4 LPNs 10/25/21 (1st shift) - the daily schedule has 5 LPNs while the staff posting has 4 LPNs 10/26/21 (1st shift) - the daily schedule has 2 RNs while the staff posting has 1 RN 10/27/21 (1st shift) - the daily schedule has 4 LPNs while the staff posting has 3 LPNs 10/29/21 (1st shift) - the daily schedule has 4 LPNs while the staff posting has 3 LPNs</p> <p>The Medical Records staff was interviewed on 11/3/21 at 10:37 AM. The Medical Records staff member stated that she was responsible for completing and for posting the daily nurse staffing information. She reviewed the daily schedule and the daily nurse staffing information and verified that she had completed the daily staff posting incorrectly on 10/1/21 (3rd shift), 10/2/21, 10/5/21, 10/8/21, 10/11/21, 10/13/21, 10/15/21, 10/18/21, 10/20/21, 10/22/21, 10/25/21, 10/26/21, 10/27/21 and 10/29/21 on 1st shift. She reported that the daily staffing form was confusing, and she would check if the form could be revised.</p>	F 732	<p>to serve as it's allegation of compliance with the pertinent requirements as of the dates stated in the plan of correction and as fully completed as of November 15, 2021.</p> <p>For the Residents affected, the employee responsible for maintaining staffing sheets was in-serviced on 11-15-21 on making sure the facility name, date, the total number of actual hours worked by the following categories of licensed and unlicensed nursing staff directly responsible for resident care per shift are RNs, LPNs, and CNAs, and resident census.</p> <p>Monitoring: An audit starting November 22, 2021 will be completed by the Director of Nurses or Director of Operations will review the daily staffing sheet 5 days a week for four weeks then will review 15 days a month monthly for two months to ensure the staffing sheets have the accurate staffing information documented on the staffing sheets.</p> <p>This plan of correction and the quality improvement monitoring will be followed by the facility's Quality Assurance Performance Improvement Committee and any areas of concern will be addressed timely and appropriately.</p>		

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F 732	Continued From page 3 The Director of Nursing (DON) was interviewed on 11/3/21 at 10:38 AM. The DON reviewed the daily schedule and the daily staff posting form and verified that it could be confusing. She reported that she would revise the form and ensure that the daily staff posting was completed accurately.	F 732		