

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 345183	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 07/16/2024
NAME OF PROVIDER OR SUPPLIER Universal Health Care/ Concord		STREET ADDRESS, CITY, STATE, ZIP CODE 430 Brookwood Avenue NE Concord, NC 28025	

For information on the nursing home's plan to correct this deficiency, please contact the nursing home or the state survey agency.

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information)
<p>F 0550</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Honor the resident's right to a dignified existence, self-determination, communication, and to exercise his or her rights.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 38904</p> <p>Based on record review, observations and interviews with staff and resident the facility failed to provide a fork during a lunch meal for 4 of 6 residents (Resident #3, Resident #9, Resident #10, and Resident #11) who ate independently. Resident #3, Resident #9, Resident #10, and Resident #11 were given a spoon on their lunch meal tray and indicated they would prefer a fork to eat their meal of breaded chicken covered with barbeque sauce, cabbage, dressing, and a piece of cake.</p> <p>Findings included:</p> <p>1. Resident #3 was admitted to the facility on [DATE] with diagnoses of dysphagia.</p> <p>An annual Minimum Data Set assessment dated [DATE] indicated Resident #3 was cognitively intact and was able to feed himself with set up assistance with his meals.</p> <p>A Physician's order dated 7/1/2024 stated resident #3 required a regular texture diet with thin liquids.</p> <p>During an observation of Resident #3 on 7/16/2024 at 12:48 pm he was sitting up in his electric wheelchair and Nurse Aide #1 brought his lunch meal tray to him. Resident #3 was upset and stated it was a shame he must eat his meal with a spoon like a child and was not given a fork. Resident #3's meal tray had a spoon but no fork or knife.</p> <p>During an interview with Nurse Aide #1 on 7/16/2024 at 12:48 pm she stated she did not know why Resident #3 or the other trays on the 200-hall did not have forks for the lunch meal and the dietary staff would know why the trays did not have forks. Nurse Aide #1 did not offer to obtain a fork for Resident #3.</p> <p>2. Resident #9 was admitted to the facility on [DATE] with diagnoses of diabetes and dysphagia.</p> <p>An annual Minimum Data Set assessment dated [DATE] indicated Resident #9 was cognitively intact, had swallowing</p> <p>A Physician's order dated 7/1/2024 stated Resident #8 should receive a regular texture diabetic diet with thin liquids.</p> <p>(continued on next page)</p>

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.

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information)		
<p>F 0550</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>An interview was conducted with Resident #8 on 7/16/2024 at 12:54 pm and she stated she did not receive a fork with her lunch meal tray and there was only a spoon to eat her meal with. Resident #8 stated she would have preferred a fork, and it was difficult to eat the breaded chicken and with barbeque sauce that was on her tray. She stated she had to use her hands to eat her meal and she had the barbeque sauce all over her hands.</p> <p>3. Resident #10 was admitted to the facility on [DATE] with diagnoses of diabetes and dementia.</p> <p>A Significant Change Minimum Data Set assessment dated [DATE] indicated Resident #10 was cognitively intact, had no issues with swallowing, and could feed herself after setting up of meal trays.</p> <p>A Physician's order dated 6/28/2024 indicated Resident #10 should receive a regular texture diet with thin liquids.</p> <p>During an interview with Resident #10 on 7/16/2024 at 12:57 pm she stated she did not have a fork on her tray and had to eat her meal with a spoon. Resident #10 stated this was not the first time they had been given only a spoon to eat their meals and the last time was during the evening meal on 7/15/2024. Resident #10 stated she would prefer to eat her meal with a fork and a knife.</p> <p>4. Resident #11 was admitted to the facility on [DATE] with diagnoses of weakness and anemia.</p> <p>A quarterly Minimum Data Set assessment dated [DATE] indicated Resident #11 was moderately cognitively impaired, had not swallowing issues, and could feed herself with set up of her meals by staff.</p> <p>A Physician's order dated 6/27/2024 stated Resident #11 required a regular texture diet and thin liquids.</p> <p>During an interview on 7/16/2024 at 1:10 pm with Resident #11 she stated the staff had already picked up her lunch meal tray, but she did not have a fork on her tray, but she did have a spoon. Resident #11 stated it was not unusual for her meal tray to come without a fork and the facility staff had given an explanation why the facility did not have forks and knives. Resident #11 stated it made you feel like a child to eat your meal with a spoon instead of a fork and knife. She also stated she had a hard time eating the breaded chicken with barbeque sauce because she had to pick it up with her hands and it was messy.</p> <p>On 7/16/2024 at 12:59 pm an interview was conducted with the Dietary Manager, and she stated she recently came to the facility as the Dietary Manager two and a half weeks ago. The Dietary Manager stated they threw out some knives because they were rusted, and the stock of forks was low when she arrived. The Dietary Manager stated she ordered forks with her food order, and they should arrive at the facility today.</p> <p>During an interview with the Administrator on 7/16/2024 he stated he was not aware the facility did not have enough forks and knives to ensure the residents had appropriate utensils. He stated if he had known they did not have enough silverware he would have purchased enough immediately, and the residents should have the utensils they need to eat their meals.</p>		