

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 345264	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 01/08/2026
NAME OF PROVIDER OR SUPPLIER Stanley Total Living Center		STREET ADDRESS, CITY, STATE, ZIP CODE 514 Old Mount Holly Road Stanley, NC 28164	

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 0695</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Provide safe and appropriate respiratory care for a resident when needed.</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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<p>F 0695</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on observations, record review, and staff interviews, the facility failed to post cautionary and safety signage outside of resident rooms that indicated the use of oxygen for 3 of 3 residents reviewed for respiratory care (Residents #19, #88 and #41).The findings included:a. Resident #19 was admitted to the facility on [DATE] with the diagnosis of chronic respiratory failure with hypoxia (a condition where the body is deprived of oxygen).A review of Resident #19's physician orders dated 4/2/2025 revealed an order for oxygen to be administered as needed via nasal cannula at 2 liters per minute (l/min).A review of the quarterly Minimum Data Set (MDS) dated [DATE] indicated Resident #19 was coded for receiving oxygen.Observations on 1/5/2026 at 10:54 AM, 1/5/2026 at 3:40 PM, 1/6/2026 at 8:56 AM revealed Resident #19 was in her room wearing a nasal cannula with oxygen being administered at 2 l/min. There was no cautionary or safety signage posted at Resident #19's room to indicate oxygen was in use during the observations.b. Resident #88 was admitted to the facility on [DATE] with diagnosis of chronic respiratory failure with hypoxia.A review of Resident #88's physician orders dated 12/5/2025 revealed an order for oxygen to be administered continuously via nasal cannula at 3 l/min.A review of the admission MDS dated [DATE] indicated Resident #88 was coded for receiving oxygen.Observations on 1/5/2026 at 10:57 AM, 1/5/2026 at 3:39 PM, and 1/6/2026 at 8:58 AM revealed Resident #88 was in her room wearing a nasal cannula with oxygen being administered at 3 l/min. There was no cautionary or safety signage posted at Resident #88's room to indicate oxygen was in use during the observations.c. Resident #41 was admitted to the facility on [DATE] with a diagnosis of acute and chronic respiratory failure with hypoxia.A review of Resident #41's physician orders dated 2/13/2025 revealed an order for oxygen to be administered as needed via nasal cannula at 2 l/min to maintain oxygen saturations at 90% or above.A review of Resident #41's physician orders dated 8/1/2025 revealed an order for oxygen to be administered via nasal cannula at bedtime to maintain oxygen saturations above 90% on at bedtime and off in AM.A review of the quarterly MDS dated [DATE] indicated Resident #41 was coded for receiving oxygen.Observations on 1/5/2026 at 10:47 AM revealed Resident #41 was in his room wearing a nasal cannula with oxygen being administered at 2 l/min. There was no cautionary or safety signage posted at Resident #41's room to indicate oxygen was in use during the observations. Observations on 1/5/2026 at 3:42 PM and 1/6/2026 at 8:59 AM revealed there was no cautionary or safety signage posted at Resident #41's room to indicate oxygen was in use during the observations.During an interview on 1/7/2026 at 9:53 AM NA #1 stated she had not seen oxygen in use signs posted at residents' rooms who used oxygen. During an interview on 1/7/2026 at 10:07 AM the Assistant Director of Nursing (ADON) stated the residents did not have oxygen in use signage at their rooms because the facility was a non-smoking facility and no smoking signs were present throughout the facility. During an interview on 1/7/2026 at 1:08 PM the Director of Nursing (DON) stated the facility had a policy that they did not post oxygen in use signs on resident doorways. They were posted at the entrance and exits of the facility with non-smoking signs. The DON thought since it was a non-smoking facility they were not required to have oxygen in use signs at residents' rooms.During an interview on 1/7/2026 at 1:38 PM the Administrator stated since the facility was a non-smoking facility she did not think the oxygen in use signs needed to be posted on the residents' rooms since it was posted at the entrance to the facility.</p>		