

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 345322	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 03/20/2025
NAME OF PROVIDER OR SUPPLIER The Laurels of Hendersonville		STREET ADDRESS, CITY, STATE, ZIP CODE 290 Clear Creek Road Hendersonville, NC 28792	

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 0732</p> <p>Level of Harm - Potential for minimal harm</p> <p>Residents Affected - Many</p>	<p>Post nurse staffing information every day.</p> <p>51936</p> <p>Based on record review and staff interviews, the facility failed to complete a daily nurse staffing sheet for 50 of 76 days for the period reviewed from January 1, 2025 through March 17, 2025.</p> <p>The findings included:</p> <p>A review of the daily nurse staffing sheets for January 1, 2025 to January 31, 2025 revealed no information for 1/01/2025, 1/02/2025, 1/03/2025, 1/04/2025, 1/05/2025, 1/06/2025, 1/08/2025, 1/09/2025, 1/10/2025, 1/11/2025, 1/12/2025, 1/18/2025, 1/19/2025, 1/22/2025, 1/25/2025, 1/26/2025, and 1/28/2025.</p> <p>A review of the daily nurse staffing sheets for February 1, 2025 to February 28, 2025 revealed no information for 2/01/2025, 2/02/2025, 2/03/2025, 2/05/2025, 2/08/2025, 2/09/2025, 2/10/2025, 2/11/2025, 2/12/2025, 2/13/2025, 2/15/2025, 2/16/2025, 2/20/2025, 2/21/2025, 2/22/2025, 2/23/2025, 2/24/2025, 2/25/2025, 2/27/2025 and 2/28/2025.</p> <p>A review of the daily nurse staffing sheets for March 1, 2025 to March 17, 2025 revealed no information for 3/01/2025, 3/02/2025, 3/04/2025, 3/05/2025, 3/06/2025, 3/07/2025, 3/08/2025, 3/09/2025, 3/10/2025, 3/11/2025, 3/14/2025, 3/15/2025 and 3/16/2025.</p> <p>An interview on 3/20/25 at 1:26 PM with the Medical Records Clerk #1, revealed the daily nurse staffing sheet was her responsibility to complete each morning. She completed each section for day, evening and night shift based on the staffing information she was given by nursing and posted the information at the front reception desk. She pulled the old sheet and placed it in the binder which was kept in the medical records office. She stated some dates were missing completed sheets and she did not know who completed this task if she was not working.</p> <p>A follow up interview on 3/20/25 at 1:34 PM with the Medical Records Clerk #1, revealed she talked with the Administrator and there was not a plan in place for another staff member to complete the daily nurse staffing sheet when she (Medical Records Clerk #1) was not working.</p> <p>An interview on 3/20/25 at 1:48 PM with the Director of Nursing (DON) revealed no one had been completing the nurse staffing sheet when Medical Records Clerk #1 was not working.</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 0732</p> <p>Level of Harm - Potential for minimal harm</p> <p>Residents Affected - Many</p>	<p>An interview on 3/20/25 at 2:02 PM with the Administrator revealed the nurse staffing sheet was to be completed daily. He was not aware the nurse staffing sheet was not completed the days Medical Records Clerk #1 was not working.</p>

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<p>F 0814</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Dispose of garbage and refuse properly.</p> <p>51464</p> <p>Based on observations and staff interviews, the facility failed to keep dumpster doors and lids closed for 2 of 3 dumpsters observed and have a lid on one plastic garbage can and maintain another plastic garbage can in good condition for 2 of 2 garbage cans observed.</p> <p>The findings included:</p> <p>A continuous observation of the dumpster area was conducted on 3/18/25 from 2:49 PM to 3:05 PM. On the right side of the dumpsters were two wheeled gray plastic garbage cans. One gray garbage can had no lid and was half full of loose refuse and the other gray garbage can holding rock salt lidded with a grapefruit sized hole three-quarters of the way up the side of the can. One of the two large dumpsters had both lids open, and the small dumpster had one of two lids open and a side door open. The Dietary Manager, Maintenance Director and Maintenance Assistant were present during this observation.</p> <p>An interview with the Dietary Manager on 3/18/25 at 2:50 PM revealed she was not aware the dietary department was responsible for maintaining the dumpster area. She indicated the dumpster area should be free of debris and lids closed for pest control as the dumpsters were close to the kitchen. The Dietary Manager revealed she would monitor the dumpster area on a regular basis now.</p> <p>An interview with the Maintenance Director on 3/18/25 at 2:56 PM revealed the waste management company emptied the dumpsters on Mondays, Wednesdays and Fridays. The Maintenance Director stated the lids and doors of the dumpsters and plastic garbage cans should be closed for pest control.</p> <p>On 3/19/25 at 9:01 AM an observation of the dumpster area revealed the rolling garbage cans observed on 3/18/25 had been removed and the small dumpster was observed to have one of two lids open.</p> <p>During an interview with the Administrator on 3/19/25 at 3:30 PM he revealed the maintenance department was responsible for maintaining the dumpster area. He indicated the dumpster area should be kept clean for pest control and the dumpster lids and doors closed.</p>		