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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 345494 | (X2) MULTIPLE CONSTRUCTION A. Building B. Wing | (X3) DATE SURVEY COMPLETED 04/03/2025 |
| NAME OF PROVIDER OR SUPPLIER Peak Resources - Gastonia | | STREET ADDRESS, CITY, STATE, ZIP CODE 2780 X-Ray Drive Gastonia, NC 28054 | |

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) |
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| <p>F 0761</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p> | <p>Ensure drugs and biologicals used in the facility are labeled in accordance with currently accepted professional principles; and all drugs and biologicals must be stored in locked compartments, separately locked, compartments for controlled drugs.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 39037</p> <p>Based on observations, record review, and resident and staff interviews, the facility failed to secure medications stored in a resident room for 1 of 1 resident reviewed for medication storage (Resident #103).</p> <p>Findings included:</p> <p>Resident #103 was admitted to the facility 03/22/25 with a diagnosis including acute (sudden onset) metabolic encephalopathy (a condition which occurs when problems with metabolism causes brain dysfunction).</p> <p>Review of a Nurse Practitioner (NP) note dated 03/23/25 revealed Resident #103 was cognitively intact.</p> <p>The admission Minimum Data Set (MDS) assessment dated [DATE] was documented as in process.</p> <p>An observation of an uncovered clear plastic storage bin sitting on the counter beside the sink in Resident #103's room on 04/01/25 at 8:44 AM revealed a bottle of eye multivitamin pills, a bottle of Fluticasone nasal spray, and a bottle of Azelastine (antihistamine) nasal spray in the bin. In an interview with Resident #103 at the same date and time he confirmed the medications in the plastic bin belonged to him. He stated he took the eye multivitamins, but he could not remember the last time he took them. Resident #103 stated his family brought the eye multivitamins to him from home and he thought the nasal sprays came from the hospital. He stated he had not been using the nasal sprays since admission to the facility.</p> <p>An observation of an uncovered plastic storage bin sitting beside the sink in Resident #103's room on 04/02/25 at 8:27 AM revealed a bottle of eye multivitamin pills, a bottle of Fluticasone nasal spray, a bottle of Azelastine nasal spray, and two bottles of Ammonia Lactate 12% lotion (topical medication used to treat dry or scaly skin) were in the bin. In an interview with Resident #103 at the same date and time he stated he had not used the ammonia lactate lotion in a while, and he wasn't sure where it came from.</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.

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| LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE | (X6) DATE |
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| <p>F 0761</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p> | <p>An observation of a plastic storage bin sitting beside the sink in Resident #103's room on 04/03/25 at 8:18 AM revealed two bottles of Ammonia Lactate 12% lotion, a bottle of Fluticasone nasal spray, and a bottle of Azelastine nasal spray were sitting in the bin.</p> <p>An interview with Nurse #1 on 04/03/25 at 8:29 AM revealed she had been caring for Resident #103 from 04/01/25 through 04/03/25 on the 7:00 AM to 3:00 PM shift. She stated she had not noticed medications in the bin in Resident #103's room and if she had she would have removed the medications, placed them in a plastic bag, labeled the medications with Resident #103's name, and stored them in the medication room until they could be sent home with family or until he was discharged . She stated unless a resident had a Physician order to self-administer their medications, they should not be stored in a resident's room.</p> <p>An interview with the Director of Nursing (DON) on 04/03/25 at 1:05 PM revealed families brought medications to residents without staff's knowledge and when staff found them, they removed them from the room and sent them home with family. She stated unless a resident had a Physician order to administer their own medication, medications should not be stored in a resident's room.</p> |

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| <p>F 0812</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p> | <p>Procure food from sources approved or considered satisfactory and store, prepare, distribute and serve food in accordance with professional standards.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 39037</p> <p>Based on observations and staff interviews, the facility failed to discard expired and spoiled food items from 1 of 1 walk-in cooler. These failures had the potential to affect food served to residents.</p> <p>Findings included:</p> <p>An initial observation of the walk-in cooler on [DATE] at 10:07 AM revealed a plastic bag containing thawed chicken sitting inside a metal pan with a date of [DATE] sitting on a bottom shelf. A box ,d+[DATE] full of green peppers with a delivery date of [DATE] was sitting on a top shelf. An observation of the green peppers at the same date and time revealed the peppers were shriveled and contained multiple brown spots.</p> <p>An interview with the Dietary Manager on [DATE] at 10:10 AM revealed it was her responsibility to check for spoiled and expired food items on a daily basis. She stated the green peppers should have been used or discarded before showing signs of spoilage and she just overlooked them. The Dietary Manager stated she thought raw chicken was good for 7 days after being thawed but she would check.</p> <p>A follow-up interview with the Dietary Manager on [DATE] at 2:35 PM revealed raw chicken was good for 3 days after being thawed. She stated the chicken should have been used or discarded by [DATE].</p> <p>An interview with the Administrator on [DATE] at 1:01 PM revealed she expected food to be used or discarded before showing signs of spoilage, and the guidelines for thawed chicken should be followed.</p> | | |