Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL019020	A. BUILDING: _____ B. WING _____	07/08/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
CAROLINA MEADOWS FAIRWAYS	700 A CAROLINA MEADOWS CHAPEL HILL, NC 37517

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D 000	Initial Comments The Adult Care Licensure Section conducted a follow-up and annual survey from 07/07/26-07/08/26.	D 000		
D 283	10A NCAC 13F .0904(a)(2) Nutrition and Food Service 10A NCAC 13F .0904 Nutrition and Food Service (a) Food Procurement and Safety in Adult Care Homes: (2) Facilities with a licensed capacity of 13 or more residents shall ensure food services comply with Rules Governing the Sanitation of Hospitals, Nursing Homes, Adult Care Homes and Other Institutions set forth in 15A NCAC 18A .1300 which are hereby incorporated by reference, including subsequent amendments, assuring storage, preparation, and serving of food and beverage under sanitary conditions. This Rule is not met as evidenced by: Based on observations and interviews, the facility failed to ensure the kitchen and food storage areas were free from contamination, including food items that were not covered, and failed to monitor leftover food temperatures at the required times during the cooling process to ensure foods cooled to safe temperatures.	D 283	Effective immediately, all prepared foods will be stored securely wrapped in plastic before refrigeration or freezer storage. Staff re-educated on proper food storage procedures. Management will complete a daily refrigeration and freezer audit including temperatature logs, food storage, for 30 days; weekly for 60 days; monthly thereafter.	7/9/26 ongoing

Division of Health Service Regulation
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE — TITLE: Administrator — (X6) DATE: 8/10/26

Reviewed and acknowledged 08/10/26. kg

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D 283	Continued From page 1 The findings are: Observation of the reach-in cooler on 07/08/26 at 1:59 p.m. revealed there were 5 individual containers of ambrosia salad uncovered. Observation of the walk-in freezer on 07/08/26 at 2:00 p.m. revealed: -There was a box of pork products that was in a plastic bag within a box. -The plastic bag was not closed, and the pork products were exposed. -There was a box of corn on the cob that was in a plastic bag within a box. -The plastic bag was not closed, and the corn was exposed. -There was a box of yeast rolls that was in a plastic bag within a box. -The plastic bag was not closed, and the yeast rolls were exposed. Observation of the walk-in cooler on 07/08/26 at 2:26 p.m. revealed: -There was a container of pork BBQ that was dated 07/07/26 with a time in of 1:40pm and a start temperature of 135 degrees. -There was no documentation for a 2-hour or 4-hour temperature for the pork BBQ. -The container was not covered. -There was a container of prime rib that was dated 07/07/26 with a time in of 2:00pm and a start temperature of 135. -The 2-hour temperature was 61, but there was no documentation for a 4-hour temperature. -The container was not covered. -There was a container of vegetables dated 07/06/26 that was not covered. -There were two pots of beans that were not covered.	D 283		

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D 283	Continued From page 2 -There was a container of chopped chicken dated 06/29/26. Interview with the cook on 07/08/26 at 2:13 p.m. revealed: -Holding time for leftover food, such as cooked chicken, was 5 days. -Whoever was cooking was responsible for placing the cooked items in the cooler and documenting the date and starting temperature. -The items would be left uncovered until cooled completely to 40 degrees and then covered. -Once the items were cooled completely, they would be covered. -The leftover items were going to be frozen to be used at a later date. -The ambrosia salad was served today, 07/08/26, and the individual containers were going to be thrown away. -All items in the freezer should have been resealed. -The pots of beans had been prepped for dinner on 07/08/26. Telephone interview with the Environmental Health Specialist (EHS) on 07/08/26 at 2:42 p.m. revealed: -Food should be cooled from 135 to 70 degrees within 2 hours and to 41 degrees or below within 4 hours. -The maximum amount of time food could be cooling and remain uncovered in the walk-in cooler was 6 hours. -If the temperatures were not taken at the required intervals, staff would not know whether the food had cooled appropriately to prevent contamination. -Food items in the freezer should be kept covered by rolling down the bags to prevent contamination.	D 283		

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D 283	Continued From page 3 -Cooked chicken dated 06/29/26 should not be served and would need to be discarded because it was past the acceptable date. Interview with the Administrator on 07/08/26 at 3:14 p.m. revealed: -The Dining Services Manager was not available. -She expected the containers of ambrosia salad to be covered. -All food should be covered, including leftovers once cooled, freezer items, and items prepped for dinner. -The kitchen staff should have followed the policy of monitoring the temperature of leftover food to ensure the food was safe before being served.	D 283	Type text here	
D 299	10A NCAC 13F .0904(d)(3) Nutrition And Food Service 10A NCAC 13F .0904 Nutrition And Food Service (d) Food Requirements in Adult Care Homes: (3) Daily menus for regular diets shall be based on the U.S. Department of Agriculture Dietary guidelines for Americans 2020-2025, which are hereby incorporated by reference including subsequent amendments and editions. These guidelines can be found at https://dietaryguidelines.gov/sites/default/files/2021-03/Dietary_Guidelines_for_Americans-2020-2025.pdf for no cost. This Rule is not met as evidenced by: Based on observations, record reviews, and interviews, the facility failed to ensure that 8 ounces of milk or another equivalent dairy serving	D 299		

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D 299	Continued From page 4 were served three times daily to residents in the Special Care Unit (SCU). The findings are: Review of the facility's current census on 07/08/26 revealed there were 13 residents residing in the SCU. Review of the U.S. Department of Agriculture Dietary Guidelines for Americans revealed: -Adults aged 19-59 and 60+ should consume a minimum of the equivalent of 3 cups of dairy daily for a 1,600-calorie diet. -Recommendations for daily dairy servings included 1 cup (8 ounces) of whole milk, 2% milk, 1% milk, nonfat/skim milk, buttermilk, lactose-free milk, evaporated milk, and fortified soy milk. -Milk-based desserts included in dairy servings were 1 cup of frozen yogurt, pudding, sherbet, ice cream, or a dairy-based smoothie. -Yogurt included in dairy servings was 1 cup of milk-based yogurt, soy yogurt, or kefir. -Cheese included in dairy servings was one and a half ounces of sliced or cubed hard or soft natural cheese, one-third cup of shredded hard or soft natural cheese, 2 cups of cottage cheese, or one-half cup of ricotta cheese. -The dairy serving equivalent of processed American cheese was two 1-ounce slices or 2 ounces. -Cream cheese, sour cream, and cream were not included as dairy equivalents due to their low calcium content. -Plant-based milks other than soy milk were not included as dairy equivalents, even though they may contain calcium, because their overall nutritional content was not similar enough to dairy milk and soy milk.	D 299	Type text here An adequate dairy serving is included on the Special Care Unit meal service checklist for breakfast, lunch, and dinner is being served. Care Coordinator will ensure residents receive or are offered dairy in accordance with their preferences and care plans. Daily for 30 days; weekly for 60 days; monthly thereafter. The Care Coordinator and Dietician will educate staff regarding the expectation for three times daily dairy servings.	7/9/26 8/28/26 and ongoing 8/28/26

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D 299	Continued From page 5 Observation of the breakfast meal on 07/08/26 revealed: -The residents were served water and another beverage. -The residents were not served or offered milk or any other dairy item. Observation of the lunch meal on 07/08/26 from 12:12 p.m. to 1:10 p.m. revealed: -The residents were served water and another beverage. -The residents were not served or offered milk to drink or any other dairy item. Interview with a medication aide on 07/08/26 at 2:06pm revealed: -They did not serve milk or equivalent dairy three times daily. -The residents only get milk if they request cereal for breakfast. -Yogurt and ice creams were choices for the residents during snack time. -Not all the residents would choose yogurt or ice cream. Interview with the Administrator on 07/08/26 at 2:40 p.m. revealed she did not know 8 ounces of milk or another equivalent dairy serving should be served three times daily	D 299		
D 378	10A NCAC 13F .1006 (b) Medication Storage 10A NCAC 13F .1006 Medication Storage (b) All prescription and non-prescription medications stored by the facility, including those requiring refrigeration, shall be maintained under locked security except when under the direct physical supervision of staff in charge of medication administration.	D 378		

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D 378	Continued From page 6 This Rule is not met as evidenced by: Based on observations and interviews, the facility failed to ensure a medication cart in the special care unit (SCU) was locked when not under the direct supervision of a medication aide (MA). The findings are: Observation of the medication cart in the SCU on 07/08/26 from 8:47am to 9:08am revealed: -The MA was standing at the medication cart gathering medications for a resident. -At 8:47am she walked away from the medication cart and went around the corner to the dining room; the medication cart was left unlocked and not within view from the dining room. -The MA returned to the unlocked medication cart, documented on the computer and removed another medication. -At 8:54am she walked away from the unlocked medication cart and into the dining room. -She returned to the unlocked medication cart, documented on the computer and removed another resident's medication. -At 8:57am she walked away from the unlocked medication cart and into the dining room. -The MA returned to the unlocked medication cart and documented on the computer. -At 9:05am she walked away from the medication cart without locking it and went into the dining room. -At 9:08am, the surveyor informed the MA of the unlocked medication cart; the MA returned to the	D 378	Type text here Retrained indicated staff member on 7/8/26. ADON to complete daily medication storage audits to ensure proper procedures are being followed daily for 30 days; weekly for 60 days; monthly thereafter. In-person training on proper medication storage will be conducted by an RN for all Med Techs.	7/8/26 8/28/26 and ongoing 8/28/26

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D 378	Continued From page 7 medication cart and locked it. Interview with the MA on 07/08/26 at 2:06pm revealed: -All medications should be secured by locking the medication cart. -She did forget to lock the medication cart sometimes. -The residents could open the medication cart and remove medications from the cart. Interview with a nursing supervisor on 07/08/26 at 2:28pm revealed: -The medication cart should be locked when the MA was not in view of the cart. -A resident could remove medication from the unlocked cart and ingest it. -She expected the medication cart to be locked when the MA was not in the area to supervise the cart. Interview with the Administrator on 07/08/26 at 2:40pm revealed: -Residents could access the medications if the medication cart was unlocked. -The MAs were expected to ensure the medication cart was locked before walking away from the medication cart.	D 378		