

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 345142	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 07/24/2025
NAME OF PROVIDER OR SUPPLIER University Place Nursing and Rehabilitation Center		STREET ADDRESS, CITY, STATE, ZIP CODE 9200 Glenwater Drive Charlotte, NC 28262	

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 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** Based on observations and staff interviews, the facility failed to remove a dented can located on shelf ready for use and failed to reseal and label and date leftover food items stored for use. These practices occurred in 1 of 1 walk-in freezer and 1 of 1 dry storage room and had the potential to affect food served to residents. The findings included: An initial tour of the kitchen occurred on 7/21/25 at 10:09 AM. The following concerns were identified:a. Items in the walk-in freezer that were open to air and not resealed but labeled included: -one 15.33 pound (lb.) box of Texas Toast bread, dated 7/11/25-one 7.93lb box of churros, dated 10/24/25 Items in the walk-in freezer that were open to air, not resealed, and not labeled included:-one18.9lb box of [NAME] cheese omelets -one 20lb box of cookie dough ballsb. Items in the dry storage area that were opened and resealed but not dated included:-one bag of brown sugar-one 22.6-ounce (oz) bag of brown gravy mix -one 31oz bag of white sugar -one 160oz bag of elbow macaroni -one 57oz box of complete mashed potatoes d. One 105oz can of pears on the rack in the dry storage area for use was dented on the bottom sealAn interview with the Dietary Manager (DM) on 7/24/25 at 11:11 AM was conducted. She explained kitchen staff were instructed to rewrap items in the dry storage area after use and date them with a seven-day expiration date. The DM stated the food items in the freezer followed a guide with use by dates specific to the food. She stated the staff forgot to reseal and date the items. The DM stated the dented can was removed and sent back to the distributor for credit.An interview with the Administrator on 7/24/25 at 1:26 PM was conducted. She stated she had the expectation that kitchen staff follow the policies and procedures for proper food storage.</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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