STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	FCL017056	A. BUILDING: _____ B. WING _____	07/14/2016

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
ABUNDANT LIVING # 2	3816 CHERRY GROVE ROAD ELON, NC 27244

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
C 000	Initial Comments The Adult Care Licensure Section and Caswell County Department of Social Services conducted an Annual Survey on 7/14/16.	C 000		
C 007	10A NCAC 13G .0206 Capacity 10A NCAC 13G .0206 Capacity (a) Pursuant to G.S. 131D-2(a)(5), family care homes have a capacity of two to six residents. (b) The total number of residents shall not exceed the number shown on the license. (c) A request for an increase in capacity by adding rooms, remodeling or without any building modifications shall be made to the county department of social services and submitted to the Division of Facility Services, accompanied by two copies of blueprints or floor plans. One plan showing the existing building with the current use of rooms and the second plan indicating the addition, remodeling or change in use of spaces showing the use of each room. If new construction, plans shall show how the addition will be tied into the existing building and all proposed changes in the structure. (d) When licensed homes increase their designed capacity by the addition to or remodeling of the existing physical plant, the entire home shall meet all current fire safety regulations. (e) The licensee or the licensee's designee shall notify the Division of Facility Services if the overall evacuation capability of the residents changes from the evacuation capability listed on the homes license or of the addition of any non-resident that will be residing within the home. This information shall be submitted through the county department of social services and forwarded to the Construction Section of the Division of Facility Services for review of any	C 007		

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C 007	Continued From page 1 possible changes that may be required to the building. This Rule is not met as evidenced by: Based on observations, interviews, and record reviews, the facility failed to assure the total number of residents living in the facility did not exceed the 6 resident capacity shown on the facility's license. The findings are: Observation of residents in the facility on 7/14/16 at 10:43a.m. revealed: -There were 7 men in the facility. -The 7th man was in resident room #6. Interview with a non-admitted resident, the 7th man, on 7/14/16 at 10:48a.m. revealed: -He had been living in the facility for 2 months -"My room is #6". -This gentleman is my roommate. (Resident #3). -The only medication he was taking was an Invega injection once a month. -He would be moving out to live in his own place in a couple of weeks. Based on review of the daily attendance record sheet for 7/16/16, the name the non-admitted resident was marked present from 7/1/16 - until 7/14/16. Review of 6 resident records provided, did not reveal a resident record for the non-admitted resident. Interview on 7/14/16 at 10:57a.m. with the personal care aide/medication aide (PCA/MA)	C 007		

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C 007	Continued From page 2	C 007		

revealed:
-The extra man in the building was not a resident here.
-He was from another facility.
-He seemed to get along with the other resdients and ther had been no behavior concern.
-He was quiet and got along with others.
-He comes here with the administrator.

Interview with a PCA/MA on 7/14/16 at 11:10a.m. revealed:
-The facility did not provide any care services for the non-admitted resident.
-The current census is 6 and excludes the non-admitted resident.
-They did not have a resident record in the facility for the non-admitted resident.
-The PCA/MA did not know of the non-admitted resident's diagnoses or anything about him.

Interview with the administrator on 7/14/2016 at 11:50a.m. revealed:
-The non-admitted resident does not live in this facility.
-He was admitted at another facility.
-The administrator picked him up on my way in to this facility and would bring him back to his facility in the evening.
-He had promised his mother to do that for him because he told the administrator there was a bed bug problem in the other facility.
-He sleeps in my office here or uses one of those beds I have in the extra rooms in the facility when there is nobody using them.
-The non-admitted resident was suffering from Schizophrenia and asthma.
-He ate lunch at the facility on 7/14/16 and the administrator would probably feed him again when he took him out in his truck today.
-He would be out to live in his own place in the

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C 007	Continued From page 3	C 007		

next 2-3 weeks.
Interview on 7/14/16 at 11:45a.m. with the non-admitted resident revealed:
-He slept here on the bed, had his clothes in the chest of drawers and shirts hanging on the curtain rod.
- He had just gotten a new blanket from his mother for his bed here.
-Sometimes this facility did not feed them enough food.
-They gave out snacks at 10a.m., 2p.m. and 7p.m..
- His laundry was taken care of for him. They "insist" on doing his laundry even though he was capable of doing it for himself.
-He did not like it at the facility he came from and the administrator brought him here about 2 1/2 months ago.

Observation on 7/14/16 at 11:57 a.m.with the non-admitted resident in his bedroom revealed:
-He showed all of his clothes in his dresser and his shirts hanging on the curtain rod.
-There were miscellaneous personal items in the room.
-His bed had been made up with sheets and a green blanket.
-The dresser he stood next to had a drawer open with clothes were folded inside.
-The non-admitted resident put on a new shirt and sprayed himself with body scent he took from the dresser.
Interview on 7/14/16 at 2:20 p.m. with the PCA/MA revealed:
-The non-admitted resident did nto eather nad received no medications here.
-She did not know about his laundry as it was usally washed on the night shift.
-The non-admitted resident came from another facility and the administrator took him around with

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C 007	Continued From page 4 him during the day. -She did not know if he slept in the facility as she did not work that shift. Interview on 7/14/16 at 12:30p.m. with 4 facility residents revealed: -The extra man in the facility (the non-admitted resident) had been there about 2 months. -He slept and ate here. -He was the roomate of Resident #3 and resided in room #6. -He got along with them and there had not been any behavior problems with the non-admistted resident. Interview on 7/14/16 at 5:40p.m. with the administrator revealed: -The non-admitted resident was admitted at another facility. - The non-admitted resident did not like it there so the administrator took him around with him in his truck. -He had about one more week until his discharge notice would be completed at the other facility. -His family had another place for him to stay. -He did not stay at this facility. -The admintrator kept the non-admitted resident's things here because he liked to change his clothes often and the admintrator was at this facilty often. -The non-admitted resident would take a nap in his office or an empty bed where available. -He was aware of any concering behaviors with the non-admitted resident. -He had reveiwed his record at the othe facility and decided it would be alright to take him into other facilities of the administrator. -He would not knowingly put other residents at risk.	C 007		

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C935	G.S. § 131D-4.5B (b) ACH Medication Aides;Training and Competency G.S. § 131D-4.5B (b) Adult Care Home Medication Aides; Training and Competency Evaluation Requirements. (b) Beginning October 1, 2013, an adult care home is prohibited from allowing staff to perform any unsupervised medication aide duties unless that individual has previously worked as a medication aide during the previous 24 months in an adult care home or successfully completed all of the following: (1) A five-hour training program developed by the Department that includes training and instruction in all of the following: a. The key principles of medication administration. b. The federal Centers for Disease Control and Prevention guidelines on infection control and, if applicable, safe injection practices and procedures for monitoring or testing in which bleeding occurs or the potential for bleeding exists. (2) A clinical skills evaluation consistent with 10A NCAC 13F .0503 and 10A NCAC 13G .0503. (3) Within 60 days from the date of hire, the individual must have completed the following: a. An additional 10-hour training program developed by the Department that includes training and instruction in all of the following: 1. The key principles of medication administration. 2. The federal Centers of Disease Control and Prevention guidelines on infection control and, if applicable, safe injection practices and procedures for monitoring or testing in which bleeding occurs or the potential for bleeding exists.	C935		

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C935	Continued From page 6 b. An examination developed and administered by the Division of Health Service Regulation in accordance with subsection (c) of this section. This Rule is not met as evidenced by: Based on interview and record review, the facility failed to assure one of two medication aides (Staff B) sampled had a medication administration clinical skills evaluation completed before passing medications in the facility. The findings are: Review of the employee record for Staff B revealed: - A hire date was not listed. - Staff B was hired as a personal care aide/medication aide (PCA/MA). - There was no documentation of a medication administration clinical skills evaluation. - Staff B's employee record revealed she had passed the medication administration written test on 3/21/14. - She had 15 hour medication administration training on 1/05/16. Interview on 7/14/16 at 10:00 a.m. with Staff B revealed: - She was hired within the last week. - Her duties included medication administration, personal care, cooking and supervising residents. - She had medication administration training and had passed the medication test. - She thought she had completed the medication clinical skills evaluation when she started working, but there was so much paperwork being new she was not sure. - She had been passing medications in the facility since she started.	C935		

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C935	Continued From page 7 Interview on 7/14/16 at 5:20 p.m. with the administrator revealed: - All new medication staff got their medication administration clinical skills evaluation by their nurse. - It should be in her file. - He would look for it in another file. No documention of Staff B's medication administration clinical skills evaluation was provided by the end of the survey.	C935		
C992	G.S. § 131D-45 G.S. § 131D-45. Examination and screening for G.S. § 131D-45. Examination and screening for the presence of controlled substances required for applicants for employment in adult care homes. (a) An offer of employment by an adult care home licensed under this Article to an applicant is conditioned on the applicant's consent to an examination and screening for controlled substances. The examination and screening shall be conducted in accordance with Article 20 of Chapter 95 of the General Statutes. A screening procedure that utilizes a single-use test device may be used for the examination and screening of applicants and may be administered on-site. If the results of the applicant's examination and screening indicate the presence of a controlled substance, the adult care home shall not employ the applicant unless the applicant first provides to the adult care home written verification from the applicant's prescribing physician that every controlled substance identified by the examination and screening is prescribed by that physician to treat the applicant's medical or	C992		

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C992	Continued From page 8 psychological condition. The verification from the physician shall include the name of the controlled substance, the prescribed dosage and frequency, and the condition for which the substance is prescribed. If the result of an applicant's or employee's examination and screening indicates the presence of a controlled substance, the adult care home may require a second examination and screening to verify the results of the prior examination and screening. This Rule is not met as evidenced by: Based on interview and record review the facility failed to assure one (Staff B) of and of two personal care aides/medication aides (PCA/MA) sampled had a controlled substance screen prior to hire in the facility. The findings are: Review of the employee record for Staff B revealed: - A hire date was not listed. - Staff B was hired as a PCA/MA. - There was no documentation of controlled substance screening. Interview on 7/14/16 at 10:00 a.m. with Staff B revealed: - She was hired within the last week at this facility. - Her duties included medication administration, personal care, cooking and supervising residents. - When she started working, but there was so much paperwork being new she was not sure if she had a controlled substance screen. She thought she must have had one. Interview on 7/14/16 at 5:20 p.m. with the administrator revealed:	C992		

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C992	Continued From page 9 - All new staff had controlled substance screening. - Staff B had the screening and he would look for it in another file. No documentation of a controlled substance screen for Staff B prior to hire was provided by the end of the survey.	C992		