

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>HAL078083</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>07/29/2016</b>
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NAME OF PROVIDER OR SUPPLIER  <b>RED SPRINGS ASSISTED LIVING</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>1301 E. FOURTH AVENUE RED SPRINGS, NC 28377</b>
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(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
D 000	Initial Comments  The Adult Care Licensure Section conducted an annual survey on July 28-29, 2016.	D 000		
D 131	<p>10A NCAC 13F .0406(a) Test For Tuberculosis</p> <p>10A NCAC 13F .0406 Test For Tuberculosis (a) Upon employment or living in an adult care home, the administrator and all other staff and any live-in non-residents shall be tested for tuberculosis disease in compliance with control measures adopted by the Commission for Health Services as specified in 10A NCAC 41A .0205 including subsequent amendments and editions. Copies of the rule are available at no charge by contacting the Department of Health and Human Services Tuberculosis Control Program, 1902 Mail Service Center, Raleigh, NC 27699-1902.</p> <p>This Rule is not met as evidenced by: Based on record review and interview, the facility failed to ensure that 1 of 3 sampled staff (Staff C) was tested upon employment for tuberculosis (TB) disease with the two-step TB skin test in compliance with control measures adopted by the Commission for Health Services.</p> <p>The findings are:</p> <p>Review of Staff C's personnel record revealed: -She was hired on 9/20/10 as a Supervisor-in-Charge (SIC). -She had two TB skin tests in 7/1/07 and 7/22/07 with readings of zero millimeter. -She did not have any TB skin test upon hire to the current facility.</p> <p>Interview with Business Office Manager (BOM) on 7/29/16 at 5:30 P.M. revealed: -She was responsible for making sure that all</p>	D 131		

Division of Health Service Regulation LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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D 131	<p>Continued From page 1</p> <p>staff TB skin tests are done and up to date.</p> <p>-She was not the BOM at the time Staff C was hired in the year 2010.</p> <p>-No one has ever mentioned anything about Staff C not having had a two-step TB skin when she was hired at this facility in the year 2010.</p> <p>-The facility's policy and procedure for any new hire was that they must have one TB skin test before hire or within 12 months of hire and the second TB skin test about two weeks after hire.</p> <p>-She makes sure that new hires have at least their first TB skin test before she even puts them in the time clock.</p> <p>-New hires have to bring in proof of their first TB skin test and direct deposit information before the BOM sends corporate a start date for badge number.</p> <p>Interview with Executive Director (ED) on 7/29/16 at 5:15 P.M. revealed:</p> <p>-She spoke with prior BOM concerning TB skin test for Staff C and was told by BOM that she spoke with the County, who told her that because Staff C had worked at the same facility for so long and had never worked anywhere else that she did not need to have a two-step TB skin test done, that her prior two-step TB skin test would just transfer to the current facility.</p> <p>-The policy and procedure was that before new staff are hired they need to have the first step of the two-step TB skin test and after hire they receive the second step.</p> <p>-The BOM was responsible for making sure that all staff's TB skin tests were done and up to date.</p>	D 131		
D 234	<p>10A NCAC 13F .0703(a) Tuberculosis Test, Medical Exam &amp; Immunizatio</p> <p>10A NCAC 13F .0703 Tuberculosis Test, Medical</p>	D 234		

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D 234	<p>Continued From page 2</p> <p>Examination &amp; Immunizations (a) Upon admission to an adult care home, each resident shall be tested for tuberculosis disease in compliance with the control measures adopted by the Commission for Health Services as specified in 10A NCAC 41A .0205 including subsequent amendments and editions. Copies of the rule are available at no charge by contacting the Department of Health and Human Services, Tuberculosis Control Program, 1902 Mail Service Center, Raleigh, North Carolina 27699-1902.</p> <p>This Rule is not met as evidenced by: Based on record review and interview, the facility failed to assure each resident had tuberculosis (TB) disease testing upon admission to the facility in compliance with the control measures adopted by the Commission for Health Services for 1 (Resident #5) of 5 sampled residents.</p> <p>The findings are:</p> <p>Review of Resident #5's Resident Register revealed date of admission was 1/11/12.</p> <p>Review of Resident #5's record revealed documentation of a TB skin test placed on 2/28/12 and read on 3/1/12 as negative.</p> <p>Interview with Resident #5 on 8/29/16 at 11:00 a.m. revealed she was non-interviewable due to diagnoses.</p> <p>Interview with the Executive Director (ED) on 8/29/16 at 4:00 p.m. revealed: -She could only find documentation of one TB skin test in Resident #5's record. -She thought Resident #5 had a 2-step TB skin test. -Resident #5 had been admitted to the facility,</p>	D 234		

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D 234	<p>Continued From page 3</p> <p>prior to her becoming the ED.</p> <p>-The facility's monitoring plan in place for residents' TB skin test was 1st step prior to admission and the 2nd step within 2-3 weeks of admission.</p> <p>-She was responsible for making sure the resident had the 1st step TB skin test, prior to admission.</p> <p>-The Resident Care Coordinator (RCC) was responsible for making sure the resident had the 2nd step TB skin test within 2-3 weeks of admission.</p> <p>-She was responsible for auditing the TB skin tests for residents.</p>	D 234		