STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	FCL017026	A. BUILDING: _____ B. WING _____	01/30/2018

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
L & L FAMILY CARE	3023 CHANDLER MILL ROAD PELHAM, NC 27311

(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 conducted an annual and a follow-up survey on January 30, 2018.	C 000		
C 367	10A NCAC 13G .1008(a) Controlled Substances 10A NCAC 13G .1008 Controlled Substances (a) A family care home shall assure a readily retrievable record of controlled substances by documenting the receipt, administration and disposition of controlled substances. These records shall be maintained with the resident's record and in such an order that there can be accurate reconciliation. This Rule is not met as evidenced by: Based on observations, interviews and record reviews, the facility failed to assure accurate controlled substance log for 1 of 3 sampled residents (Resident #2) were readily retrievable for a schedule IV controlled drug (Clonazepam). Review of Resident #2's current FL-2 dated 2/21/17 revealed: -Diagnoses included unspecified psychosis, hypertension, gastroesophageal reflux disease, and chronic constipation. -Medications orders included Clonazepam 0.5mg twice daily (Clonazepam is used to treat anxiety). Review of Resident #2's November and December 2017, and January 2018 Medication Administration Records (MARs) revealed: -There was a preprinted entry for Clonazepam 0.5mg twice daily at 8:00am and 8:00pm. -It was documented Clonazepam was administered twice daily from 11/1/17 through 1/29/18. -The 8:00am dose was documented as	C 367		

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C 367	Continued From page 1 administered on 1/30/18. Review of records for Resident #2 on 1/30/18 revealed: -There were two pharmacy labeled controlled substance logs for Clonazepam 0.5mg for December 2017 and November 2017 that were blank. -There was no January 2018 controlled substance log found in Resident #2's records. -There was no documentation of the receipt of the controlled substance Clonazepam for Resident #2. Interview with both Co-Administrators/Medication Aides on 1/30/18 at 3:30pm revealed: -Resident #2 was the only resident who took controlled medication at the facility. -They had control logs supplied by the pharmacy but they did not document Resident #2's Clonazepam administration on the control logs. -They could not give a reason why they did not use the control logs to keep an accurate account of Clonazepam administration. -They had only documented the administration of Resident #2's Clonazepam on the Resident #2's MARs. -They would begin documenting on Resident #2's MAR and control logs when they administered Clonazepam to Resident #2 from now on. Telephone interview with a pharmacist with the facility's contracted pharmacy on 2/2/18 at 9:04am revealed: -The pharmacy supplied the facility monthly with control logs for Resident #2's Clonazepam.	C 367		
C 934	G.S.131D-4.5B (a) ACH Infection Prevention Requirements	C 934		

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C 934	Continued From page 2 G.S. 131D-4.5B Adult Care Home Infection Prevention Requirements (a) By January 1, 2012, the Division of Health Service Regulation shall develop a mandatory, annual in-service training program for adult care home medication aides on infection control, safe practices for injections and any other procedures during which bleeding typically occurs, and glucose monitoring. Each medication aide who successfully completes the in-service training program shall receive partial credit, in an amount determined by the Department, toward the continuing education requirements for adult care home medication aides established by the Commission pursuant to G.S. 131D-4.5 This Rule is not met as evidenced by: Based on interviews and record reviews the facility failed to assure that 2 of 2 Medication Aides (Staff A and B) had completed the state mandated infection control training annually. The findings are: 1. Review of personnel record for Staff A revealed: -Staff A was hired at the facility on 4/25/96 as a Medication Aide (MA)/ Supervisor in Charge (SIC). -Staff A had an infection control training certificate dated April 2016. -There was no documentation of the state mandated infection control training for 2017. Interview with Staff A on 1/30/18 at 2:00 pm revealed:	C 934		

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C 934	Continued From page 3 -Staff A had not realize she had not completed the annual infection control training since April 2016. -The facility had a contracted nurse who did all the staff training for the facility. -The facility contracted nurse had asked Staff A in November 2017 about completing annual trainings. -Staff A told the facility contracted nurse she would complete all her annual trainings in the beginning of the New Year. -She had not completed the infection control training or any other annual trainings yet. -She had not contacted the facility's contracted nurse yet about completing any of her trainings because she had "too much going on right now". 2. Review of personnel record for Staff B revealed: -Staff B was hired at the facility on 4/25/96 as an Administrator/MA. -Staff B had an infection control training certificate dated April 2016. -There was no documentation of the state mandated infection control training for 2017. Interview with Staff B on 1/30/18 at 2:00 pm revealed: -Staff B had not realized he had not completed the annual infection control training since April 2016. -The facility had a contracted nurse who did all the staff trainings for the facility. -The facility contracted nurse had asked Staff B in November 2017 about completing the annual trainings. -Staff B told the facility contracted nurse he would complete all his annual trainings in the beginning of the New Year. -He had not completed the infection control	C 934		

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C 934	Continued From page 4 training or or any other annual trainings yet. -He had not contacted the facility contracted nurse yet about completing any of the trainings yet because he had "too much going on right now". Attempted telephone interview with the facility's contracted nurse on 1/30/18 at 4:34 pm was unsuccessful.	C 934		