STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	FCL060019	A. BUILDING: _____ B. WING _____	02/14/2018

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
SHADY HARBOUR ADULT LIVING	908 TOM HUNTER ROAD CHARLOTTE, NC 28213

(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 the Mecklenburg County DSS conducted an Annual survey on February 14, 2018	C 000		
C 934	G.S.131D-4.5B (a) ACH Infection Prevention Requirements 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 observations, interviews, and record reviews, the facility failed to provide mandatory, annual state approved infection control training for 3 of 3 sampled staff who had been employed for more than a year. The findings are: Observation on 2/14/18 of Staff B at 9:30 am revealed she obtained a fingerstick blood sugar (FSBS) using proper infection control techniques on 2 separate residents.	C 934		

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C 934	Continued From page 1 1. Review of personnel records for Staff A (Administrator) revealed: -She was the Administrator/medication aide (MA). -She became a MA on 7/27/00. -He had some infection control training certificates available. -The most recent infection control training was dated 10/25/16. Interview on 2/14/18 with Staff A at 1:50 pm revealed she had the infection control training in October 2016. Refer to interview on 2/14/18 with the Administrator at 1:50 pm. 2. Review of personnel records for Staff B revealed: -She was hired at the facility on 7/16/09 as a personal care aide (PCA). -She had annual infection control training certificates available. -The most recent infection control training was dated 10/25/16. Interview on 2/14/18 with Staff B at 11:50 am revealed she had the infection control training in October 2016. Refer to interview on 2/14/18 with the Administrator at 1:50 pm. 3. Review of personnel records for Staff C revealed: -She was hired at the facility on 4/30/11 as a MA. -She had annual infection control training certificates available. -The most recent infection control training was dated 10/25/16.	C 934		

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C 934	Continued From page 2 Interview on 2/14/18 with Staff C at 11:50 am revealed she had the infection control training in October 2016. Telephone interview on 2/14/18 with the Training Nurse at 11:45 am revealed: -She was and Registered Nurse (RN) responsible for providing the State mandated infection control training. -The last infection control training was done October 2016. -She provided a copy of the training roster to the facility after each class. -It was the responsibility of the facility to maintain the training records. Refer to interview on 2/14/18 with the Administrator at 1:50 pm. _____ Interview on 2/14/18 with Staff A at 1:50 pm revealed: -She was responsible for maintaining staff personnel records -She had not taken the infection control course since 10/25/16. -She did not know her infection control training expired in October 2017. -She was responsible for notifying the Training Nurse about the need to have annual training. -The nurse who taught infection control did not teach Staff A, B and C October 2017. -The annual infection control training was "missed" in October 2017. -Staff A, B and C had taken the infection control course yearly until 10/25/16. -She would ensure Staff B, C and herself get the required infection control training immediately.	C 934		