

Division of Health Service Regulation

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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL060150 | (X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____ | (X3) DATE SURVEY COMPLETED 06/13/2018 |
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NAME OF PROVIDER OR SUPPLIER
NORTHLAKE HOUSE

STREET ADDRESS, CITY, STATE, ZIP CODE
**9108-REAMES ROAD
CHARLOTTE, NC 28216**

| (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 |
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| D 000 | Initial Comments The Adult Care Licensure Section and the Mecklenburg County Department of Social Services conducted an annual survey on 06/12/18-06/13/18. | D 000 | | |
| D912 | G.S. 131D-21(2) Declaration of Residents' Rights G.S. 131D-21 Declaration of Residents' Rights Every resident shall have the following rights: 2. To receive care and services which are adequate, appropriate, and in compliance with relevant federal and state laws and rules and regulations. This Rule is not met as evidenced by: Based on observations, interviews, and record reviews, the facility failed to assure residents received care and services that are adequate, appropriate and in compliance with federal and state laws and rules and regulations related to competency evaluation of medication aides. The findings are: 1. Based on observations, interviews and record reviews, 2 of 4 medication aides (Staff B and Staff E) did not pass the medication aide test within the required 60 days of the clinical skills evaluation and continued to administer medications to residents. [Refer to tag 935 G.S. 131-4.5B (b) Adult Care Home Medication Aides; Training and Competency Evaluation Requirements (Type B Violation)]. | D912 | Responses to the cited deficiencies do not constitute an admission or agreement by the facility of the truth of the facts alleged or conclusions set forth in the statement of deficiencies or corrective action report. The Plan of Correction is prepared solely as a matter of compliance with state laws. It is the policy of Northlake House to assure every resident will receive care and services which are adequate, appropriate, and in compliance with relevant federal and state laws and regulations. The Executive Director (ED) and Director of Resident Care (DRC) will immediately audit all Medication Aide files for compliance to include medication aide testing within 60 days of clinical skills evaluation. The ED will review and retrain the DRC and BOM on regulations for Medication Aide Compliance. The BOM will maintain a tracking log for all staff files which includes medication aide files to assure compliance with med aide testing. The ED or designee will monitor all new medication aide hires for compliance for 3 months and then ongoing. | 6/13/18 6/14/18 6/14/18 6/13/18 |

Division of Health Service Regulation
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

Samuel Stone

TITLE

Executive Director

(X6) DATE

7/2/18

Reviewed and Accepted by CD on 07/23/18

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| D935 | Continued From page 1 | D935 | | |
| D935 | <p>G.S. § 131D-4.5B(b) ACH Medication Aides; Training and Competency</p> <p>G.S. § 131D-4.5B (b) Adult Care Home Medication Aides; Training and Competency Evaluation Requirements.</p> <p>(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:</p> <p>(1) A five-hour training program developed by the Department that includes training and instruction in all of the following:</p> <ol style="list-style-type: none"> 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. <p>(2) A clinical skills evaluation consistent with 10A NCAC 13F .0503 and 10A NCAC 13G .0503.</p> <p>(3) Within 60 days from the date of hire, the individual must have completed the following:</p> <ol style="list-style-type: none"> a. An additional 10-hour training program developed by the Department that includes training and instruction in all of the following: <ol style="list-style-type: none"> 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 | D935 | <p>The community will review with all staff and resign the Declaration of Resident Rights</p> <p>Schedule Resident Right's Training with our Ombudsman, Lindsay Tice</p> | 7/23/18 8/22/18 |

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| D935 | <p>Continued From page 2</p> <p>exists.</p> <p>b. An examination developed and administered by the Division of Health Service Regulation in accordance with subsection (c) of this section.</p> <p>This Rule is not met as evidenced by: TYPE B VIOLATION</p> <p>Based on observations, interviews and record reviews, 2 of 4 medication aides (Staff B and Staff E) did not pass the medication aide test within the required 60 days of the clinical skills evaluation and continued to administer medications to residents.</p> <p>The findings are:</p> <p>1. Review of Staff B's employee file revealed: -Staff B was hired as a medication aide (MA) on 01/16/18. -Staff B completed the required 5-hour MA training on 01/23/18 and the 10-hour training on 01/26/18. -Staff B had a medication clinical skills validation completed on 02/06/18 and 03/01/18. -There was no documentation in the employee file of Staff B taking the Medication Aide exam.</p> <p>Review of Staff B's Medication Aide Exam documentation, obtained by the facility on 06/13/18, revealed she had not successfully completed the written exam on 05/22/18.</p> <p>Interview with Staff B on 06/13/18 at 11:35am revealed: -She was working as a MA today (06/13/18).</p> | D935 | | |

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| D935 | <p>Continued From page 3</p> <p>-She had recently taken the MA test, and assumed she "had passed because she hadn't gotten anything saying she had not passed." -She was unsure if the facility knew the result of her MA test.</p> <p>Interview with Staff B on 06/13/18 at 3:14pm revealed:</p> <p>-She was hired at the facility in December of 2017. -She started employment as a Personal Care Aide (PCA) in January 2018 and began training as a MA shortly thereafter. -The MA training included online courses, the 10 and 15-hour classes, as well as diabetic training. -She mentored with a senior MA for a week, shadowing her on the medication cart and reviewing medication procedures. -The Registered Nurse (RN), contracted by the facility, completed the medication administration clinical skills evaluation. -She registered for the state approved medication administration test for unlicensed personnel in February 2018 and failed the test (she was unsure of the date). -She received a letter in the mail informing her of the test results in February 2018. -She re-applied to take the medication administration test in May 2018. -She had not received any notification by mail regarding her test results from the May 2018 test. -She had moved recently and was unclear if the post office had her new address. -She did not know the test results could be obtained online. -She had performed duties as a MA since March 2018. -She had administered insulin subcutaneously and finger stick blood sugar (FSBS) readings on residents in the facility.</p> | D935 | | |

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| D935 | <p>Continued From page 4</p> <p>-"I did not know until today that I had not passed (the med test)".</p> <p>Interview with the Business Office Manager (BOM) on 06/13/18 at 3:05pm revealed:</p> <ul style="list-style-type: none"> - She was out of the office on leave from March 15, 2018 - May 9, 2018. -The facility did not usually hire new staff as a MA, but had made a few exceptions in the past few months. -She was not aware that Staff B had failed the medication aide written exam twice. -Usually the staff member would tell the Resident Care Director (RCD) if they passed the test once they had taken it, and the Resident Care Director (RCD) would alert her, and then she would check the online medication aide registry, and place the documenting of the passed test in their employee file. -She did not have a system in place for monitoring the requirements for MA's education, training and certification to ensure the facility was within required timeframes. <p>Interview with the RCD on 06/14/18 at 3:25pm revealed:</p> <ul style="list-style-type: none"> -In the past, the facility had only hired care staff as PCAs and then promoted them to MA once they felt comfortable, and once they had passed the MA test. -In the past several months, they had made some exceptions to this, due to high turnover rates of staff. -The facility had hired a few staff as MAs, who had reportedly passed medications in other states. -She was aware that if staff had not passed the MA test, they would need to do so within 60 days of having the medication aide skills validation completed. | D935 | | |

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| D935 | <p>Continued From page 5</p> <ul style="list-style-type: none"> -She had hired one MA who was not able to complete the test prior to the 60 days, so they had "pulled her off the cart" until she was able to take the test. -She was not aware that Staff B had failed the medication aide test twice. -She was not really involved in assuring the facility was in compliance with staff training and competency requirements, and relied on the BOM to make sure this was in compliance. -Recently, the facility had gotten a new administrator, and the BOM had been out on leave for several weeks, so some things had been overlooked. -The facility did have regional support during the BOM's absence for a few days a week, but things had still been missed. <p>Interview with the Administrator on 06/13/18 at 3:45pm revealed:</p> <ul style="list-style-type: none"> -He was hired on April 9, 2018. -The BOM had been out on leave from the time he was hired until May 9, 2018. -He was not yet familiar with the facility's process for tracking all the staff training and competency requirements to ensure they remained in compliance at all times. -He was not very familiar with Staff B, as she had worked mostly on 3rd shift and did not normally pass medications. -Staff B had recently switched to 1st shift, and had worked some as a MA. -He was not aware that Staff B was outside of the required timeframes for successfully passing the MA test. -He was not aware that Staff B had failed the MA test twice. If he had been aware that she had failed the test the first time, he would not have allowed her to pass medications anymore in the facility. | D935 | | |

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| D935 | <p>Continued From page 6</p> <p>-It was his expectation that staff would let the facility know once they had applied to take the MA test, let them know once they had been scheduled to take the test, and also make them aware of the result once the test was completed.</p> <p>-The BOM was responsible for follow-up with the Medication Aide Registry to ensure that the staff member had successfully passed the test.</p> <p>Telephone interview with the Adult Care Licensure Section, Medication Aide Testing Division, on 06/14/18 at 11:03am revealed:</p> <p>-Staff B had taken and failed the Medication Aide exam on three different occasions, on 02/20/18, 03/27/18, and 05/22/18.</p> <p>-Candidates received a letter within a week after they had taken the test that reflected if they passed the MA test.</p> <p>-Candidates were also told they could go online within a few days of taking the test, to find out if they had passed the exam.</p> <p>2. Review of Staff E's employee file revealed:</p> <p>-Staff E was hired by the facility on 03/14/18.</p> <p>-Staff E had not taken the medication aide exam.</p> <p>-Staff E completed the required 5-hour training on 3/22/18, and the 10-hour training on 03/20/18.</p> <p>-Staff E had a medication clinical skills validation completed by a RN on 03/22/18.</p> <p>Interview with Staff E on 06/14/18 at 3:40pm revealed:</p> <p>-She began working in the facility near the end of March 2018.</p> <p>-She moved here from Michigan, where she had been a medication aide (MA) at facilities in the past.</p> <p>-About 3 weeks ago, she sent in the fee to take the medication aide exam, but she had not heard anything about getting scheduled to take the</p> | D935 | | |

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| D935 | <p>Continued From page 7</p> <p>exam yet.</p> <p>-A regional nurse had completed the medication clinical skills validation with her, and told her what she needed to do to get scheduled to take the exam.</p> <p>-Prior to working in the facility she had administered narcotics, coumadin, synthroid, insulins, and checked blood sugar readings; the same tasks she had completed since working in this facility.</p> <p>-She was not aware she was outside of the window she had to complete and pass the medication aide exam.</p> <p>-She had completed the 5 and 10-hour medication aide training classes since working in the facility.</p> <p>-She had shadowed two MAs as part of her training initially for about two weeks.</p> <p>Interview with BOM on 06/13/18 at 3:05pm revealed:</p> <ul style="list-style-type: none"> - She was out of the office on leave from March 15, 2018 - May 9, 2018. - The facility did not usually hire new staff as a medication aide, but had made a few exceptions in the past few months. - She was not aware that Staff E was outside the required timeframe for completing the Medication Aide exam. -Usually the staff member will tell the Resident Care Director (RCD) if they passed the test once they have taken it, and the RCD will alert her, and then she will check, and place the documentation that the staff member has passed the test in their chart. -She does not have a system in place for monitoring the requirements for Medication Aides to assure the facility is within required timeframes. | D935 | | |

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| D935 | Continued From page 8 Interview with the RCD on 06/14/18 at 3:25pm revealed: -In the past, the facility had only hired care staff as nurse assistants (NA) and then promoted them to MA once they felt comfortable, and once they had passed the MA test. -In the past several months, they had made some exceptions to this, due to high turnover rates of staff. -The facility had hired a few staff as MAs, who had reportedly passed medications in other states. -She was aware that if staff had not passed the MA test, they would need to do so within 60 days of having the medication aide skills validation completed. -She was not aware that Staff E was outside the required timeframe in which she had to complete and pass the medication aide exam. If she had realized this, she would have removed her from the cart until she completed the test. -She was not really involved in assuring the facility was in compliance with staff training and competency requirements, and relied on the business office to make sure this was in compliance. -Recently, the facility had gotten a new administrator, and the business office manager had been out on leave for several weeks, so some things had been overlooked. -The facility did have regional support during the business office manager's absence for a few days a week, but things had still been missed. Interview with the Administrator on 06/13/18 at 3:45pm revealed: -He was hired on April 9, 2018. -The BOM had been out on leave from the time he was hired until May 9, 2018. -He was not yet familiar with the facility's process | D935 | | |

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| D935 | <p>Continued From page 9</p> <p>for tracking all the staff training and competency requirements to ensure they remained in compliance at all times.</p> <p>-He recalled Staff E telling him that she had administered medications for 13 years at other facilities. He was not aware that she had recently moved here from out of state and did not have certification to administer medications yet. Staff E had been hired only a few months before him, so he was not familiar with the hiring process with her.</p> <p>-He was not aware that Staff E was outside of the required timeframes for successfully passing the MA test.</p> <p>-It was his expectation that staff would let the facility know once they had applied to take the MA test, let them know once they had been scheduled to take the test, and also make them aware of the result once the test was completed.</p> <p>-The BOM was responsible for follow-up to ensure that the staff member had successfully passed the test.</p> <hr/> <p>The failure of the facility to assure 2 of 4 medication aides (Staff B and Staff E) had successfully completed the medication aide exam and continued to allow them to administer medications was detrimental to the health and safety of the residents and constitutes a Type B Violation.</p> <hr/> <p>The facility provided a plan of protection in accordance with G.S. 131D-34 on 06/13/18 for this violation.</p> <p>CORRECTION DATE FOR THE TYPE B VIOLATION SHALL NOT EXCEED JULY 28, 2018.</p> | D935 | | |

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