STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL041081	A. BUILDING: _____ B. WING _____	R 04/11/2019

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
RICHLAND PLACE	3823 LAWNDALE DRIVE GREENSBORO, NC 27455

(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 and the Randolph County Department of Social Services conducted a follow-up survey on April 10-11, 2019.	{D 000}		
D 235	10A NCAC 13F .0703 (b) Tuberculosis Test, Medical Examination And Im 10A NCAC 13F .0703 Tuberculosis Test, Medical Examination And Immunizations (b) Each resident shall have a medical examination prior to admission to the facility and annually thereafter. (c) The results of the complete examination required in Paragraph (b) of this Rule are to be entered on the FL-2, North Carolina Medicaid Program Long Term Care Services, or MR-2, North Carolina Medicaid Program Mental Retardation Services, which shall comply with the following: This Rule is not met as evidenced by: Based on record reviews and interviews, the facility failed to assure 1 of 5 residents sampled (#5) had an annual FL-2 that was signed by their primary care provider (PCP). The findings are: Review of Resident #5's most recent FL-2 dated 03/30/17 revealed diagnoses included Alzheimer's dementia, hypertension, insomnia, high cholesterol, and osteoporosis. Review of Resident #5's Resident Register revealed the resident was admitted to the facility on 05/10/17.	D 235		

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D 235	Continued From page 1	D 235		

Review of the Resident #5's record revealed:
-There was a FL-2 available for review, but it was not dated or signed by a physician.
-There was a "Physician's Orders" list documented from the pharmacy that was signed and dated by Resident #5's physician on 09/17/18; the list documented Resident #5's current medications.
-There was a care plan for Resident #5 dated 11/09/18.

Telephone interview on 04/11/19 at 12:30 pm with the Pharmacist at Resident #5's pharmacy revealed:
-Resident #5's physician submitted orders for medications via hard copy of prescription which were brought in by Resident #5's family member.
-The pharmacy was contacted by the resident's family member when a medication needed to be refilled.
-The pharmacy had no documentation of a FL2 for Resident #5.

Interview with the Resident Care Coordinator (RCC) on 04/11/19 at 12:50 pm revealed:
-Resident #5 saw an outside physician; Resident #5 also used a pharmacy that was not the facility's contracted pharmacy.
-The medication aide (MA) wrote new FL-2s for residents.
-The MA that wrote Resident #5's unsigned and undated FL-2 had been on a leave for a month; she did not know when the MA wrote the FL-2.
-The MA that wrote Resident #5's unsigned and undated FL-2 should have sent the FL-2 to Resident #5's physician for a signature.
-She did not know why the MA failed to send the FL-2 to the physician for a signature.
-The Care Specialist Manager (CSM) was a Registered Nurse (RN); the CSM, RN was

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D 235	Continued From page 2 supposed to conduct resident record audits. Interview with the CSM, RN on 04/11/19 at 3:25 pm revealed: -She had worked at the facility since October 2018. -She thought the RCC had kept up with maintaining current FL-2s for every resident. -She had been conducting resident record audits for the last three months. -She had found the unsigned FL-2 in Resident #5's record on 04/08/19 when she audited Resident #5's resident record; she had sent the FL-2 to the physician for a signature on 04/08/19, but had not gotten it back. Interview with the Administrator on 04/11/19 at 4:15 pm revealed: -The CSM, RN and the RCC were working together to conduct the audits and identify any issues with the resident records. -The facility staff had begun resident record audits about three months ago; she knew Resident #5's FL-2 needed signatures and the FL-2 had been sent to the physician on 04/08/19. -She spoke to Resident #5's family member on 04/11/19 and Resident #5 would begin to see the facility's contracted physician the following week. -She understood the importance of having an accurate and up to date FL-2 with a physician's signature; she would move forward with a system to update FL-2s annually. Attempted interview with Resident #5's primary care physician on 04/11/19 at 10:25 am were unsuccessful. Based on observations, interviews and record reviews it was determined Resident #5 was not interviewable.	D 235		

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