Mt. Valley Living Center

1025 Lamb Road, Lexington, NC 27295
336-853-7670 phone
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September 24, 2019

Keturah EH Hawkins, PhD
NC Department of Health and Human Services
2708 Mail Service Center
Raleigh, NC 27699-2708

Dear Ms. Hawkins:

This letter is in response to your corrective action visit dated 8/28/2019.

Violation: D132- TB test

Corrective Action: Staff A has an appointment for TB test on Monday there was some confusion between the director and Staff A prior to today regarding the appointment for TB. Staff B did receive a second tb test that was read on 9/6/2019. Staff C decreased her hours and is schedule to work today, we have no proof of second tb test as of 9/24/2019. Staff C will have to give us an appointment time by 9/26/2019. We are offering to let staff borrow money for the tb test so they can get the test done more timely. New hire SW does have two tb test in review of chart. The plan of protection states that the director will check monthly. The administrator is instructing the director to check the charts monthly for 3 months for compliance and all new hires need to have tb test prior to employment so the we can try to stay in compliance with this rule of 7 days after employment on TB Test. The director is responsible for compliance in this rule area. Thank you for guidance in this area during your visit.

Time Frame: October 1, 2019

Sincerely,

Tisha Tuttle
Administrator

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL085003	A. BUILDING: _____ B. WING _____	R 08/28/2019

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
MOUNTAIN VALLEY LIVING CENTER	1135 TAYLOR ROAD WESTFIELD, NC 27053

(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 completed a follow-up survey on 08/28/19.	{D 000}	see Attached letter	
{D 132}	10A NCAC 13F .0406(b) Test For Tuberculosis 10A NCAC 13F .0406 Test For Tuberculosis (b) There shall be documentation on file in the home that the administrator, all other staff and any live-in non-residents are free of tuberculosis disease that poses a direct threat to the health or safety of others. This Rule is not met as evidenced by: FOLLOW-UP TO TYPE B VIOLATION The Type B Violation was abated. Non-compliance continues. Based on record reviews and interviews the facility failed to assure that 3 of 3 sampled staff (Staff A, B, and C) were tested for tuberculosis (TB) disease upon hire. The findings are: 1. Review of Staff A's, Medication Aide (MA)/Personal Care Aide (PCA) personnel record revealed: -Staff A was hired on 04/05/19. -There was documentation of a TB skin test with negative results was read on 07/05/18. -There was no documentation of a second TB skin test after Staff A was hired. Interview with the Director on 08/28/19 at 11:44am revealed: -The Director was responsible to ensure TB skin test were completed for all employees. -She was not the Director when Staff A was hired.	{D 132}		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE: Trisha Tuttle — TITLE: Adm — (X6) DATE: 9-24-2019

Reviewed and accepted 09/27/19 KHH

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{D 132}	Continued From page 1 -She thought Staff A had the required TB skin tests. -She did not check staff records to ensure the required TB skin tests were completed. Interview with Staff A on 08/28/19 at 1:30pm revealed: -Staff A worked at the facility as a MA/PCA. -She had two TB skin tests prior to being hired at the facility and thought those tests were sufficient for employment. -No one at the facility had informed her that she needed a second TB skin test. The Administrator was not available for interview. 2. Review of Staff B's, Medication Aide (MA)/Personal Care Aide (PCA) personnel record revealed: -Staff B was hired on 06/19/18. -There was documentation of a TB skin test with negative results was read on 09/02/17. -There was no documentation of a TB skin test after Staff B was hired. Interview with the Director on 04/10/19 at 10:15 am revealed: -The Director was responsible to ensure TB skin test were completed for all employees. -Staff B worked as a MA/PCA. -Staff B was hired prior to her becoming the the Director. -She had no idea that Staff B needed a second TB skin test. -She ensured that Staff B would obtain a second TB skin test as soon as possible. Staff B was not available for interview. The Administrator was not available for interview.	{D 132}		

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{D 132}	Continued From page 2 3. Review of Staff C's, Personal Care Aide (PCA) personnel record revealed: -Staff C was hired on 07/15/18. -There was documentation of a TB skin test with negative results was read on 02/28/19. -There was no documentation of a second TB skin test after Staff B was hired. Interview with the Director on 08/28/19 at 11:46am revealed: -She was responsible to ensure Staff C's TB skin test were completed. -Staff C worked as a PCA. -She hired Staff C in July 2019. -Staff C had not obtained a second TB skin test. -She thought that she had thirty days after Staff C was hired to obtain the second TB skin test. -Staff C had been scheduled to get a second TB skin test last week, but Staff C did not have the money to obtain the test. -Staff C was rescheduled to obtain the second TB skin test this afternoon after work. Interview with Staff C, PCA on 08/28/19 at 10:48am revealed: -She worked at the facility as a PCA since July 2019. -She had a TB skin test prior to being hired at the facility. -She was aware that she needed a second TB skin test. -She was scheduled to obtain a second TB skin test today after work. -She needed the money to obtain the TB skin test and had put off getting the test done until today. The Administrator was not available for interview.	{D 132}		