

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>FCL064034</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>12/17/2019</b>
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NAME OF PROVIDER OR SUPPLIER  <b>A HEART 2 CARE FAMILY CARE HOME</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>307 N PINE STREET SPRING HOPE, NC 27882</b>
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(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 initial survey on 12/17/19.	C 000		
C 140	<p>10A NCAC 13G .0405(a)(b) Test For Tuberculosis</p> <p>10A NCAC 13G .0405 Test For Tuberculosis (a) Upon employment or living in a family care home, the administrator, all other staff and any live-in non-residents shall be tested for tuberculosis disease in compliance with control measures adopted by the Commission for Health Services as specified in 10A NCAC 41A .0205 including subsequent amendments and editions. Copies of the rule are available at no charge by contacting the Department of Health and Human Services. Tuberculosis Control Program, 1902 Mail Service Center, Raleigh, NC 27699-1902. (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.</p> <p>This Rule is not met as evidenced by: Based on record reviews and interviews, the facility failed to assure 1 of 3 sampled staff (Staff A) was tested upon hire for Tuberculosis (TB) disease.</p>	C 140		

Division of Health Service Regulation LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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C 140	<p>Continued From page 1</p> <p>The findings are:</p> <p>Review of Staff A's, medication aide (MA) personnel record revealed: -She was hired on 11/05/19. -There was documentation of a TB skin test reading as positive on 11/15/05 and a chest X-ray completed on 11/29/05 which showed no active sign of inflammatory disease. -There was no documentation of a TB skin test upon hire.</p> <p>Interview with Staff A on 12/17/19 at 5:00 pm revealed: -The Administrator administered a TB test. -She had the results read at the local health department. -She did not provide the Administrator with a copy of the TB skin test results. -The TB skin test results were negative. -She had not had a chest X-ray completed within the last five years.</p> <p>Interview with the Administrator on 12/17/19 at 12:57pm revealed: -Staff A had provided documentation of the 11/15/05 and 11/29/05 results on 11/13/19. -She administered a TB skin test to Staff A on 12/12/19. -Staff A did not submit a copy of the TB skin test results. -Staff A was expected to have the TB results read at the local health department. -Staff A was expected to submit her TB results. -The staff was responsible for providing a TB skin test prior to hire. -The Administrator was a Licensed Practical Nurse (LPN). -The Administrator was responsible for assuring all staff completed a TB test prior to hire.</p>	C 140		

Division of Health Service Regulation

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C 147	<p>10A NCAC 13G .0406(a)(7) Other Staff Qualifications</p> <p>10A NCAC 13G .0406 Other Staff Qualifications (a) Each staff person of a family care home shall: (7) have a criminal background check in accordance with G.S. 114-19.10 and G.S. 131D-40;</p> <p>This Rule is not met as evidenced by: TYPE B VIOLATION</p> <p>Based on record reviews and interviews, the facility failed to assure 2 of 3 sampled staff, (Staff A and Staff B), had a statewide criminal background check completed upon hire.</p> <p>The findings are:</p> <ol style="list-style-type: none"> <li>Review of Staff A's, medication aide (MA) personnel record revealed: -Staff A was hired on 11/05/19. -There was no documentation of a signed consent for a criminal background check for Staff A. -There was documentation of an online state-wide search completed on 12/11/19. -There was no name of the company printed on the 12/11/19 online state-wide search document.</li> </ol> <p>Interview with Staff A on 12/17/19 at 5:00pm revealed: -She had worked as a MA for almost two months. -Staff A had completed a criminal background check last week. -The Administrator completed the online state-wide search on 12/11/19. -She did not know if the criminal background check completed was a state-wide background</p>	C 147		

Division of Health Service Regulation

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C 147	<p>Continued From page 3</p> <p>check.</p> <p>Interview with the Administrator on 12/17/19 at 12:57pm revealed: -She thought the online state criminal background search for Staff A could be used. -She knew a state wide criminal background check was needed for all staff upon hire. -"I had just gotten around to completing the criminal background check last week."</p> <p>Refer to interview with Administrator on 12/17/19pm at 12:57pm.</p> <p>2. Review of Staff B's, personal care aide (PCA) personnel record revealed: -Staff B was hired on 11/16/19. -There was no documentation of a signed consent for a criminal background check for Staff B. -There was no documentation of a criminal background check.</p> <p>Interview with Staff B on 12/17/19 at 5:09pm revealed: -She had worked as a PCA for two or three weeks. -She had not completed a criminal background check. -She had not been asked to complete a criminal background check.</p> <p>Interview with the Administrator on 12/17/19 at 12:57pm revealed: -She did not complete a criminal background check for Staff B. -"I just had not gotten around to completing the criminal background."</p> <p>Refer to interview with Administrator on</p>	C 147		

Division of Health Service Regulation

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C 147	<p>Continued From page 4</p> <p>12/17/19pm at 12:57pm.</p> <p>Interview with the Administrator on 12/17/19 at 12:57pm revealed:</p> <ul style="list-style-type: none"> <li>-She was responsible for maintaining personnel records.</li> <li>-She knew criminal background checks were required for the staff.</li> <li>-She was responsible for completing the state wide criminal background checks for all staff upon to hire.</li> </ul> <p>The failure of the facility to assure 2 of 3 sampled staff, (Staff A and Staff B), had a statewide criminal background check completed upon hire was detrimental to the health, safety and welfare of the residents and constitutes a Type B Violation.</p> <p>The facility provided a plan of protection in accordance with G.S. 131D-34 on 12/20/19 for this violation.</p> <p>CORRECTION DATE FOR THE TYPE B VIOLATION SHALL NOT EXCEED JANUARY 31, 2020.</p>	C 147		
C 912	<p>G.S. 131D-21(2) Declaration of Residents' Rights</p> <p>G.S. 131D-21 Declaration of Resident's Rights Every resident shall have the following rights:</p> <p>2. To receive care and services which are adequate, appropriate, and in compliance with relevant federal and state laws and rules and regulations.</p> <p>This Rule is not met as evidenced by: Based on observations, record reviews, and</p>	C 912		

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C 912	<p>Continued From page 5</p> <p>interviews, the facility failed to ensure residents received care and services which are adequate, appropriate, and in compliance with relevant federal and state laws and rules and regulations related to other staff qualifications and Adult Care Home medication aide training and competency evaluation requirements.</p> <p>1. Based on record reviews and interviews, the facility failed to assure 2 of 3 sampled staff, (Staff A and Staff B), had a statewide criminal background check completed upon hire. [Refer to Tag 147 10A NCAC 13G .0406(a)(7) Other Staff Qualifications (Type B Violation)].</p> <p>2. Based on interviews and record reviews, the facility failed to assure 2 of 2 sampled medication aides (Staff A and Staff B) who were administering medications had taken and completed the medication clinical skills competency validation checklist, completed employee verification, or completed medication aide training. [Refer to Tag 935 G.S. 131D-4.5B(b) ACH Medication Aide; Training and Competency (Type B Violation)].</p>	C 912		
C935	<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</p>	C935		

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C935	<p>Continued From page 6</p> <p>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"> <li>a. The key principles of medication administration.</li> <li>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.</li> </ol> <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"> <li>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"> <li>1. The key principles of medication administration.</li> <li>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 exists.</li> </ol> </li> <li>b. An examination developed and administered by the Division of Health Service Regulation in accordance with subsection (c) of this section.</li> </ol> <p>This Rule is not met as evidenced by: TYPE B VIOLATION</p> <p>Based on interviews and record reviews, the facility failed to assure 2 of 2 sampled medication</p>	C935		

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C935	<p>Continued From page 7</p> <p>aides (Staff A and Staff B) who were administering medications had taken and completed the medication clinical skills competency validation checklist, completed employee verification, or completed medication aide training.</p> <p>The findings are:</p> <ol style="list-style-type: none"> <li>Review of Staff A's, medication aide (MA) personnel record revealed: <ul style="list-style-type: none"> <li>-Staff A was hired on 11/05/19.</li> <li>-There was documentation Staff A had passed the medication aide written exam on 10/13/09.</li> <li>-There was no documentation of MA employment verification within the previous 24 months.</li> <li>-There was no documentation of medication training of 5 hours, 10 hours or 15 hours.</li> <li>-There was no documentation of a medication clinical skills competency validation checklist.</li> </ul> </li> </ol> <p>Review of two residents' medication administration records (MARs) for November 2019 revealed Staff A documented administration of medications on 11/17/19 and 11/24/19.</p> <p>Review of two residents' MARs for December 2019 revealed Staff A documented administration of medications on 12/01/19, 12/04/19 and 12/07/19.</p> <p>Interview with a resident on 12/17/19 at 5:18pm revealed: <ul style="list-style-type: none"> <li>-Staff A administered medications to him.</li> <li>-He could not remember the days and times when Staff A had administered medication to him.</li> </ul> </p> <p>Interview with a second resident on 12/17/19 at 5:22pm revealed: <ul style="list-style-type: none"> <li>-Staff A administered medications to him.</li> </ul> </p>	C935		



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C935	<p>Continued From page 8</p> <p>-He could not remember the days and times when Staff A had administered medication to him.</p> <p>Interview with Staff A on 12/17/19 at 5:00pm revealed:</p> <ul style="list-style-type: none"> <li>-She had been employed for two months.</li> <li>-She worked at least two days a week.</li> <li>-She had administered medications to the residents since her employment.</li> <li>-She had initialed on the MAR after she administered medication.</li> <li>-She passed the medication aide exam in 2009.</li> <li>-She worked as a MA with a previous employer.</li> <li>-She completed the medication training hours with a pervious employer.</li> <li>-She had completed eight Continuing Education Hours of medication training since her hire.</li> <li>-She did not provide the Administrator with copies of her previous medication training hours.</li> <li>-She had not completed a medication clinical skills competency validation checklist.</li> </ul> <p>Interview with the Administrator on 12/17/19 at 5:32pm revealed:</p> <ul style="list-style-type: none"> <li>-Staff A administered medications to the residents.</li> <li>-The Administrator had not requested verification of previous medication aide employment for Staff A.</li> <li>-Staff A completed at least eight Continuing Education Hours of medication training since her hire.</li> </ul> <p>Refer to the interview with the Administrator on 12/17/19 at 5:32pm.</p> <p>2. Review of Staff B's, personal care aide (PCA) personnel record revealed:</p> <ul style="list-style-type: none"> <li>-Staff B was hired on 11/15/19.</li> <li>-There was no documentation that Staff B passed</li> </ul>	C935		

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C935	<p>Continued From page 9</p> <p>the medication aide written exam.</p> <ul style="list-style-type: none"> <li>-There was no documentation of employment verification for the previous 24 months.</li> <li>-There was no documentation of medication training of 5 hours, 10 hours or 15 hours.</li> <li>-There was no documentation of a medication clinical skills competency validation checklist.</li> </ul> <p>Review of two residents' MARs for November 2019 revealed Staff A documented administration of medications on 11/11/19, 11/17/19, 11/19/19, 11/22/19 and 11/25/19.</p> <p>Review of two residents' MARs for December 2019 revealed Staff A documented administration of medications on 12/02/19, 12/03/19, 12/04/19, 12/07/19, 12/11/19, 12/13/19, 12/14/19, 12/16/19 and 12/17/19.</p> <p>Interview with a resident on 12/17/19 at 5:18pm revealed Staff B administered medications to him and had administered his medications on the evening of 12/16/19 and the morning of 12/17/19.</p> <p>Interview with a second resident on 12/17/19 at 5:22pm revealed Staff B administered medications to him and had administered his medications on the evening of 12/16/19 and the morning of 12/17/19.</p> <p>Interview with Staff B on 12/17/19 at 5:09pm revealed:</p> <ul style="list-style-type: none"> <li>-She was employed for about two - three weeks.</li> <li>-She worked from 8:00pm to 8:00am at least two to three days weekly.</li> <li>-She worked at least two to three days weekly.</li> <li>-She had administered medications to the residents.</li> <li>-She completed some medication training hours.</li> <li>-She completed the written medication aide</li> </ul>	C935		

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C935	<p>Continued From page 10</p> <p>exam.</p> <ul style="list-style-type: none"> <li>-She did not provide a copy of her medication aide exam results to the Administrator.</li> <li>-She had not completed a medication clinical skills competency validation checklist.</li> </ul> <p>Interview with the Administrator on 12/17/19 at 5:32pm revealed:</p> <ul style="list-style-type: none"> <li>-Staff B administered medications to the residents.</li> <li>-Staff B had not taken the written medication aide exam.</li> <li>-Staff B provided documentation of three hours of medication training.</li> </ul> <p>Refer to the interview with the Administrator on 12/17/19 at 5:32pm.</p> <p>_____</p> <p>Interview with the Administrator on 12/17/19 at 5:32pm revealed:</p> <ul style="list-style-type: none"> <li>-She was responsible for ensuring staff training was completed.</li> <li>-She had not scheduled the medication clinical skills competency validation checklist.</li> <li>-She was aware the medication clinical skills competency validation checklist needed to be completed by a Registered Nurse.</li> </ul> <p>_____</p> <p>The failure of the facility to assure 2 of 2 sampled medication aides (Staff A and Staff B) who were administering medications had taken and completed the medication clinical skills competency validation checklist, completed employee verification, or completed medication aide training was detrimental to the health, safety and welfare of the residents and constitutes a Type B Violation.</p> <p>_____</p> <p>The facility provided a plan of protection in accordance with G.S. 131D-34 on 12/20/19 for</p>	C935		

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C935	Continued From page 11  this violation.  CORRECTION DATE FOR THE TYPE B VIOLATION SHALL NOT EXCEED JANUARY 31, 2020.	C935		
C992	G.S. § 131D-45 G.S. § 131D-45. Examination and screening for  G.S. § 131D-45. Examination and screening for the presence of controlled substances required for applicants for employment in adult care homes.  (a) An offer of employment by an adult care home licensed under this Article to an applicant is conditioned on the applicant's consent to an examination and screening for controlled substances. The examination and screening shall be conducted in accordance with Article 20 of Chapter 95 of the General Statutes. A screening procedure that utilizes a single-use test device may be used for the examination and screening of applicants and may be administered on-site. If the results of the applicant's examination and screening indicate the presence of a controlled substance, the adult care home shall not employ the applicant unless the applicant first provides to the adult care home written verification from the applicant's prescribing physician that every controlled substance identified by the examination and screening is prescribed by that physician to treat the applicant's medical or psychological condition. The verification from the physician shall include the name of the controlled substance, the prescribed dosage and frequency, and the condition for which the substance is prescribed. If the result of an applicant's or employee's examination and screening indicates	C992		

Division of Health Service Regulation

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NAME OF PROVIDER OR SUPPLIER  <b>A HEART 2 CARE FAMILY CARE HOME</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>307 N PINE STREET SPRING HOPE, NC 27882</b>
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(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
C992	<p>Continued From page 12</p> <p>the presence of a controlled substance, the adult care home may require a second examination and screening to verify the results of the prior examination and screening.</p> <p>This Rule is not met as evidenced by: Based on record reviews and interviews, the facility failed to assure 2 of 3 staff sampled (Staff A and B) had an examination and screening for the presence of controlled substances completed upon hire.</p> <p>The findings are:</p> <p>1. Review of Staff A, medication aide (MA) personnel record revealed: -Staff A was hired on 11/05/19. -There was no documentation Staff A completed a consent for a controlled substance examination and screening prior to hire. -There was no documentation Staff A had completed a controlled substance examination and screening prior to hire.</p> <p>Interview with Staff A on 12/17/19 at 5:00pm revealed: -She had been employed for two months. -She had not completed a controlled substances examination and screening upon hire.</p> <p>Interview with the Administrator on 12/17/19 at 12:57pm revealed, she did not complete the controlled substance examination and screening for Staff A upon hire.</p> <p>Refer to the interview with the Administrator on</p>	C992		

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C992	<p>Continued From page 13</p> <p>12/17/19 at 12:57pm.</p> <p>2. Review of Staff B, personal care aide (PCA) personnel record revealed: -Staff B was hired on 11/15/19. -There was no documentation Staff B completed a consent for a controlled substance examination and screening prior to hire. -There was no documentation Staff B had completed a controlled substance examination and screening prior to hire.</p> <p>Interview with Staff B on 12/17/19 at 5:09pm revealed: -She had worked for at least two to three weeks. -Staff B completed a controlled substance examination and screening at her Primary Care Physician on 12/12/19. -She did not obtain the screening results. -She stated, "I haven't gone to pick it up."</p> <p>Interview with the Administrator on 12/17/19 at 12:57pm revealed, she did not complete the controlled substance examination and screening for Staff B upon hire.</p> <p>Refer to the interview with the Administrator on 12/17/19 at 12:57pm.</p> <hr/> <p>Interview with the Administrator on 12/17/19 at 12:57pm revealed: -She was responsible for maintaining personnel records and ensuring staff completed a controlled substances examination and screening upon hire. -She was aware of having to complete a controlled substances examination and screening prior to hire. -She stated,, "I just didn't do it."</p>	C992		