STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	FCL054060	A. BUILDING: _____ B. WING _____	04/28/2021

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
A NEW BEGINNING	300 EAST LENOIR AVENUE KINSTON, NC 28501

(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 annual survey on 04/28/21.	C 000		
C 140	10A NCAC 13G .0405(a)(b) Test For Tuberculosis 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. This Rule is not met as evidenced by: Based on record reviews, interviews and observations, the facility failed to ensure a staff family member residing at the facility was tested for Tuberculosis (TB) disease in compliance with the TB control measures adopted by the Commission for Health Services. The findings are: Observation of a staff family member on 04/28/21 at 9:34am-9:40am revealed: -The family member of the Administrator was in a female resident's room playing with toys and talking with the resident.	C 140		

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C 140	Continued From page 1 -There were 2 dolls on a second bed in the residents' room, toys in front of a large dresser and a low riding tricycle in front of a window by the residents' dresser. Observation of a second residents' room on 04/28/21 at 9:51am revealed there was a child's bicycle with training wheels between a dresser and twin bed. Interview with the Administrator on 04/28/21 at 9:50am revealed: -She had to take her child out of school in March 2020 due to COVID-19. -Her child had lived at the family care home for approximately one year. Interview with the staff family member on 04/28/21 at 11:50am revealed she slept on the love seat in the family room and the Administrator slept on the couch in the family room. Interview with the Administrator on 04/28/21 at 4:00pm revealed: -Her family member had not been screened for TB. -She did not know that her family member residing at the family care home needed to be screened for TB.	C 140		
C 284	10A NCAC 13G .0904(e)(4) Nutrition and Food Service 10A NCAC 13G .0904 Nutrition and Food Service (e) Therapeutic Diets in Family Care Homes: (4) All therapeutic diets, including nutritional supplements and thickened liquids, shall be served as ordered by the resident's physician.	C 284		

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C 284	Continued From page 2 This Rule is not met as evidenced by: Based on observations, interviews and record reviews, the facility failed to ensure therapeutic diets were served as ordered for 1 of 1 sampled (#1) who had an order for no added salt (NAS) diet. The findings are: Review of Resident #1's current FL-2 dated 08/14/20 revealed: -Diagnoses included hypertension. -The resident had a diet order for NAS. Review of Resident #1's diet order from her primary care physician (PCP) dated 08/23/17 revealed a diet order of NAS. Observation of the facility's kitchen on 04/28/21 at 9:08am revealed: -There was a diet list posted on the refrigerator. -Resident #1 was listed with a NAS diet. Interview with the Administrator on 04/28/21 at 11:15am revealed she planned to order Chinese food for the resident's lunch today. Observation of the lunch meal on 04/28/21 at 12:15pm revealed, Resident #1 ate sweet and sour chicken. Interview with the Administrator on 04/28/21 at 12:34pm revealed: -She was not aware that Resident #1 should not have eaten Chinese food for lunch. -She did not know that Chinese food contained salt.	C 284		

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C 284	Continued From page 3 Telephone interview with Resident #1's PCP on 04/28/21 at 3:30pm was unsuccessful.	C 284		
C 601	10A NCAC 13G .1701 (a) (b) Infection Prevention & Control Program (emer) 10A NCAC 13G .1701 Infection Prevention and Control Program (a) In accordance with Rule .1211 of this Subchapter and G.S. 131D-4.4A(b)(1), the facility shall establish and implement a comprehensive infection prevention and control program (IPCP) consistent with the federal Centers for Disease Control and Prevention (CDC) guidelines on infection prevention and control. (b) The facility shall ensure implementation of the facility's IPCP, related policies and procedures, and guidance or directives issued by the CDC, the local health department, and/or the North Carolina Department of Health and Human Services. This Rule is not met as evidenced by: Based on observations, record reviews and interviews the facility failed to ensure recommendations and guidance by the Centers for Disease Control (CDC) and the Department of Health and Human Services (NC DHHS) were implemented when caring for 3 residents during the global Coronavirus (COVID-19) pandemic as related to staff and family members wearing a mask and the screening of staff, family members and visitors. The findings are:	C 601		

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C 601	Continued From page 4 Review of the Centers for Disease Control and Prevention (CDC) guidelines for the prevention and spread of COVID-19 in long-term care (LTC) facilities last updated 11/20/20 revealed: -All essential visitors should be screened for the presence of fever and symptoms of the virus when entering the building. -Personnel should be screened for fever and respiratory symptoms. -All visitors to the facility should be screened for signs and symptoms of COVID-19 prior to entering the facility. Review of the NCDHHS guidance for the prevention and spread of COVID-19 in LTC facilities revealed that all visitors should be screened for signs and symptoms of COVID-19 prior to entering the facility. Observation of the front door of the family care home on 04/28/21 at 9:00am revealed the Administrator was not wearing a mask when she opened the front door. Observations upon entering the facility on 04/28/21 at 9:05am revealed: -The Administrator was wearing a mask. -The Administrator met the surveyor at the front door and guided her through the front door. -The Administrator did not offer or request to check the surveyor's temperature or ask any screening questions upon entry. -There was no screening log at the entrance. Observation of the Administrator on 04/28/21 at 10:30am revealed she had her mask pulled down below her chin. Observation of the Administrator on 04/28/21 at 11:15am revealed:	C 601		

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C 601	Continued From page 5 -She was not wearing a mask. -She explained that it was too hot to wear a mask. Interview with the Administrator on 04/28/21 at 9:50am revealed: -Her child had lived at the family care home for approximately one year. -She did not have a symptom screening log for screening essential visitors. -She did not have a symptoms screening logs for herself or her family member. Observation of the Administrators child on 04/28/21 at 11:15am, 11:50am and 12:15pm revealed she was not wearing a mask. Interview with the Administrators child on 04/28/21 at 11:50am revealed: -She slept on the love seat in the family room. -When her mother left to get a bath at their home, her grandmother stayed at the facility with her. Interview with the Administrator on 04/28/21 at 12:37pm revealed she did not take her temperature or her child's temperature.	C 601		