STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	MHL065-229	A. BUILDING: _____ B. WING _____	R 11/07/2018

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
PORT HEALTH SERVICES - STEPPING STONE	416 WALNUT STREET WILMINGTON, NC 28401

(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
V 000	INITIAL COMMENTS An annual and follow up survey was completed on November 7, 2018. A deficiency was cited. This facility is licensed for the following service category: 10A NCAC 27G .5600E, Supervised Living for Adults with Substance Abuse Dependency.	V 000		
V 131	G.S. 131E-256 (D2) HCPR - Prior Employment Verification G.S. §131E-256 HEALTH CARE PERSONNEL REGISTRY (d2) Before hiring health care personnel into a health care facility or service, every employer at a health care facility shall access the Health Care Personnel Registry and shall note each incident of access in the appropriate business files. This Rule is not met as evidenced by: Based on record review and interview, the facility failed to complete a Health Care Personnel Registry (HCPR) check prior to hire for 1 of 3 audited staff (volunteer #1). The findings are: Review on 11/6/18 of volunteer #1's personnel record revealed: - Date of hire September 2017. - HCPR check dated 2/6/17. Review on 11/6/18 of volunteer #1's Social Security Card revealed a Social Security identification number one digit different than the one used to conduct the HCPR check.	V 131		

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V 131	Continued From page 1 During interview on 11/6/18 the Program Supervisor stated HCPR checks are completed by administrative staff at the Licensee's corporate office. The staff who completed the HCPR check entered an incorrect Social Security identification number.	V 131		