

DEPARTMENT OF HEALTH AND HUMAN SERVICES  
CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 07/16/2021  
FORM APPROVED  
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>34G274</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>R</b> <b>07/15/2021</b>
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NAME OF PROVIDER OR SUPPLIER  <b>LOCKLEY ROAD</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>4617 LOCKLEY RD</b> <b>HOLLY SPRINGS, NC 27540</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) COMPLETION DATE
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W 000	INITIAL COMMENTS	W 000		
W 189	<p>A revisit was conducted on 7/15/21 for all previous deficiencies cited on 4/6/21. All deficiencies have been corrected. One new deficiency was cited as a result of the revisit.</p> <p><b>STAFF TRAINING PROGRAM</b> CFR(s): 483.430(e)(1)</p> <p>The facility must provide each employee with initial and continuing training that enables the employee to perform his or her duties effectively, efficiently, and competently.</p> <p>This STANDARD is not met as evidenced by: Based on observations, record review and interviews, the facility failed to ensure all staff were sufficiently trained to perform job duties competently. The finding is:</p> <p>During observations in the home on 7/15/21 at approximately 7:00am, the surveyor arrived to the home. Staff A opened the door, and the surveyor identified himself and explained the reason for the visit. Staff A never acknowledged the surveyor, and simply walked away and into the living room of the home where she yelled out to two other staff, "Y'all got company and I'm not dealing with it today." The surveyor continued to stand outside the front door of the home, and after several moments, Staff A yelled out "Are you coming in or standing outside all day?" The surveyor replied by stating he was waiting for a COVID screening per facility policy. Staff A stated "His stupid a** is asking if I'm going to screen, I'm not screening nobody. It's almost time to go." During this time, two clients were sitting in the living room of the home where Staff A was</p>	W 189		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE \_\_\_\_\_ TITLE \_\_\_\_\_ (X6) DATE \_\_\_\_\_

Any deficiency statement ending with an asterisk (\*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

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W 189	<p>Continued From page 1 located.</p> <p>Further observations in the home on 7/15/21 made while the surveyor was reviewing documentation, Staff A continued to make remarks from the living room of the home, such as "All surveyors are stupid, they come in here and stand around not saying anything." During this time, one client was sitting in the living room with Staff A and another client was walking back and forth from the living room and dining room.</p> <p>Interview on 7/15/21 with Staff B revealed staff are trained are customer service skills and how to interact with others. Staff B acknowledged that Staff A's interactions were inappropriate, but she felt Staff A was caught off guard due to the surveyors unannounced visit.</p> <p>Interview on 7/15/21 with Staff C revealed staff are trained on customer service and how to interact with others. Staff C acknowledged that Staff A's interactions towards the surveyor was very inappropriate and staff are not supposed to treat others in this way.</p> <p>Interview on 7/15/21 with the Executive Director (ED) via telephone confirmed that Staff A's interactions and comments were very inappropriate and staff are trained not to treat others in this way.</p>	W 189			