

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL011-428</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>07/21/2022</b>
--	---	---	---

NAME OF PROVIDER OR SUPPLIER  <b>DEBORAH STEWART HOME</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>19 EILEEN WAY LEICESTER, NC 28748</b>
---	---

(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	<p><b>INITIAL COMMENTS</b></p> <p>An annual survey was completed on 7/21/22. Deficiencies were cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .5600F Supervised Living for Alternative Family Living.</p> <p>This facility is licensed for 3 and currently has a census of 2. The survey sample consisted of audits of 2 current clients.</p>	V 000		
V 131	<p>G.S. 131E-256 (D2) HCPR - Prior Employment Verification</p> <p>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.</p> <p>This Rule is not met as evidenced by: Based on record review and interviews, the facility failed to access the Health Care Personnel Registry (HCPR) prior to an offer of employment affecting 1 of 2 audited staff (Qualified Professional). The findings are:</p> <p>Review on 7/21/22 of the Qualified Professional's (QP) personnel record revealed: -hired on 6/6/22. -hired as the QP.</p>	V 131	<p>V131 CCHC prides ourselves in completing all required documentation prior to employment. The Human Resources staff was having a baby that week and it slipped her mind to complete the HCPR before orientation.</p> <p>CEO will work with HR on setting up a system of checks and balances to ensure that this error does not happen in the future.</p> <p>This will include utilizing support staff as a second set of eyes on ensuring the completion of HCPR checks prior to orientation.</p> <p>CCHC's compliance officer will monitor our procedures to ensure accuracy.</p> <p style="text-align: center;"><b>RECEIVED</b> AUG 10 2022 DHSR-MH Licensure Sect</p>	8/30/2022

Division of Health Service Regulation  
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

*Aimee Smith, CEO*

TITLE

(X6) DATE

8/2/2022

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL011-428</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>07/21/2022</b>
--	---	---	---

NAME OF PROVIDER OR SUPPLIER  <b>DEBORAH STEWART HOME</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>19 EILEEN WAY LEICESTER, NC 28748</b>
---	---

(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 131	<p>Continued From page 1</p> <p>-HCPR accessed on 6/7/22.</p> <p>Interview on 7/21/22 with the Office Assistant revealed:</p> <ul style="list-style-type: none"> <li>-the QP was not working with clients during her first week; she was in the office for orientation during her first week of work.</li> <li>-there is a staff person who completes new hire paperwork; they have a separate person for client intakes.</li> </ul> <p>Interview on 7/21/22 with the Chief Executive Officer revealed:</p> <ul style="list-style-type: none"> <li>-the Quality Assurance/HR (Human Resources) staff did the HCPR checks.</li> <li>-she will address in the plan of correction for future hires.</li> </ul>	V 131		

RECEIVED  
HEALTH SERVICE REGULATION DIVISION