

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL060104	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 11/20/2014
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NAME OF PROVIDER OR SUPPLIER THE LAURELS IN THE VILLAGE AT CAROLINA PLACI	STREET ADDRESS, CITY, STATE, ZIP CODE 13180 DORMAN ROAD PINEVILLE, NC 28134
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D 000	Initial Comments The Adult Care Licensure Section and the Mecklenburg County Department of Social Services conducted an annual survey on November 19-20, 2014.	D 000		
D 137	<p>10A NCAC 13F .0407(a)(5) Other Staff Qualifications</p> <p>10A NCAC 13F .0407 Other Staff Qualifications (a) Each staff person at an adult care home shall:</p> <p>(5) have no substantiated findings listed on the North Carolina Health Care Personnel Registry according to G.S. 131E-256;</p> <p>This Rule is not met as evidenced by: TYPE B VIOLATION</p> <p>Based on interviews and record reviews, the facility failed to ensure 5 of 7 sampled staff (Staff A, D, E, F, and G) had no substantiated findings listed on the North Carolina Health Care Personnel Registry (HCPR).</p> <p>The findings are:</p> <p>A. Review of Staff A's personnel file revealed: -Hire date of 10/13/14 as a dietary server. -No documentation of a HCPR check. -A Perpetual Staff Log completed upon hire had "N/A" (nonapplicable) written in the section for documenting the date the HCPR check was completed.</p> <p>Review of a HCPR check completed on 11/20/14 revealed there were no substantiated findings.</p> <p>The Business Office Manager was unavailable for</p>	D 137		

Division of Health Service Regulation LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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D 137	<p>Continued From page 1</p> <p>interview.</p> <p>Refer to interview on 11/20/14 at 10:00 am with the Administrator.</p> <p>B. Review of Staff D's personnel file revealed: -Hire date of 09/22/14 as the dining room supervisor. -No documentation of a HCPR check. -A Perpetual Staff Log completed upon hire had "N/A" (nonapplicable) written in the section for documenting the date the HCPR check was completed.</p> <p>Review of a HCPR check completed on 11/20/14 revealed there were no substantiated findings.</p> <p>The Business Office Manager was unavailable for interview.</p> <p>Refer to interview on 11/20/14 at 10:00 am with the Administrator.</p> <p>C. Review of Staff E's personnel file revealed: -Hire date of 07/09/14 as a dietary server. -No documentation of a HCPR check. -A Perpetual Staff Log completed upon hire had "N/A" (nonapplicable) written in the section for documenting the date the HCPR check was completed.</p> <p>Review of a HCPR check completed on 11/20/14 revealed there were no substantiated findings.</p> <p>The Business Office Manager was unavailable for interview.</p> <p>Refer to interview on 11/20/14 at 10:00 am with the Administrator.</p>	D 137		

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D 137	<p>Continued From page 2</p> <p>D. Review of Staff F's personnel file revealed: -Hire date of 05/21/14 as a dietary aide. -No documentation of a HCPR check. -A Perpetual Staff Log completed upon hire had "N/A" (nonapplicable) written in the section for documenting the date the HCPR check was completed.</p> <p>Review of a HCPR check completed on 11/20/14 revealed there were no substantiated findings.</p> <p>The Business Office Manager was unavailable for interview.</p> <p>Refer to interview on 11/20/14 at 10:00 am with the Administrator.</p> <p>E. Review of Staff G's personnel file revealed: -Hire date of 09/10/14 as a housekeeper. -No documentation of a HCPR check. -A Perpetual Staff Log completed upon hire had "N/A" (nonapplicable) written in the section for documenting the date the HCPR check was completed.</p> <p>Review of a HCPR check completed on 11/20/14 revealed there were no substantiated findings.</p> <p>The Business Office Manager was unavailable for interview.</p> <p>Refer to interview on 11/20/14 at 10:00 am with the Administrator.</p> <p>_____ Interview on 11/20/14 at 10:00 am with the Administrator revealed: -The Business Office Manager (BOM) was responsible for completing the HCPR checks for new employees.</p>	D 137		

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D 137	<p>Continued From page 3</p> <p>-He was not aware a HCPR check was needed for nonclinical staff, such as dietary and housekeeping staff.</p> <hr/> <p>On 11/20/14, the Administrator submitted a Plan of Protection as follows: -All employee files would be audited and a HCPR check completed for all current employees. -A HCPR check would be completed for all new staff prior to hire.</p> <p>CORRECTION DATE FOR THE TYPE B VIOLATION SHALL NOT EXCEED JANUARY 4, 2015.</p>	D 137		
D 234	<p>10A NCAC 13F .0703(a) Tuberculosis Test, Medical Exam & Immunizatio</p> <p>10A NCAC 13F .0703 Tuberculosis Test, Medical Examination & Immunizations (a) Upon admission to an adult care home, each resident shall be tested for tuberculosis disease in compliance with the 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, North Carolina 27699-1902.</p> <p>This Rule is not met as evidenced by: Based on record reviews, and interviews, the facility failed to assure 3 of 7 sampled residents (Resident #3, #4 and #5) were administered the second step skin test for tuberculosis (TB) disease in compliance with the control measures adopted by the Commission for Health Services.</p>	D 234		

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D 234	<p>Continued From page 4</p> <p>The findings are:</p> <p>A. Review of Resident #3's current FL2 dated 9/3/14 revealed diagnoses that included hypertension, depression, urinary incontinence, macular degeneration and breast cancer.</p> <p>Review of Resident #3's record revealed: -Resident #3 was admitted to the facility on 12/31/11. -Resident #3 had a TB skin test placed on 12/20/11 and read as negative on 12/22/11. -There was no further documentation of any other TB skin test results available for review.</p> <p>Interview on 11/20/14 at 10:55 am with Resident #3 revealed: -She had a TB skin test administered on 11/19/14 in her right forearm by the facility nurse. -She could not recall a previous TB skin test prior to 11/19/14.</p> <p>Refer to the interview on 11/20/14 at 10:40 am with the LPN.</p> <p>Refer to the interview on 11/20/14 at 11:05 am with the Resident Care Director (RCD).</p> <p>Refer to the interview on 11/20/14 at 11:15 am with the Administrator.</p> <p>B. Review of Resident #4's current FL2 dated 9/24/14 revealed diagnoses that included chronic kidney disease, raynaud's disease, renal artery stenosis, neuropathy and ventricular tachycardic.</p> <p>Review of Resident #4's record revealed: -She was admitted to the facility on 8/10/11.</p>	D 234		

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D 234	<p>Continued From page 5</p> <p>-She had a TB skin test administered on 8/3/11 and read on 8/6/11 as negative.</p> <p>-She had a TB skin test administered on 8/21/14 and read on 8/23/14 as negative.</p> <p>-There was no further documentaion of any other TB skin test results available for review.</p> <p>Resident #4 was not available for interview since she was currently in rehabilitation.</p> <p>Refer to the interview on 11/20/14 at 10:40 am with the LPN.</p> <p>Refer to the interview on 11/20/14 at 11:05 am with the Resident Care Director (RCD).</p> <p>Refer to the interview on 11/20/14 at 11:15 am with the Administrator.</p> <p>C. Review of Resident #5's current FL-2 dated 11/20/14 revealed diagnoses included altered mental status, dementia, hypertension, and osteoporosis.</p> <p>Review of Resident #5 ' s record revealed: -An admission date of 06/15/12 from an independent living facility. -Documentation of a negative TB skin test administered on 06/06/12. -No documentation of further TB skin testing. -No documentation of TB skin testing completed prior to 06/06/12.</p> <p>Based on record review and interviews with staff, it was determined Resident #5 was not interviewable.</p> <p>Observation on 11/20/14 the facility had a procedure book that was initated in August, 2014, for documentation of TB skin testing to ensure TB</p>	D 234		

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D 234	<p>Continued From page 6</p> <p>skin requirements were met for the Resident's. No further documentaion of TB skin test were charted for Resident #3,#4, or #5.</p> <p>Refer to the interview on 11/20/14 at 10:40 am with the LPN.</p> <p>Refer to the interview on 11/20/14 at 11:05 am with the Resident Care Director (RCD).</p> <p>Refer to the interview on 11/20/14 at 11:15 am with the Administrator.</p> <p>_____</p> <p>Interview on 11/20/14 at 10:40 am with the facility LPN revealed:</p> <ul style="list-style-type: none"> -She was employed at the facility for 11 years. -She said the facility policy was to administer a single TB test to each resident upon admission to the facility. -She was aware of the requirement a second step TB skin test be administered following the first TB skin test and that it was the facility policy. -She said it was the nurse's responsibility to review the new residents FL2 to determine if a second step TB skin test was needed. -She was unaware Resident #3, #4, and #5 did not have an additional second step TB skin test after admission to the facility. -She said the facility had multiple nursing staff in the last 3 years, and she guessed the second TB skin test for the residents were overlooked. -She initated a procedure book in August 2014, for the nurse to document TB skin test for all the residents. -She was unaware when nor how often the procedure book had been reviewed or updated. -She was aware a TB skin test was administered to Resident #3 and #5 on 11/19/14. 	D 234		

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D 234	<p>Continued From page 7</p> <p>Interview on 11/20/14 at 11:05 am with the Resident Care Director (RCD) revealed: -She was employed at the facility for 1 year. -She was aware on 11/19/14 the second step TB skin test was not administered for Residents #3, #4 and #5. -It was her expectation the nursing staff would monitor the TB skin test for all the residents. -She was aware TB skin test were administered on 11/19/14 to Resident #3 and #5.</p> <p>Interview on 11/20/14 at 11:15 am with the Administrator revealed: -He was employed at the facility for 2 years. -He was unaware Resident #3, #4 and #5 were not administered the second step TB skin test after admission to the facility. -He relied on the nurse to monitor the TB skin test for all the residents. -He said the nurse had a procedure book as well as a dry erase board in the medication room for following up on TB skin test for all the residents. -He was unsure why the second step TB skin test was not completed on Resident #3, #4 and #5. -He said the facility had a lot of turnover in nursing since 2011. -He was aware Resident #3 and #5 were administered TB skin test on 11/19/14.</p>	D 234		
D912	<p>G.S. 131D-21(2) Declaration of Residents' Rights</p> <p>G.S. 131D-21 Declaration of Residents' Rights Every resident shall have the following rights: 2. To receive care and services which are adequate, appropriate, and in compliance with relevant federal and state laws and rules and regulations.</p>	D912		

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D912	<p>Continued From page 8</p> <p>This Rule is not met as evidenced by: Based on interviews and record reviews, the facility failed to ensure residents received care and services which were adequate, appropriate, and in compliance with relevant federal and state laws and rules and regulations regarding Health Care Personnel Registry (HCPR) checks for new employees.</p> <p>The findings are:</p> <p>Based on interviews and record reviews, the facility failed to ensure 5 of 7 sampled staff (Staff A, D, E, F, and G) had no substantiated findings listed on the North Carolina Health Care Personnel Registry (HCPR). [Refer to Tag 137, 10A NCAC 13F .0407(a)(5) (Type B Violation).]</p>	D912		