

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: FCL082010	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 01/16/2015
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NAME OF PROVIDER OR SUPPLIER PINE ACRE FAMILY CARE HOME #2	STREET ADDRESS, CITY, STATE, ZIP CODE 156 PINE ACRE LANE CLINTON, NC 28328
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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) COMPLETE DATE
C 000	Initial Comments The Adult Licensure Section conducted an annual survey on 1/16/15.	C 000		
C 140	<p>10A NCAC 13G .0405(a)(b) Test For Tuberculosis</p> <p>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.</p> <p>This Rule is not met as evidenced by: Based on record review and interviews, the facility failed to assure 1 of 2 staff (Staff A) had completed the second step of testing for tuberculosis disease in compliance with control measures adopted by the Commission for Health Services. The findings are:</p> <p>Review of personnel record on for Staff A revealed: - Hire date of 5/4/13 for position of housekeeper - A negative TB skin test dated 5/3/13</p>	C 140		

Division of Health Service Regulation LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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C 140	Continued From page 1 Interview with Supervisor in Charge (SIC) on 01/16/15 at 2:15 PM revealed: - She was not aware Staff A had not completed a 2 step TB testing process - Administrator, who was not available, was responsible for maintaining personnel records - She will call to arrange TB testing for Staff A on 01/19/15. Staff A was not available for interview.	C 140		
C 145	10A NCAC 13G .0406(a)(5) Other Staff Qualifications 10A NCAC 13G .0406 Other Staff Qualifications (a) Each staff person of a family care home shall: (5) have no substantiated findings listed on the North Carolina Health Care Personnel Registry according to G.S. 131E-256; This Rule is not met as evidenced by: Based on interviews and record reviews, the facility failed to assure 2 of 2 staff (Staff A,B) had no substantiated findings listed on the North Carolina Health Care Personnel Registry (HCPR) upon hire. The findings are: 1. Review of Staff A's personnel record revealed: - She was hired as a Housekeeper on 05/04/13 - No record of a Health Care Personnel Registry (HCPR) check was found in the personnel file.	C 145		

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C 145	<p>Continued From page 2</p> <p>Interview with the Supervisor in Charge (Staff B) at 2:15 PM revealed:</p> <ul style="list-style-type: none"> - She was unaware Health Care Personnel Registry check had not been done at time of hire for Staff A. - She will follow-up with Administrator when he is available. <p>2. Review of Staff B's personnel record on revealed:</p> <ul style="list-style-type: none"> - She was hired as Supervisor in Charge/Medication Aide on 05/16/11. - No record of a Health Care Personnel Registry was found in the personnel file. <p>Interview with Staff B on at 2:15 PM revealed the following:</p> <ul style="list-style-type: none"> - She did not know if a Health Care Personnel Registry was done when she was hired. - She will follow up with Administrator as soon as possible. 	C 145		
C 147	<p>10A NCAC 13G .0406(a)(7) Other Staff Qualifications</p> <p>10A NCAC 13G .0406 Other Staff Qualifications (a) Each staff person of a family care home shall:</p> <p>(7) have a criminal background check in accordance with G.S. 114-19.10 and G.S. 131D-40;</p> <p>This Rule is not met as evidenced by: Based on record review and staff interview, the facility failed to assure that 1 of 2 staff (staff A) had a criminal background check upon or after date of hire. Review of Staff A's personnel file on 01/16/15 at revealed:</p>	C 147		

Division of Health Service Regulation

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C 147	Continued From page 3 - Hire date of 05/04/13 as housekeeper - Record did not contain results of criminal background check. Interview with Supervisor in Charge (SIC) on 01/16/15 at 2:15 PM revealed: - She was not aware that criminal background check had not been completed for Staff A. - She would follow-up with Administrator when he became available. Staff A was not available for interview.	C 147		
C 174	10A NCAC 13G .0505(1)(2) Training On Care Of Diabetic Residents 10A NCAC 13G .0505 Training On Care Of Diabetic Residents A family care home shall assure that training on the care of residents with diabetes is provided to unlicensed staff prior to the administration of insulin as follows: (1) Training shall be provided by a registered nurse, registered pharmacist or prescribing practitioner. (2) Training shall include at least the following: (a) basic facts about diabetes and care involved in the management of diabetes; (b) insulin action; (c) insulin storage; (d) mixing, measuring and injection techniques for insulin administration; (e) treatment and prevention of hypoglycemia and hyperglycemia, including signs and symptoms; (f) blood glucose monitoring; universal precautions; appropriate administration times; and (g) sliding scale insulin administration.	C 174		

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C 174	<p>Continued From page 4</p> <p>This Rule is not met as evidenced by: Based on interview and record review, the facility failed to assure 1 of 1 medication aides (Staff B) received training on the State approved course by a licensed Health Professional on the care of diabetic residents prior to administering insulin to residents. The findings are:</p> <p>Review of Staff B's personnel file revealed:</p> <ul style="list-style-type: none"> - Staff B's hire date was 05/16/11. - Medication Clinical skills checklist completed on 07/28/10. - No documentation of any diabetic training. <p>Interview with Staff B on 01/16/15 at 2:15 PM revealed the following:</p> <ul style="list-style-type: none"> - She was not aware of a specific diabetic training course required by the State. - She could not remember taking a diabetic training course. - She would discuss with Administrator and facility's Licensed Health Professional Support nurse as soon as possible. <p>Review of Resident # 1 record revealed:</p> <ul style="list-style-type: none"> - diagnosis of diabetes type II require insulin injections) - an order for Lantus insulin, 30 units to be given twice a day dated 07/14/14 <p>Review of medication administration records for the months of December 2014 and January 2015 revealed that Staff B had documented</p>	C 174		

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C 174	Continued From page 5 administration of Lantus insulin injections, 30 units, 2 times a day as ordered.	C 174		