

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  FCL060134	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING: _____ <i>es</i>	(X3) DATE SURVEY COMPLETED  02/03/2015
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NAME OF PROVIDER OR SUPPLIER  UNLIMITED POSSIBILITIES FAMILY CARE HOME # 4	STREET ADDRESS, CITY, STATE, ZIP CODE 14015 THOMPSON ROAD MINT HILL, NC 28227  <i>County: Mecklenburg</i>
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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  An initial survey was conducted by staff with the Adult Care Licensure Section on February 3, 2015.	C 000		
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 observations, interviews, and record reviews, the facility failed to ensure 2 of 3 sampled staff (Staff A and Staff C) had no substantiated findings listed on the North Carolina Health Care Personnel Registry (HCPR) according to G.S. 131E-256 prior to hire.  The findings are:  A. Review of Staff A's personnel file revealed: -Hired 11/12/14 as a personal care aide (PCA). -No documentation of a HCPR check.  Review of a HCPR check completed on 02/03/15 revealed no substantiated findings listed on the registry.  Interview on 02/03/15 at 2:09 pm with the Assistant Executive Director revealed: -She was responsible for checking the HCPR for new employees. -She did not know until December 2014 that a HCPR check needed to be completed for PCAs,	C 145	<p>① The day deficiency was issued all employee charts were checked to verify that all health care registry checks were performed, in each employee chart and that each employee had no significant findings.</p> <p>② An inclusive check list was devised to serve as a guide to assure all required paperwork is present in each employee chart.</p> <p>③ Assistant executive director and Executive Director will both review employee chart to assure each component is present. These following components will be present in the employee chart prior to orientation:</p> <ul style="list-style-type: none"> <li>- N.A. Registry check</li> <li>- Background and drug check</li> <li>- CPR check</li> <li>- Driver's license/state ID.</li> <li>- High School Diploma /GED (Equivalency test)</li> <li>- SIC references</li> <li>- Med tech Registry (if a med tech)</li> </ul> <p>The other remaining staff qualifications will be present in chart prior to the employee's start date.</p>	

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE \_\_\_\_\_ TITLE \_\_\_\_\_ (X5) DATE \_\_\_\_\_

*Heather Penland, RD, PhD* ED 2-9-15

POC Approved.  
per B. Moore  
02-13-2015 / *es*

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C 145	<p>Continued From page 1</p> <p>but thought it only had to be checked for certified nursing assistants (CNAs) and medication aides (MAs).</p> <p>-During a monitoring visit by the county Adult Home Specialist (AHS) in December at a sister facility, the AHS informed her the HCPR needed to be completed for all new employees, so she corrected the issue in that building, but "didn't think" to ensure the HCPR check was completed for all employees in this facility.</p> <p>Interview on 02/03/15 at 2:23 pm with Staff A revealed she assumed facility management completed the HCPR check upon employment.</p> <p>Interviews with six residents revealed there were no concerns or complaints regarding the care provided by Staff A.</p> <p>Refer to interview on 02/03/15 at 2:15 with the Executive Director (ED).</p> <p>B. Review of Staff C's personnel file revealed: -Hire date of 04/17/12 as a personal care aide (PCA). -No documentation of a HCPR check upon hire. -A HCPR check completed on 02/12/13 revealed no substantiated findings listed on the registry.</p> <p>Interview on 02/03/15 at 2:09 pm with Staff C, Assistant Executive Director (AED) revealed: -She began working at the facility in 2012 as a PCA and later became a certified nursing assistant (CNA), a medication aide (MA), activity director (AD), and was now the AED. -The HCPR was completed on 02/12/13 when she became a CNA. -She thought HCPR checks only had to be completed on CNAs and MAs until December 2014 when informed otherwise by the county</p>	C 145	<p>④ Executive Director and Assistant Executive Director will be monitoring each employee chart to assure the problem does not re-occur.</p> <p>⑤ Monitoring will take place prior to orientation, prior to start date and Assistant Executive Director is developing an Excel spread sheet to include all aspects of the employee requirements and will check spread sheet at the end of each month to assure everything is present and to date.</p> <p>⑥ Completion date for this has been set for April 1, 2015</p>	

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C 145	<p>Continued From page 2</p> <p>Adult Home Specialist at a sister facility.</p> <p>Interviews with six residents revealed there were no concerns or complaints regarding the services provided by Staff C.</p> <p>Refer to interview on 02/03/15 at 2:15 pm with the Executive Director (ED).</p> <p>Interview on 02/03/15 at 2:15 pm with the Executive Director (ED) revealed:</p> <ul style="list-style-type: none"> <li>-She thought the HCPR check was being completed for all new employees.</li> <li>-She was not aware the HCPR check was only being completed for CNAs and MAs.</li> </ul>	C 145		

**Shook, Linda**

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**From:** Moore, Bonnie  
**Sent:** Friday, February 13, 2015 7:30 AM  
**To:** 'nina.anderson@mecklenburgcountync.gov'  
**Cc:** Shook, Linda  
**Subject:** Unlimited Possibilities Family Care Home #4 POC  
**Attachments:** UNLIMITED POSSIBILITIES #4 2015-02-09 POC-F2QR11.pdf

Please find attached to this email the approved Plan of Correction for Unlimited Possibilities Family Care Home #4, FCL-060-134, Mecklenburg County.

Thank you,

Bonnie Moore, RN  
N.C. Department of Health and Human Services  
Facility Survey Consultant - Division of Health Service Regulation  
Adult Care Licensure Section  
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Asheville, NC 28806  
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