

Division of Health Service Regulation

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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:<br><br><b>HAL085001</b> | (X2) MULTIPLE CONSTRUCTION<br>A. BUILDING: _____<br><br>B. WING _____ | (X3) DATE SURVEY COMPLETED<br><br><b>02/11/2015</b> |
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| NAME OF PROVIDER OR SUPPLIER<br><br><b>GRACELAND LIVING CENTER I</b> | STREET ADDRESS, CITY, STATE, ZIP CODE<br><b>1290 DENNY ROAD<br/>KING, NC 27021</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) COMPLETE DATE |
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| D 000              | Initial Comments<br><br>The Adult Care Licensure Section conducted an annual survey on February 11, 2015.   | D 000         |   |                    |
| D 131              | <p>10A NCAC 13F .0406(a) Test For Tuberculosis</p> <p>10A NCAC 13F .0406 Test For Tuberculosis (a) Upon employment or living in an adult care home, the administrator and 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.</p> <p>This Rule is not met as evidenced by:<br/>Based on record review and interview, the facility failed to assure 2 of 3 staff (Staff A &amp; C) had been tested for Tuberculosis (TB) disease in compliance with TB control measures (2 step Tuberculin skin test) adopted by the Commission for Health Services.</p> <p>The findings are:<br/>A. Review of Staff C's personnel record revealed:<br/>-Staff C was hired on 3/4/13 as a Nursing Assistant (NA) and Medication Aide (MA).<br/>-Documentation of a TB test on 2/27/13 read as negative results.<br/>-No documentation of a 2 step TB skin test.</p> <p>Interview on 2/11/15 at 11:30 am with Staff C revealed:<br/>-She thought there were 2 TB skin tests in her personnel file.<br/>-Staff C stated she would provide copies of her 2 step TB.</p> | D 131         |   |                    |

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

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| D 131              | <p>Continued From page 1</p> <p>B. Review of Staff A's personnel record revealed:<br/>-Staff A was hired on 10/5/11 as a Nursing Assistant (NA) and Medication Aide (MA).<br/>-Documentation of TB tests on 10/6/11 and 3/20/13 read as negative results.<br/>-No documentation of 2 TB skin test within 12 months of either TB test.</p> <p>Interview on 2/11/15 at 3:05 pm with Staff A revealed:<br/>-She had several TB tests in the past.<br/>-She thought there were 2 TB skin tests in her personnel file.<br/>-Staff A contacted primary care physician to obtain faxed copies of 2 step TB skin test.</p> <p>Interview on 2/11/15 at 3:15 pm with Administrator revealed:<br/>-She was responsible for assuring a 2 step TB skin test was completed and documented in staff personnel records.<br/>-She thought Staff A and Staff C had completed the 2 step TB skin test.</p> | D 131         |   |                    |
| 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:<br/>(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:<br/>Based on interviews and record reviews, the facility failed to ensure 1 of 3 sampled staff (Staff</p>  | D 137         |   |                    |

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| D 137              | <p>Continued From page 2</p> <p>B) had no substantial findings listed on the North Carolina Health Care Personnel Registry (HCPR) prior to hire according to G.S. 131E-256.</p> <p>The findings are:</p> <p>Review of Staff C personnel records revealed:<br/>-Staff C was hired 3/17/14 as Housekeeper.<br/>-Her daily responsibilities included housekeeping and laundry.<br/>-No documentation of a completed HCPR check in Staff C personnel record.</p> <p>Interview on 2/11/15 at 2:35 pm with Administrator revealed:<br/>-She was responsible for completing a HCPR check on each new employees.<br/>-She stated she did not complete a HCPR check on Staff C because she was not hired as a Nursing Assistant or Medication Aide.<br/>-She stated she would complete a HCPR on Staff C today.</p> <p>Review of a HCPR check on 2/11/15 submitted by the Administrator during the survey revealed Staff C had no substantiated findings listed on the HCPR.</p> | D 137         |   |                    |