

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>FCL092106</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>R</b> <b>05/12/2015</b>
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NAME OF PROVIDER OR SUPPLIER  <b>A GOOD LIFE FAMILY CARE HOME</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>4013 TRYON ROAD</b> <b>RALEIGH, NC 27606</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
{C 000}	Initial Comments	{C 000}		
{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: (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: <b>FOLLOW-UP TO A TYPE B VIOLATION</b></p> <p>The Type B Violation was abated. Non-compliance continues.</p> <p>Based on observation, interview and record review, the facility failed to ensure a criminal background check was completed in accordance with G.S. 114-19.10 and G.S. 131D-40 for 1 of 3 Staff (B). The findings are:</p> <p>Review of the staff personnel record for Staff B revealed: - There was no documentation of Staff B's hire date. - Staff B was a Nursing Assistant I. - No documentation of a criminal background check.</p> <p>Observation on 5/12/15 at 9:30 a.m. revealed Staff B was going into resident rooms and gathering trash for discard.</p> <p>Interview on 5/12/15 at 9:50 a.m. with Staff A Supervisor-In-Training revealed:</p>	{C 147}		

Division of Health Service Regulation LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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{C 147}	<p>Continued From page 1</p> <ul style="list-style-type: none"> <li>- Staff B was a nursing assistant.</li> <li>- He had worked in the facility for a couple of months.</li> <li>- He cleaned and emptied trash and filed-in for staff as necessary.</li> </ul> <p>Interview on 5/12/15 at 4:54 p.m. with the Administrator revealed:</p> <ul style="list-style-type: none"> <li>- Staff B had been hired in April 2015.</li> <li>- The Administrator was responsible for staff personnel records.</li> <li>- A criminal background check for Staff B had not completed.</li> <li>- She would ensure a criminal background check was completed as soon as possible.</li> <li>- A criminal background check will be completed on new staff before hire.</li> </ul> <p>A criminal background check was provided on 5/18/15 after the survey.</p>	{C 147}		
{C 934}	<p>G.S.131D-4.5B (a) ACH Infection Prevention Requirements</p> <p>G.S. 131D-4.5B Adult Care Home Infection Prevention Requirements</p> <p>(a) By January 1, 2012, the Division of Health Service Regulation shall develop a mandatory, annual in-service training program for adult care home medication aides on infection control, safe practices for injections and any other procedures during which bleeding typically occurs, and glucose monitoring. Each medication aide who successfully completes the in-service training program shall receive partial credit, in an amount determined by the Department, toward the continuing education requirements for adult care home medication aides established by the</p>	{C 934}		

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{C 934}	<p>Continued From page 2</p> <p>Commission pursuant to G.S. 131D-4.5</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 aide (Staff C) completed the state annual infection control training program. The findings are:</p> <p>Review of the personnel record for Staff C revealed:</p> <ul style="list-style-type: none"> <li>- Staff C was the Administrator and Medication Aide (MA) in the facility.</li> <li>- There was no documentation of Staff C's hire date.</li> <li>- The Administrator passed the MA testing on 5/06/03.</li> <li>- The Administrator completed one state annual infection control training dated 12/18/12.</li> <li>- There was no documentation of a current mandatory state annual infection control training.</li> </ul> <p>Interview with the Administrator on 5/12/15 at 5 p.m. revealed:</p> <ul style="list-style-type: none"> <li>- She had opened the facility many years ago.</li> <li>- The Administrator was the only MA who worked at the facility.</li> <li>- Two of the facility residents received fingerstick blood sugar monitoring and insulin injections.</li> <li>- She had not been able to complete the course due to personal matters.</li> <li>- The Administrator was responsible for staff personnel records.</li> <li>- She would ensure the infection control course would be completed as soon as the course was offered again.</li> </ul>	{C 934}		

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{C992}	Continued From page 3	{C992}		
{C992}	<p>G.S. § 131D-45 G.S. § 131D-45. Examination and screening for</p> <p>G.S. § 131D-45. Examination and screening for the presence of controlled substances required for applicants for employment in adult care homes.</p> <p>(a) An offer of employment by an adult care home licensed under this Article to an applicant is conditioned on the applicant's consent to an examination and screening for controlled substances. The examination and screening shall be conducted in accordance with Article 20 of Chapter 95 of the General Statutes. A screening procedure that utilizes a single-use test device may be used for the examination and screening of applicants and may be administered on-site. If the results of the applicant's examination and screening indicate the presence of a controlled substance, the adult care home shall not employ the applicant unless the applicant first provides to the adult care home written verification from the applicant's prescribing physician that every controlled substance identified by the examination and screening is prescribed by that physician to treat the applicant's medical or psychological condition. The verification from the physician shall include the name of the controlled substance, the prescribed dosage and frequency, and the condition for which the substance is prescribed. If the result of an applicant's or employee's examination and screening indicates the presence of a controlled substance, the adult care home may require a second examination and screening to verify the results of the prior examination and screening.</p>	{C992}		

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{C992}	<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 2 of 2 staff (A and B) hired after 9/30/13 received drug screening for the presence of controlled substances. The findings are:</p> <p>A. Review of the personnel record for Staff A revealed:</p> <ul style="list-style-type: none"> <li>- Staff A was hired as a Supervisor-in-Charge (SIC) in training.</li> <li>- No documentation of the date Staff A was hired.</li> <li>- No documentation of controlled substance screening.</li> </ul> <p>Interview with Staff A on 5/12/15 at 3:35 p.m. revealed:</p> <ul style="list-style-type: none"> <li>- She was hired to work in January 2015.</li> <li>- She was learning to administer medication and be the SIC.</li> <li>- She was a nursing assistant and helped residents with their needs.</li> <li>- She had drug screening completed prior to working at this facility.</li> <li>- The drug screen was in with some other forms for her school courses.</li> <li>- She would ensure the form was in the facility as soon as possible.</li> </ul> <p>Interview with the Administrator on 5/12/15 at 4:30 p.m. revealed Staff A was hired to work at the facility on 1/06/15 as an SIC in training.</p> <p>No controlled substance screen was provided by the end of the survey.</p> <p>Refer to interview with the Administrator on 5/12/15 at 4:30 p.m.</p> <p>B. Review of personnel record for Staff B</p>	{C992}		
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{C992}	<p>Continued From page 5</p> <p>revealed:</p> <ul style="list-style-type: none"> <li>- There was no documentation of Staff B's hire date.</li> <li>- No documentation of controlled substance screening being obtained prior to an offer of employment.</li> </ul> <p>Interview on 5/12/15 at 4:30 p.m. with the Administrator revealed:</p> <ul style="list-style-type: none"> <li>- Staff B had recently worked at another facility and had a controlled substance screen obtained there.</li> <li>- The results of that drug screen were not in the facility at this time.</li> <li>- She said she would get the results from that drug screen.</li> <li>- No controlled substance screen was obtained for hire at this facility.</li> </ul> <p>Staff B was not available for interview.</p> <p>No controlled substance screen was provided by the end of the survey.</p> <p>Refer to interview with the Administrator on 5/12/15 at 4:30 p.m.</p> <hr/> <p>Interview with the Administrator on 5/12/15 at 4:10 p.m. revealed:</p> <ul style="list-style-type: none"> <li>- The Administrator was responsible for staff personnel records.</li> <li>- Both Staff A and Staff B had controlled substance drug screens obtained but they were not in the facility at this time.</li> <li>- She would ensure the drug screens were in the facility as soon as possible and were completed prior to hire.</li> </ul>	{C992}		
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