

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: FCL092140	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 07/15/2015
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NAME OF PROVIDER OR SUPPLIER WRENETTES PLACE	STREET ADDRESS, CITY, STATE, ZIP CODE 7029 SAN JAN HILL COURT RALEIGH, NC 27610
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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 Care Licensure Section conducted an annual survey on 07/15/2015.	C 000		
C 171	<p>10A NCAC 13G .0504(a) Competency Validation For Licensed Health</p> <p>10A NCAC 13G .0504 Competency Validation For Licensed Health Professional Support Tasks (a) A family care home shall assure that non-licensed personnel and licensed personnel not practicing in their licensed capacity as governed by their practice act and occupational licensing laws are competency validated by return demonstration for any personal care task specified in Subparagraph (a)(1) through (28) of Rule .0903 of this Subchapter prior to staff performing the task and that their ongoing competency is assured through facility staff oversight and supervision.</p> <p>This Rule is not met as evidenced by: Based on observation, interview and record review, the facility failed to assure non-licensed personnel were competency validated by return demonstration for Licensed Health Professional Support (LHPS) Tasks as related to ambulation assistance with canes and transfers, and collecting and testing of fingerstick blood samples for two of three facility staff. (Staff A and B). The findings are:</p> <p>1. Review of the staff record for Staff A revealed: - Staff A was hired as a Supervisor and nursing assistant on 5/22/15. - There was no documentation of a LHPS competency validation in the record.</p> <p>Interview on 7/15/15 at 6:12pm with Staff A revealed:</p>	C 171		

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

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C 171	<p>Continued From page 1</p> <ul style="list-style-type: none"> - Two residents in the facility needed assistance with assistive devices of canes and walkers. - Two resident required assistance on occasion with transfers. - Two residents required daily fingerstick blood sugar monitoring (FSBS). <p>Refer to interview on 7/15/15 at 6:30pm with the Administrator.</p> <p>2. Review of the staff record for Staff B revealed:</p> <ul style="list-style-type: none"> - Staff B was hired as a Supervisor on 1/15/14. - There was no documentation of a LHPS competency validation in the record. <p>Interview on 5/15/15 at 4:15pm with Staff B revealed:</p> <ul style="list-style-type: none"> - Two residents in the facility needed assistance with assistive devices of canes. - Two residents were blind, and needed guidance in ambulation and transfers. - She thought she had been checked off for LHPS tasks when she was checked off for medication administration skills. - She has been a Certified Nursing Assistant for more than 10 years. <p>Observation on 5/15/15 at 5:15 p.m. revealed Staff B was assisting a resident in transferring from a sitting position to standing and reminding the resident to use his cane.</p> <p>Interview with a resident revealed one of the two SICs had checked his FSBS daily.</p> <p>Refer to interview on 7/15/15 at 6:30pm with the Administrator.</p> <p>_____</p> <p>Interview on 5/15/15 at 6:30pm with the</p>	C 171		

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C 171	Continued From page 2 Administrator revealed: - She thought all staff had all of their validations completed. She thought that the clinical skills checklist for Medication Administration met the requirement for all skilled tasks validation. - She was unaware that there was a separate checklist for staff providing personal care tasks. - She would ensure all staff would have the LHPS validation completed immediately.	C 171		