

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>FCL034096</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>09/18/2015</b>
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NAME OF PROVIDER OR SUPPLIER  <b>HINES GOOD SAMARITAN HOME</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>3200 OLD GREENSBORO ROAD WINSTON-SALEM, NC 27101</b>
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C 000	Initial Comments	C 000		
C 073	<p>10A NCAC 13G .0314 (c) Floors</p> <p>10A NCAC 13G .0314 Floors</p> <p>(c) All floors shall be kept in good repair</p> <p>This Rule is not met as evidenced by: Type B VIOLATION</p> <p>Based on observations and interviews, the facility failed to assure the floors were maintained in good repair.</p> <p>The findings are:</p> <p>During the facility initial tour on 9/18/15 between 8:30 am and 9:00 am, the following floor concerns and areas of disrepair observed were as follows:</p> <ol style="list-style-type: none"> <li>1. The left side area in the dining room directly under the window air conditioning unit contained a broken base board protruding outward approximately 8 inches long and multiple areas of the floor linoleum were unsecured to the floor and broken.</li> <li>2. Bedroom #3, in the entrance area to the bathroom, the floor linoleum was unsecured to the floor approximately 2 feet in length and protruded upward approximately 1.5 inches.</li> <li>3. The hallway leading to the front door entrance there was approximately 12 inch long strip of baseboard on the left side area of the wall that was unsecured and protruding outward with</li> </ol>	C 073		

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

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C 073	<p>Continued From page 1</p> <p>jagged edges.</p> <p>4. Directly across from the front door the baseboard was missing to the wall directly under the door leading to the upstairs area.</p> <p>5. Bedroom #1, there were multiple areas throughout on the floor where there were missing and damaged areas on the linoleum.</p> <p>Interview on 9/18/15 at 2:00 pm with the Supervisor-in-Charge revealed: -She had been employed at the facility for 3 months. -The floors looked the same since her employment at the facility. -The residents slide the chairs in the dining room when they were getting up from the table and it caused the linoleum to tear. -No repairs on the floors were completed during the 3 months of employment at the facility.</p> <p>Interview on 9/18/15 at 3:00 pm with the Administrator revealed: -She was aware the floors throughout the facility were not in good repair. -She had planned to repair the floors throughout the facility as soon as she could afford to do so. -It would cost a lot of money to make repairs and she had recently hired all new staff to care for the residents.</p> <p>_____</p> <p>A Plan of Protection was not provided by the Administrator.</p> <p>CORRECTION DATE FOR THE TYPE B VIOLATION SHALL NOT EXCEED NOVEMBER 8, 2015.</p>	C 073		

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C 147	Continued From page 2	C 147		
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: TYPE B VIOLATION</p> <p>Based on interview and record review, the facility failed to ensure 1 of 3 sampled staff (Staff A) had a criminal background check in accordance with G.S. 114-19.10 and G.S. 131D-40.</p> <p>The findings are:</p> <p>Review of Staff A's personnel file revealed:</p> <ul style="list-style-type: none"> <li>-Staff A was hired on 5/18/15 as a Supervisor-in-Charge.</li> <li>-Documentation Staff A had a criminal background check dated 11/26/13 from another state.</li> <li>-Staff A had no documentation of a current North Carolina criminal background check completed.</li> </ul> <p>Attempted telephone interview with Staff A on 9/18/15 at 2:30 pm was unsuccessful.</p> <p>Interview on 9/18/15 at 1:45 pm with the Administrator revealed:</p> <ul style="list-style-type: none"> <li>-Staff A was hired as a SIC.</li> <li>-Staff A had moved to North Carolina in May, 2015.</li> <li>-Staff A had a criminal background check dated 11/26/13 from a prior state he resided in.</li> </ul>	C 147		

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C 147	<p>Continued From page 3</p> <p>-She had not completed a criminal background check on Staff A.</p> <p>-It was her assumption Staff A had not lived in North Carolina long enough to have a North Carolina criminal background check completed.</p> <p>Interviews on 9/18/15 at various times with 2 residents revealed there were no complaints regarding services provided by Staff A.</p> <p>On 9/18/15, the Administrator submitted a Plan of Protection as follows:</p> <p>-The Administrator would immediately ensure Staff A had documentation of a criminal background check.</p> <p>-The Administrator would ensure all new employees had documentation of a criminal background check prior to hire.</p> <p>-The Administrator would review all staff personal records for compliance with the state regulations.</p> <p>CORRECTION DATE FOR THE TYPE B VIOLATION SHALL NOT EXCEED NOVEMBER 1, 2015.</p>	C 147		
C 186	<p>10A NCAC 13G .0601 (b)(1) Management And Other Staff</p> <p>10A NCAC 13G .0601 Management And Other Staff</p> <p>(b) At all times there shall be one administrator or supervisor-in-charge who is directly responsible for assuring that all required duties are carried out in the home and for assuring that at no time is a resident left alone in the home without a staff member. Except for the provisions cited in Paragraph (c) of this Rule regarding the occasional absence of the administrator or</p>	C 186		

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C 186	<p>Continued From page 4</p> <p>supervisor-in-charge, one of the following arrangements shall be used: (1) The administrator shall be in the home or reside within 500 feet of the home with a means of two-way telecommunication with the home at all times. When the administrator does not live in the licensed home, there shall be at least one staff member who lives in the home or one on each shift and the administrator shall be directly responsible for assuring that all required duties are carried out in the home;</p> <p>This Rule is not met as evidenced by: TYPE B VIOLATION</p> <p>Based on observations, interviews, and record review, the facility failed to assure the Administrator was in the facility or resided within 500 feet of the facility and staff were directly responsible for all required duties carried out in the home for 6 of 6 residents.</p> <p>The finding are:</p> <p>Observation on 9/18/15 between 8:30 am and 2:00 pm revealed a staff person Supervisor-in Charge (SIC) and the Administrator were in the facility.</p> <p>Interview on 9/18/15 at 11:50 am with the day SIC revealed: -She was hired on 6/1/15 as a SIC. -She worked Monday through Friday 7:00 am to 3:00 pm. -Her duties included cooking, serving meals, and housekeeping. -She was not a Nurse Aide (NA). -She was not a Medication Aide (MA).</p>	C 186		

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C 186	<p>Continued From page 5</p> <ul style="list-style-type: none"> <li>-She had not completed the 25/80 hour personal care training.</li> <li>-The Adminstrator was a MA and was responsible for the administration of medications to the residents.</li> <li>-The Administrator was in the facility daily and on weekends.</li> <li>-She relied on the Administrator being in the facility 2 times daily to administer medications to the residents.</li> <li>-The Administrator had been in the facility and was available via telephone 24/7 for the resident's medications administration.</li> <li>-If a resident requested an "as needed medication" (PRN) she would call the Administraor.</li> <li>-The Adminstrator would come to the facility and give the PRN medication.</li> </ul> <p>Observation on 9/18/15 of the Medication Administration Record (MAR's) for 3 of 3 residents revealed the Admnistrator had initialed documentation administration of all medications to the residents in July, August, and September 2015.</p> <p>Interview on 9/18/15 at 2:15 pm with the night SIC revealed:</p> <ul style="list-style-type: none"> <li>-She was hired on 5/29/15 as a SIC night shift.</li> <li>-Her duties included cooking, serving meals, and housekeeping.</li> <li>-She was not a NA.</li> <li>-She was not a MA.</li> <li>-She had not completed the 25/80 hour personal care training.</li> <li>-The Adminstrator was a MA and was responsible for the administration of medications to the residents.</li> <li>-The Administrator was in the facility every evening and on weekends.</li> </ul>	C 186		

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C 186	<p>Continued From page 6</p> <ul style="list-style-type: none"> <li>-She relied on the Administrator to be in the facility and administer medications to the residents at 8:00 pm.</li> <li>-The Administrator had administered medications to the residents at 8:00 pm since she had been employed at the facility on 5/19/15.</li> <li>-The Administrator had been available 24/7 via telephone for the resident's medication administration.</li> </ul> <p>Interview on 9/18/15 at 3:00 pm with the Administrator revealed:</p> <ul style="list-style-type: none"> <li>-She was responsible for the day to day operations of the facility.</li> <li>-She was the Administrator and a Medication Aide.</li> <li>-She was in the facility everyday and on weekends performing day to day operations in the facility, and had administered medications to the residents.</li> <li>-She visited the facility daily to administer medications to the residents two times daily and had documented on the MAR's.</li> <li>-She lived 4 blocks from the facility and could be at the facility in 5 minutes, which was more than 500 feet away.</li> <li>-She was aware the SICs were not MAs, NAs, or PCAs.</li> <li>-She hired all new staff since the last survey and was in the process of getting the SICs trained as MAs and the 25/80 hour PCS training.</li> <li>-All SIC completed two continuing education classes on 8/24/15 and 9/14/15 on medications and medications to treat depression, no other training was documented in the SIC personnel files.</li> </ul> <p>Interview on 9/18/15 at 1:38 pm with a facility resident revealed:</p> <ul style="list-style-type: none"> <li>-The Administrator had given his medications to</li> </ul>	C 186		

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C 186	<p>Continued From page 7</p> <p>him on the morning of 9/18/15. -The Administrator came to the facility two times a day to administer medications. -The Administrator had administered medications to him over the past 3 months. -He required no assist with activities of daily living and was independent with all personal care.</p> <p>Interview on 9/18/15 at 3:15 pm with a second resident revealed: -He had lived at the facility for 3 years. -The Administrator had administered his medications on 9/18/15. -The Administrator was in the facility everyday to administer medications. -He had no complaints with medications being administered on time. -He required no assist with activities of daily living or with his personal care.</p> <p>On 9/18/15, the Administrator submitted a Plan of Protection as follows: -The Administrator would immediately hire a full time Medication Aide for the facility. -The Administrator would have the SIC complete the Medication Aide training by 4 weeks. -The Administrator will continue to be in the facility daily and weekend and be available via telephone 24/7 to assure resident's needs are met.</p> <p>CORRECTION DATE FOR THE TYPE B VIOLATION SHALL NOT EXCEED NOVEMBER 1, 2015.</p>	C 186		
C 912	<p>G.S. 131D-21(2) Declaration of Residents' Rights</p> <p>G.S. 131D-21 Declaration of Resident's Rights Every resident shall have the following rights: 2. To receive care and services which are</p>	C 912		

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C 912	<p>Continued From page 8</p> <p>adequate, appropriate, and in compliance with relevant federal and state laws and rules and regulations.</p> <p>This Rule is not met as evidenced by: Based on observations, interviews, and record reviews, the facility failed to ensure care and services were provided which were adequate, appropriate, and in compliance with relevant federal and state laws and rules and regulations regarding, Floors in good repair, qualifications of Criminal Background Checks, and Management and Other Staff.</p> <p>A. Based on observations and interviews, the facility failed to assure the floors were maintained in good repair. [Refer to Tag 0073, 10 A NCAC 13G. 0314(c) (TYPE B VIOLATION).]</p> <p>B. Based on interview and record review, the facility failed to ensure 1 of 3 sampled staff (Staff A) had a criminal background check in accordance with G.S. 114-19.10 and G.S. 131D-40. [Refer to Tag 0147, 10A NCAC 13G .0406(7) (TYPE B VIOLATION).]</p> <p>C. Based on observations, interviews, and record review, the facility failed to assure the Administrator was in the facility or resided within 500 feet of the facility and staff were directly responsible for all required duties carried out in the home for 6 of 6 residents. [Refer to Tag 0186, 10 A NCAC 13G .0601(b)(1) (TYPE B VIOLATION).]</p>	C 912		
C992	G.S. § 131D-45 G.S. § 131D-45. Examination and screening for	C992		

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C992	<p>Continued From page 9</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> <p>This Rule is not met as evidenced by: Based on interviews and record reviews, the facility failed to assure an examination and</p>	C992		

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C992	<p>Continued From page 10</p> <p>screening for the presence of controlled substance was performed for 3 of 3 sampled staff (Staff A, B, and C) hired after 10/1/2013 before the employees begin working at he facility.</p> <p>The findings are:</p> <p>A. Review of Staff A's personnel file revealed: -Staff A was hired on 5/18/15 as a Supervisor-in-Charge. -Staff A had no documentation of a consent or completion of controlled substance examination or screening.</p> <p>Attempted telephone interview with Staff A on 9/18/15 at 2:30 pm was unsuccessful.</p> <p>Refer to interview on 9/18/15 at 3:00 pm with the Administrator.</p> <p>B. Review of Staff B's personnel file revealed: -She was hired on 6/1/15 as a Supervisor-in-Charge (SIC). -She worked Monday through Friday 7:00 am to 3:00 pm. -Her duties included cooking, serving meals, and housekeeping. -Staff B had no documentation of a consent or completion of controlled substance examination or screening.</p> <p>Interview on 9/18/15 at 2:15 pm with Staff B revealed: -She worked weekends at the facility as a SIC. -Her duties included cooking, serving meals, and housekeeping. -She was not aware of the drug screen requirements prior to employment. -She had not completed a drug screen prior to employment at the facility.</p>	C992		

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C992	<p>Continued From page 11</p> <p>Refer to interview on 9/18/15 at 3:00 pm with the Administrator.</p> <p>C. Review of Staff C's personnel file revealed: -Staff C was hired on 5/29/15 as a Supervisor-in-Charge (SIC). -There was no documentation of a consent or completion of controlled substance examination or screening.</p> <p>Interview on 9/18/15 at 2:15 pm with Staff C revealed: -She worked weekends at the facility as a SIC. -Her duties included cooking, serving meals, and housekeeping. -She was unaware of the drug screen requirements prior to employment. -She had not completed a drug screen prior to employment at the facility.</p> <p>Refer to interview on 9/18/15 at 3:00 pm with the Administrator.</p> <p>Interview on 9/18/15 at 3:00 pm with the Administrator revealed: -She was responsible for the day to day operations of the facility. -She was responsible for hiring new staff as well as the completion of new hires personnel records. -She was responsible for staff file audits. -She would immediately obtain drug screens on all 3 SICs working in the facility.</p>	C992		