

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  fcl041076	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING: _____	(X3) DATE SURVEY COMPLETED  10/12/2015
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NAME OF PROVIDER OR SUPPLIER  
**EMANUEL HOUSE ASSISTED LIVING**

STREET ADDRESS, CITY, STATE, ZIP CODE  
1030 ALAMANCE COURT  
GREENSBORO, NC 27406

(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 10/09/2015 with an exit conference via telephone on 10/12/2015.	C 000		
C 165	<p>10A NCAC 13G .0502 Personal Care Training And Competency Program</p> <p>10A NCAC 13G .0502 Personal Care Training And Competency Program Approval</p> <p>(a) The 25 hour training specified in Rule .0501 of this Section shall consist of at least 15 hours of classroom instruction, and the remaining hours shall be supervised practical experience. Competency evaluation shall be conducted in each of the following areas:</p> <p>(1) personal care skills;</p> <p>(2) cognitive, behavioral and social care for all residents and including interventions to reduce behavioral problems for residents with mental disabilities, and;</p> <p>(3) residents' rights as established by G.S. 131D-21.</p> <p>(b) The 80-hour training specified in Rule .0501 of this Section shall consist of at least 34 hours of classroom instruction and at least 34 hours of supervised practical experience. Competency evaluation shall be conducted in each of the following areas:</p> <p>(1) observation and documentation;</p> <p>(2) basic nursing skills, including special health-related tasks;</p> <p>(3) personal care skills;</p> <p>(4) cognitive, behavioral and social care for all residents and including interventions to reduce behavioral problems for residents with mental disabilities;</p> <p>(5) basic restorative services; and</p> <p>(6) residents' rights as established by G.S.</p>	C 165	<p>The 25/80 hour personnell training was scheduled for employee.</p> <p>All other staff was audited for proof of PCS training hours, with evidence being in personnell file.</p> <p>Any new employee shall show evidence of having the required PCS training prior to hire.</p> <p>All staff will have their Personnell file audited by the administrator monthly to ensure compliance with all trainings and required education.</p>	10/13/2015

Division of Health Service Regulation  
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

*Nikita Blakeney-Williams*

*Owner - RN-BSN*

*11-16-2015*

STATE FORM

6899

681411

If continuation sheet 1 of 12

*Reviewed & Approved  
Sherry Hays 11/25/15*



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C 165	<p>Continued From page 1</p> <p>131D-21.</p> <p>(c) The following requirements shall apply to the 25 and 80-hour training specified in Rule .0501 of this Section:</p> <p>(1) The training shall be conducted by an individual or a team of instructors with a coordinator. The supervisor of practical experience and instructor of content having to do with personal care tasks or basic nursing skills shall be a registered nurse with a current, unencumbered license in North Carolina and with two years of clinical or direct patient care experience working in a health care, home care or long term care setting. The program coordinator and any instructor of content that does not include instruction on personal care tasks or basic nursing skills shall be a registered nurse, licensed practical nurse, physician, gerontologist, social worker, psychologist, mental health professional or other health professional with two years of work experience in adult education or in a long term care setting; or a four-year college graduate with four years of experience working in the field of aging or long term care for adults.</p> <p>(2) A trainee participating in the classroom instruction and supervised practical experience in the setting of the trainee's employment shall not be considered on duty and counted in the staff-to-resident ratio.</p> <p>(3) Training shall not be offered without a qualified instructor on site.</p> <p>(4) Classroom instruction shall include the opportunity for demonstration and practice of skills.</p> <p>(5) Supervised practical experience shall be conducted in a licensed adult care home or in a facility or laboratory setting comparable to the work setting in which the trainee will be</p>	C 165		

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C 165	<p>Continued From page 2</p> <p>performing or supervising the personal care skills.</p> <p>(6) All skills shall be performed on humans except for intimate care skills, such as perineal and catheter care, which may be conducted on a mannequin.</p> <p>(7) There shall be no more than 10 trainees for each instructor for the supervised practical experience.</p> <p>(8) A written examination prepared by the instructor shall be used to evaluate the trainee's knowledge of the content portion of the classroom training. The trainee shall score at least 70 on the written examination. Oral testing shall be provided in the place of a written examination for trainees lacking reading or writing ability.</p> <p>(9) The trainee shall satisfactorily perform all of the personal care skills specified in Rule .0501(h) and the skills specified in 10A NCAC 13G .0401(j) of this Section for the 25-hour training and in Rule .0501(h), (i) and (j) of this Section for the 80-hour training. The instructor shall use a skills performance checklist for this competency evaluation that includes, at least, all those skills specified in Rules .0501(h) and .0501(j) of this Section for the 25-hour training and all those skills specified in Rules .0501(h), (i) and (j) of this Section for the 80-hour training. Satisfactory performance of the personal care skills and interpersonal and behavioral intervention skills means that the trainee performed the skill unassisted; explained the procedure to the resident; explained to the instructor, prior to or after the procedure, what was being done and why it was being done in that way; and incorporated the principles of good body mechanics, medical asepsis and resident safety and privacy.</p>	C 165		

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C 165	<p>Continued From page 3</p> <p>(10) The training provider shall issue to all trainees who successfully complete the training a certificate, signed by the registered nurse who conducted the skills competency evaluation, stating that the trainee successfully completed the 25 or 80-hour training. The trainee's name shall be on the certificate. The training provider shall maintain copies of the certificates and the skills evaluation checklists for a minimum of five years.</p> <p>(d) An individual, agency or organization seeking to provide the 25 or 80-hour training specified in Rule .0501 of this Section shall submit the following information to the Adult Care Licensure Section of the Division of Facility Services:</p> <ol style="list-style-type: none"> <li>(1) an application which is available at no charge by contacting the Division of Facility Services, Adult Care Licensure Section, 2708 Mail Service Center, Raleigh, North Carolina 27699-2708;</li> <li>(2) a statement of training program philosophy;</li> <li>(3) a statement of training program objectives for each content area;</li> <li>(4) a curriculum outline with specific hours for each content area;</li> <li>(5) teaching methodologies, a list of texts or other instructional materials and a copy of the written exam or testing instrument with an established passing grade;</li> <li>(6) a list of equipment and supplies to be used in the training;</li> <li>(7) procedures or steps to be completed in the performance of the personal care and basic nursing skills;</li> <li>(8) sites for classroom and supervised practical experience, including the specific settings or rooms within each site;</li> <li>(9) resumes of all instructors and the program coordinator, including current RN certificate numbers as applicable;</li> </ol>	C 165		

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C 165	<p>Continued From page 4</p> <p>(10) policy statements that address the role of the registered nurse, instructor to trainee ratio for the supervised practical experience, retention of trainee records and attendance requirements;</p> <p>(11) a skills performance checklist as specified in Subparagraph (c)(9) of this Rule; and</p> <p>(12) a certificate of successful completion of the training program.</p> <p>(e) The following requirements shall apply to the competency evaluation for purposes of exempting adult care home staff from the 25 or 80-hour training as required in Rule .0501 of this Section:</p> <p>(1) The competency evaluation for purposes of exempting adult care home staff from the 25 and 80-hour training shall consist of the satisfactory performance of personal care skills and interpersonal and behavioral intervention skills according to the requirement in Subparagraph (c) (9) of this Rule.</p> <p>(2) Any person who conducts the competency evaluation for exemption from the 25 or 80-hour training shall be a registered nurse with the same qualifications specified in Subparagraph (c)(1) of this Rule.</p> <p>(3) The competency evaluation shall be conducted in a licensed adult care home or in a facility or laboratory setting comparable to the work setting in which the participant will be performing or supervising the personal care skills.</p> <p>(4) All skills being evaluated shall be performed on humans except for intimate care skills such as perineal and catheter care, which may be performed on a mannequin.</p> <p>(5) The person being competency evaluated in the setting of the person's employment shall not be considered on duty and counted in the staff-to-resident ratio.</p>	C 165		

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C 165	<p>Continued From page 5</p> <p>(6) An individual, agency or organization seeking to provide the competency evaluation for training exemption purposes shall complete an application available at no charge from the Division of Facility Services, Adult Care Licensure Section, 2708 Mail Service Center, Raleigh, North Carolina 27699-2708 and submit it to the Adult Care Licensure Section along with the following information:</p> <p>(A) resume of the person performing the competency evaluation, including the current RN certificate number;</p> <p>(B) a certificate, with the signature of the evaluating registered nurse and the participant's name, to be issued to the person successfully completing the competency evaluation;</p> <p>(C) procedures or steps to be completed in the performance of the personal care and basic nursing skills;</p> <p>(D) a skills performance checklist as specified in Subparagraph (c)(9) of this Rule; a site for the competency evaluation; and a list of equipment, materials and supplies;</p> <p>(E) a site for the competency evaluation; and</p> <p>(F) a list of equipment, materials and supplies.</p> <p>This Rule is not met as evidenced by: Based on record review and interview, the facility failed to assure 1 of 2 staff who provided personal care to residents (Staff B) had completed the 25/80 hour personal care training.</p> <p>The findings are:</p> <p>Review of Staff B's personnel file on 10/09/15 revealed: -Staff B was hired on 06/21/15 as a Supervisor-in-Charge/Medication Aide (SIC/MA).</p>	C 165		

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C 165	<p>Continued From page 6</p> <p>-There was no documentation of Staff B completing the 25/80 hour personal care services training.</p> <p>Telephone interview with Staff B on 10/09/15 at 12:35pm revealed: -She was not sure if she completed the personal care services training. -Her responsibilities included assisting residents with personal care needs, laundry, housekeeping and preparing meals and snacks. -Her previous employer had all of her personnel records, but refused to provide a copy to her current employer. -She was employed as a MA prior to working at this facility.</p> <p>Interview with the Administrator on 10/09/15 at 1:00pm revealed: -She was not aware the Staff B needed 25/80 hours of personal care training. -Staff B had completed the personal care training however; Staff B was not able to provide the documentation from her previous employer. -There were no residents in the facility that needed personal care assistance such as bathing, dressing etc. -She would schedule the 25/80 hour personal care services training for Staff B.</p>	C 165		
C 176	<p>10A NCAC 13G .0507 Training on Cardio-Pulmonary Resuscitation</p> <p>10A NCAC 13G .0507 Training on Cardio-Pulmonary Resuscitation Each family care home shall have at least one staff person on the premises at all times who has completed within the last 24 months a course on cardio-pulmonary resuscitation and choking</p>	C 176	<p>Employee received CPR training on 10/12/15 with a copy of certification in her personal file.</p> <p>Any new employee will have current CPR certification</p>	

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C 176	<p>Continued From page 7</p> <p>management, including the Heimlich maneuver, provided by the American Heart Association, American Red Cross, National Safety Council, American Safety and Health Institute and Medic First Aid, or by a trainer with documented certification as a trainer on these procedures from one of these organizations. If the only staff person on site has been deemed physically incapable of performing these procedures by a licensed physician, that person is exempt from the training.</p> <p>This Rule is not met as evidenced by: TYPE B VIOLATION</p> <p>Based on record review and interview, the facility failed to provide documentation of current training on Cardio-Pulmonary Resuscitation (CPR) and choking management, including the Heimlich Maneuver, for 1 of 3 sampled staff (Staff C).</p> <p>The findings are:</p> <p>Review of Staff C's personnel record revealed: -Staff C was hired on 08/03/15 as a Supervisor-in-Charge/Medication Aide (SIC/MA). -Staff C's CPR card on file expired 05/20/13.</p> <p>Review of Staff C's work scheduled revealed: -Staff C worked from 8:00am on 09/30/15 to 8:00am on 10/02/15 as the only staff member on duty. -Staff C worked from 8:00am on 10/05/15 to 8:00am on 10/07/15 as the only staff member on duty. -Staff C worked from 8:00am on 10/09/15 to 8:00am on 10/12/15 as the only staff member on duty.</p>	C 176	<p>All employees were audited for current CPR certification. All staff Presented with current CPR certificate.</p> <p>Employee files will be audited on a monthly basis to ensure compliance. Any employee needing to be recertified within 30 days will schedule test and obtain a current/updated certification. This audit will be conducted by the Administrator.</p>	

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C 176	<p>Continued From page 8</p> <p>Interview with the Administrator on 10/09/15 at 12:30pm revealed: -She was not aware Staff C's CPR had expired. -She was responsible for auditing staff personnel records. -She was responsible for scheduling required staff training. -Staff C worked 2 days on and 2 days off and worked every other weekend. -There were 5 residents currently residing in the home. -She would schedule Staff C for a CPR course.</p> <p>Interview with Staff C on 10/09/15 at 12:50pm revealed: -She thought her CPR was current. -She contacted her other employer to obtain an updated CPR card. -She was unable to provide documentation of a current CPR card.</p> <p>Second interview with the Administrator on 10/09/15 at 1:00pm revealed: -She had scheduled Staff C for a CPR class on 10/23/15. -She would place a copy of completed CPR in Staff C's file.</p> <p>The facility submitted a Plan of Protection as follows: -Staff C had taken the recertification CPR class and was awaiting CPR card. -Any employee prior to hire will show proof of CPR credentials. Employee files will be monitored by the Administrator on a monthly basis to ensure all needed credentials are in place and valid.</p> <p>DATE OF CORRECTION FOR THE TYPE B VIOLATION SHALL NOT EXCEED, NOVEMBER 30, 2015.</p>	C 176		

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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 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 observation, interview and record review the facility failed to ensure residents received care and services which were adequate, appropriate and in compliance with relevant federal and state laws and rules and regulations regarding cardio-pulmonary resuscitation (CPR) training.</p> <p>The findings are:  Based on record review and interview, the facility failed to provide documentation of current training on Cardio-Pulmonary Resuscitation (CPR) and choking management, including the Heimlich Maneuver, for 1 of 3 sampled staff (Staff C). [Refer to Tag 0176 10A NCAC 13G .0507 (Type B Violation)].</p>	C 912	<p>all staff personnel file was audited for evidence of CPR and choking management. all staff had proof of compliance except 1. This employee obtained required training on 10/12/2015.</p> <p>all new employees will show proof of having both CPR and choking management training prior to hire.</p> <p>all staff will have their personnel records audited on a monthly basis by administrator to ensure compliance. Any certification expiring within the 90 day period will be scheduled for recertification.</p>	10/12/15
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</p>	C 934	<p>All staff received the infection control training by registered nurse.</p>	10/13/15

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C 934	<p>Continued From page 10</p> <p>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 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 3 sampled staff (Staff A and Staff B) completed the state mandatory annual infection prevention training for Medication Aides (MA).</p> <p>The findings are:</p> <p>A. Review of Staff A's personnel record revealed: -Staff A was hired as Administrator on 03/05/12. -Staff A passed the Medication Aide test on 07/25/12. -Staff A completed the Medication Clinical Skills checklist on 08/08/12. -Staff A last completed infection prevention training on 04/26/14.</p> <p>Interview with Administrator (Staff A) on 10/09/15 at 12:00pm revealed: -She was not aware that all staff, including herself who worked as a Medication Aide were required to complete annual infection prevention training. -She was responsible for auditing all staff personnel records. -She was responsible for scheduling any required staff training.</p>	C 934	<p>Any new employee will show proof of having the infection control training.</p> <p>All personelle files will be audited by administrator on a monthly basis to ensure compliance with required trainings and education.</p>	

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C 934	Continued From page 11  -She would schedule the infection control training for the staff immediately.	C 934		