

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL045115	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED R 04/07/2016
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NAME OF PROVIDER OR SUPPLIER CHERRY SPRINGS VILLAGE	STREET ADDRESS, CITY, STATE, ZIP CODE 358 CLEAR CREEK ROAD HENDERSONVILLE, NC 28792
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{D 000}	Initial Comments The Adult Care Licensure Section and the Henderson County Department of Social Services conducted a follow-up survey and a complaint investigation on April 6-7, 2016. The complaint investigation was initiated by the Henderson County Department of Social Services on March 11, 2016.	{D 000}	Responses to the cited deficiencies do not constitute an admission or agreement by the facility of the truth of the facts alleged or conclusions set forth in the Statement of Deficiencies or Corrective Action Report; the Plan of Correction is prepared solely as a matter of compliance with State law.	
D912	G.S. 131D-21(2) Declaration of Residents' Rights G.S. 131D-21 Declaration of Residents' 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. This Rule is not met as evidenced by: Based on observations, interviews, and record reviews, 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 medication aide training and competency. The findings are: Based on interviews and record reviews, the facility failed to assure 2 of 3 sampled Staff (Staff B and C), who were hired after 10/1/13 as Medication Aides (MA), had successfully passed the state written medication examination within 60 days after successful completion of the clinical skills validation portion of a competency evaluation. (Refer to Tag 935, G.S. 131D-4.5B(b) Adult Care Home Medication Aides Training and	D912	D912 G.S. 131 D-21 1. Cherry Springs Village shall assure Residents rights are upheld at all times, so every resident will receive care and services which are adequate, appropriate and in compliance with Federal and state laws, rules and regulations 2. All direct care staff was provided with a review of Resident rights including a Q&A session for	

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE: Amy Hamilton TITLE: ED (X6) DATE: 5/12/16

*Johnnie
and a copy
JPH
5/31/16*

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D912	Continued From page 1 Competency (Unabated Type B Violation.)	D912	Clarifications on 4/22/16.	
D916	<p>G.S. 131D-21(6) Declaration of Resident's Rights</p> <p>G.S. 131D-21 Declaration of Resident's Rights Every resident shall have the following rights:</p> <p>6. To have his or her personal and medical records kept confidential and not disclosed without the written consent of the individual or guardian, which consent shall specify to whom the disclosure may be made, except as required by applicable state or federal statute or regulation or by third party contract. It is not the intent of this section to prohibit access to medical records by the treating physician except when the individual objects in writing. Records may also be disclosed with the written consent of the individual to agencies, institutions or individuals which are providing emergency medical services to the individual. Disclosure of information shall be limited to that which is necessary to meet the emergency.</p> <p>This Rule is not met as evidenced by: Based on observations and interviews, the facility failed to maintain 51 of 51 resident records and personal information in a confidential manner.</p> <p>The findings are:</p> <p>Observation of the main entrance area on 4/6/16 at 8:00pm revealed:</p> <ul style="list-style-type: none"> -In the hallway, just beyond the front desk along the left wall, was a rolling metal rack that contained resident records. -Each resident record had a name label on the spine of the binder containing the record. -There was no staff in the Administrative offices near the records. 	D916	<p>3. Cherry Springs management will continue to monitor for compliance.</p> <p>D916 G.S. 131D-21(6) Cherry Springs Village will assure every resident have the right to have his or her personal and medical records kept confidential and not disclosed without written consent of the individual or responsible party.</p> <p>1. On 4/15/16 a room was designated for resident's charts that has a lockable door.</p> <p>2. Residents information will remain behind locked doors when not in use, with only direct care staff having access to residents</p>	

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D916	<p>Continued From page 2</p> <ul style="list-style-type: none"> -Two medication aides (MA) were at their respective medication carts, down the opposite hallway in the vicinity of the dining room. -A housekeeper was at her housekeeping cart in the vicinity of the main entrance. -Residents were observed moving past the resident records in the hallway. <p>Observation of the main entrance area on 4/6/16 at 11:30am revealed:</p> <ul style="list-style-type: none"> -The metal rack containing the resident records remained unmoved. -No Administrative staff were in the offices near the records. -No staff was present at the front desk. <p>Observation of the main entrance area on 4/6/16 at 4:00pm revealed:</p> <ul style="list-style-type: none"> -The metal rack containing the resident records remained unmoved. -A staff member was present at the front desk. -Several Administrative staff were in the offices near the records. <p>Observation of the main entrance area on 4/7/16 at 5:45am revealed:</p> <ul style="list-style-type: none"> -The metal rack containing the resident records remained unmoved. -No Administrative staff were in the offices near the records. -No staff was present at the front desk. <p>Interview with Staff A, Personal Care Aide on 4/7/16 at 5:55am revealed:</p> <ul style="list-style-type: none"> -The resident records were kept in the hallway "all the time." -The offices were locked at night. -The medication aide needed access to resident records in the event a resident was transferred out of the facility. 	D916	Charts.	

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D916	Continued From page 3 Observation of the main entrance area on 4/7/16 at 6:30am revealed: -The metal rack containing the resident records remained unmoved -Three residents, one in a wheelchair and two who were ambulatory, were in vicinity of the front entrance. -No staff was present at the front desk. Interview with the Administrator on 4/7/16 at 7:00am revealed: -Resident records had been placed in the hallway during the day shift and locked in the RCC's office "at night." -The MA had access to the records at night but the records were eventually moved into the hallway. -Resident records needed to be out on third shift for medication aide access if residents were transferred. -Resident records were placed in the hallway when staff were known to be around them. A second interview with the Administrator on 4/7/16 at 11:00am revealed: -She was not aware of a policy or procedure for maintaining resident medical records and personal information in a confidential manner or location. -She would find an area away from public access to safely keep the resident records.	D916		
(D935)	G.S. § 131D-4.5B(b) ACH Medication Aides; Training and Competency G.S. § 131D-4.5B (b) Adult Care Home Medication Aides; Training and Competency Evaluation Requirements.	(D935)		

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(D935)	<p>Continued From page 4</p> <p>(b) Beginning October 1, 2013, an adult care home is prohibited from allowing staff to perform any unsupervised medication aide duties unless that individual has previously worked as a medication aide during the previous 24 months in an adult care home or successfully completed all of the following:</p> <p>(1) A five-hour training program developed by the Department that includes training and instruction in all of the following:</p> <ul style="list-style-type: none"> a. The key principles of medication administration. b. The federal Centers for Disease Control and Prevention guidelines on infection control and, if applicable, safe injection practices and procedures for monitoring or testing in which bleeding occurs or the potential for bleeding exists. <p>(2) A clinical skills evaluation consistent with 10A NCAC 13F .0503 and 10A NCAC 13G .0503.</p> <p>(3) Within 60 days from the date of hire, the individual must have completed the following:</p> <ul style="list-style-type: none"> a. An additional 10-hour training program developed by the Department that includes training and instruction in all of the following: <ul style="list-style-type: none"> 1. The key principles of medication administration. 2. The federal Centers of Disease Control and Prevention guidelines on infection control and, if applicable, safe injection practices and procedures for monitoring or testing in which bleeding occurs or the potential for bleeding exists. b. An examination developed and administered by the Division of Health Service Regulation in accordance with subsection (c) of this section. 	(D935)		

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(D935)	<p>Continued From page 5</p> <p>This Rule is not met as evidenced by: FOLLOW-UP TO A TYPE B VIOLATION</p> <p>Based on these findings, the previous Type B Violation was not abated.</p> <p>Based on interviews and record reviews, the facility failed to assure 2 of 3 sampled Staff (Staff B and C), who were hired after 10/1/13 as Medication Aides (MA), had successfully passed the state written medication examination within 60 days after successful completion of the clinical skills validation portion of a competency evaluation.</p> <p>The findings are:</p> <p>A. Review of Staff B's personnel and training record revealed: -She was hired on 12/18/15 as a Medication Aide (MA). -Documentation Staff B had received the 5-hour medication administration training on 12/18/15. -Documentation Staff B's medication clinical skills were validated on 12/30/15. -There was no documentation Staff B had successfully completed the state written medication examination within 60 days after successfully completing the medication clinical skills validation.</p> <p>Review of Staff B's time punches for the month of March 2016 revealed she had worked as a 2nd shift MA on 3/1, 2, 6, 7, 8, 12, 13, 14, 15, 16, 19 and 29.</p> <p>Review of March 2016 electronic Medication Administration Records (eMARS) for 2 randomly</p>	{D935}	<p>D935 GS.131 D45 B(b)</p> <p>Cherry Springs Village will assure to maintain the competency of all medication aide staff to comply with state and federal rules and regulations.</p> <p>1. Any medication aide who does not successfully complete and pass the written medication exam will immediately be removed from the med cart.</p> <p>2. 4/7/16 medication aide (c) successfully passed the written state required exam along with completion of the 15 hour medication aide training. Management verified completion prior to medication aide returning to med cart.</p> <p>3. Medication aide (B)</p>	

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{D935}	<p>Continued From page 6</p> <p>observed residents during a medication pass on 4/6/16 at 8:30am revealed documentation of medications administered by Staff B.</p> <p>Review of Staff B's time punches for the month of April 2016 revealed: -She had worked as a 2nd shift MA on 4/1 and 4/2. -She had worked as a 3rd shift MA on 4/3 and 4/4.</p> <p>Review of April 2016 electronic Medication Administration Records (eMARS) for 5 randomly observed residents during a medication pass on 4/6/16 at 8:30am revealed documentation of medications administered by Staff B.</p> <p>Attempted telephone call to Staff B on 4/7/16 was not returned prior to exit.</p> <p>Refer to Interview with the Business Office Manager on 4/7/16 at 10:30am.</p> <p>Refer to interview with the Resident Care Coordinator on 4/7/16 at 10:45am.</p> <p>Refer to interview with the Administrator on 4/7/16 at 10:55am..</p> <p>B. Review of Staff C's personnel and training record revealed: -She was hired on 1/12/16 as a Medication Aide (MA). -Documentation Staff C had received the 5-hour medication administration training on 1/28/16. -Documentation Staff C's medication clinical skills were validated on 1/28/16. -There was no documentation Staff C had successfully completed the state written medication examination within 60 days after</p>	{D935}	<p>Was removed from the med cart on 4/7/16. Med aide completed medication aide written state exam and passed on 5/2/16. Med-aide will not return to med cart until all required training has been completed and verified by administrator.</p>	

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{D935}	<p>Continued From page 7</p> <p>successfully completing the medication clinical skills validation.</p> <p>Review of Staff C's time punches for March 29, 2016 through April 6, 2016 revealed she had worked the 3rd shift on 3/31, 4/1, 2, 3 and 5.</p> <p>Review of March 2016 electronic Medication Administration Records (eMARS) for 2 randomly observed residents during a medication pass revealed documentation of medications administered by Staff C.</p> <p>Review of April 2016 electronic Medication Administration Records (eMARS) for 5 randomly observed residents during a medication pass revealed documentation of medications administered by Staff C.</p> <p>Interview with the Business Office Manager on 4/7/16 at 10:30am revealed: -She, the Administrator and the Resident Care Coordinator were responsible for ensuring the MA met all of the requirements prior to passing medications. -She was aware the MA had to successfully complete the state written medication examination within 60 days of successfully completing the medication clinical skills validation. -She was uncertain of the date Staff B would be taking the state written examination. -Staff C was taking the state written examination that day (4/7/16).</p> <p>Interview with the Resident Care Coordinator on 4/7/16 at 10:45am revealed: -She, the Administrator and the Business Office Manager were responsible for ensuring the MA met all of the requirements prior to passing</p>	{D935}		

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{D935}	<p>Continued From page 8</p> <p>medications.</p> <p>-She was uncertain as to why Staff B was passing medications if her medication clinical skills validation had been completed on 12/30/15 and she had not taken the state written medication exam.</p> <p>-Staff C was taking the state written medication examination that day (4/7/16).</p> <p>Interview with the Administrator on 4/7/16 at 10:55am revealed:</p> <p>-She was unaware the MA could not pass medications if she had successfully completed the medication clinical skills validation but had not successfully completed the state written medication examination within 60 days.</p> <p>-Staff B was scheduled to take the state written medication examination in June 2016.</p> <p>-Staff B would not be passing medications until after she had successfully completed the state written medication examination on 5/3/16.</p> <p>-Staff C was taking the state written medications examination that day (4/7/16).</p> <p>A Plan of Protection was provided by the facility and included the following:</p> <p>-Staff B was removed from the schedule as a Medication Aide.</p> <p>-She would not be allowed to pass medications until successfully completing the medication test.</p> <p>-All requirements for the Medication Aide training and testing to be completed before the Medication Aide is allowed to pass medication.</p> <p>CORRECTION DATE FOR THIS UNABATED TYPE B VIOLATION SHALL NOT EXCEED APRIL 29, 2016.</p>	{D935}		