

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: FCL082011	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED R 07/15/2016
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NAME OF PROVIDER OR SUPPLIER PINE ACRE FAMILY CARE HOME	STREET ADDRESS, CITY, STATE, ZIP CODE 186 PINE ACRE LANE CLINTON, NC 28328
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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 Licensure Section conducted an annual and follow-up survey on 7/15/16.	C 000		
C 174	<p>10A NCAC 13G .0505(1)(2) Training On Care Of Diabetic Residents</p> <p>10A NCAC 13G .0505 Training On Care Of Diabetic Residents A family care home shall assure that training on the care of residents with diabetes is provided to unlicensed staff prior to the administration of insulin as follows:</p> <p>(1) Training shall be provided by a registered nurse, registered pharmacist or prescribing practitioner.</p> <p>(2) Training shall include at least the following:</p> <p>(a) basic facts about diabetes and care involved in the management of diabetes;</p> <p>(b) insulin action;</p> <p>(c) insulin storage;</p> <p>(d) mixing, measuring and injection techniques for insulin administration;</p> <p>(e) treatment and prevention of hypoglycemia and hyperglycemia, including signs and symptoms;</p> <p>(f) blood glucose monitoring; universal precautions; appropriate administration times; and</p> <p>(g) sliding scale insulin administration.</p> <p>This Rule is not met as evidenced by: Based on observation, interview, and record review, the facility failed to assure 1 of 3 medication aides (Staff A) sampled received training by a licensed health professional on the care of diabetic residents prior to administering insulin to residents. The findings are:</p>	C 174		

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

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C 174	<p>Continued From page 1</p> <p>Review of Staff A's personnel record revealed:</p> <ul style="list-style-type: none"> - Staff A was hired on 7/08/09 as a nursing assistant. - On 5/12/11, Staff A passed her medication administration test and continued to work at the facility as a medication aide. - There was no documentation of training on the care of diabetic residents in Staff A's personnel file. <p>Interview with the Administrator on 7/15/16 at 2:15pm revealed:</p> <ul style="list-style-type: none"> - Staff A should have received her training on the care of diabetic residents from the facility's Licensed Health Professional Service (LHPS) nurse before administering insulin to the residents. - The Administrator was aware Staff A was required to have the training. - Staff A cared for diabetic residents, which included finger sticks for blood sugar checks and administering insulin. - The Administrator could not find a record of diabetic training in Staff A's personnel record. The Administrator will follow-up with the LHPS nurse on Monday (7/18/16) and schedule diabetic training for Staff A as soon as possible. - Staff A was not working at the facility today and would not work until 7/18/16. <p>Review of Resident #1's current FL-2 dated 10/15/15 revealed:</p> <ul style="list-style-type: none"> - The resident had a diagnosis of insulin dependent diabetes. - The resident had an order for fingerstick for blood sugar 1 time a day. - The resident had an order for Lantus 80 units before breakfast and at bedtime. <p>Review of Resident #1's medication</p>	C 174		

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C 174	Continued From page 2 administration records for 6/2016 and 7/2016 revealed staff A administered Lantus insulin 80 units in the morning and at bedtime. The LHPS nurse was not available for interview. Staff A was not available for interview.	C 174		
C 934	G.S.131D-4.5B (a) ACH Infection Prevention Requirements G.S. 131D-4.5B Adult Care Home Infection Prevention Requirements (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 Commission pursuant to G.S. 131D-4.5 This Rule is not met as evidenced by: Non-compliance continues. Based on record review and interview, the facility failed to ensure that 3 of 3 staff (Staffs A, B, and C) had completed annual state infection control training. The findings are: 1. Review of Staff A's personnel record revealed:	C 934		

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C 934	<p>Continued From page 3</p> <ul style="list-style-type: none"> - Staff A was hired on 7/08/09 as a nursing assistant. - On 5/12/11, Staff A passed her medication administration test and continued to work at the facility as a medication aide. -There was no documentation Staff A had completed the annual state infection control training. <p>Staff A was not available for interview.</p> <p>Refer to Administrator interview on 7/15/16 at 2:15pm.</p> <p>2. Review of Staff B's personnel record revealed:</p> <ul style="list-style-type: none"> - Staff B started to work at the facility on 1/29/07 as Co-Administrator. - On 9/29/00, Staff B passed her medication administration test and continued to work at the facility as a medication aide and Co-Administrator. -There was no documentation Staff A had completed the annual state infection control training. <p>Staff A was not available for interview.</p> <p>Refer to Administrator interview on 7/15/16 at 2:15pm.</p> <p>3. Review of Staff C's personnel record revealed:</p> <ul style="list-style-type: none"> - Staff B started to work at the facility on 1/29/07 as Co-Administrator and medication aide. - On 5/0100, Staff C passed his medication administration test and continued to work at the facility as a medication aide and 	C 934		

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C 934	<p>Continued From page 4</p> <p>Co-Administrator. -There was no documentation Staff C had completed the annual state infection control training.</p> <p>Refer to Administrator interview on 7/15/16 at 2:15pm</p> <hr/> <p>Interview with the Administrator on 7/15/16 at 2:15pm revealed: -He did not realize the staff had not received the annual infection control training. -He thought infection control training was done after the last state survey, but could not find any documentation. -He would follow-up on Monday (7/18/16) with the outside provider who should have done the facility 's infection control training and obtain documentation. -If infection control training was not done, he would schedule the training as soon as possible.</p>	C 934		