

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>FCL040009</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>07/27/2016</b>
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NAME OF PROVIDER OR SUPPLIER  <b>SOZO FAMILY CARE HOME</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>2757 MEWBORN CHURCH ROAD SNOW HILL, NC 28580</b>
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C 000	Initial Comments  The Adult Care Licensure Section and the Greene County Department of Social Services conducted an annual survey and complaint investigation on July 27, 2016.	C 000		
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: (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: Based on personnel record reviews and interviews, the facility failed to assure a state-wide criminal background screening was completed for 3 of 3 staff sampled (A, B, C) upon hire in accordance with G.S. 131D-40.</p> <p>The findings are:</p> <p>A. Review of Staff A's personnel record revealed: -Staff A's hire date was 5/2012. -There was a county background check performed on 5/21/12. -There was no documentation of a state wide criminal background screening for Staff A.</p> <p>Interview with Staff A on 7/27/16 at 12:30 PM revealed: -Staff A worked as the Supervisor in Charge (SIC) in the facility. -Staff A had only had a county criminal background screening. -She had worked at the facility when it was under different ownership.</p>	C 147		

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

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C 147	<p>Continued From page 1</p> <p>-She had lived in the state of North Carolina for the last 5 years.</p> <p>Refer to the interview with the Administrator on 7/27/16 at 1:22 PM.</p> <p>B. Review of Staff B's personnel record revealed: -Staff B's hire date was 3/1/16. -There was no documentation of a state wide criminal background screening for Staff B.</p> <p>Telephone interview with Staff B on 7/27/16 at 2:14 PM revealed: -Staff B worked as a caregiver in the facility. -She worked in the facility on the evening/overnight shift. -She had a criminal background check performed from the county but not a state-wide background check. -She had given the copy of the background check to the Administrator. -She had lived in the state of North Carolina for the last 5 years.</p> <p>Refer to the interview with the Administrator on 7/27/16 at 1:22 PM.</p> <p>C. Review of Staff C's personnel record revealed: -Staff C's hire date was 7/1/16. -There was no documentation of a criminal background check.</p> <p>Telephone interview with Staff C on 7/27/16 at 2:20 PM revealed: -Staff C worked as a caregiver at the facility. -She just started working at the facility the beginning of July 2016. -She worked part-time in the facility as a caregiver. -She had not had a criminal background check</p>	C 147		

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C 147	Continued From page 2  performed prior to starting work at the facility in July 2016. -She had lived in the state of North Carolina for the last 5 years.  Refer to the interview with the Administrator on 7/27/16 at 1:22 PM.  _____ Interview with the Administrator on 7/27/16 at 1:22 PM revealed: -She was not aware that all staff hired was required to have a criminal background check prior to starting work. -She would perform online state-wide criminal background checks on all employees today (7/27/16).	C 147		
C 153	10A NCAC 13G .0501 (a) Personal Care Training And Competency  10A NCAC 13G .0501 Personal Care Training And Competency  (a) The facility shall assure that personal care staff and those who directly supervise them in facilities without heavy care residents successfully complete a 25-hour training program, including competency evaluation, approved by the Department according to Rule .0502 of this Section. For the purposes of this Subchapter, heavy care residents are those for whom the facility is providing personal care tasks listed in Paragraph (i) of this Rule. Directly supervise means being on duty in the facility to oversee or direct the performance of staff duties.	C 153		

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C 153	<p>Continued From page 3</p> <p>This Rule is not met as evidenced by: Based on observations, record review and interview, the facility failed to assure 3 of 3 staff sampled (Staff A, B and C) successfully completed the required 25 hour state approved personal care training program and competency evaluation.</p> <p>The findings are:</p> <p>A. Review of Staff A's personnel record revealed: -Staff A's hire date was 5/2012. -Staff A was the Supervisor in Charge (SIC). -There was no documentation of Staff A completing the 25 hour state approved personal care training. -Staff A was not listed as a Nursing Aide on the Health Care Personnel Registry documentation.</p> <p>Interview with Staff A on 7/27/16 at 12:30 PM revealed: -Staff A worked as the Supervisor in Charge (SIC) in the facility. -She was not a Nursing Aide. -She had worked at the facility since it was owned by another owner. -She was the primary day shift employee. -She provided personal care to all residents as they needed. -All the residents required minimal assistance with activities of daily living. -She would assist residents if they needed help dressing. -She cooked the residents meals. -She did not recall any specific personal care aide training.</p> <p>Refer to the interview with the Administrator on 7/27/16 at 1:22 PM.</p>	C 153		

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C 153	<p>Continued From page 4</p> <p>B. Review of Staff B's personnel record revealed: -Staff B's hire date was 3/1/16. -She was hired as a Personal Care Aide. -There was no documentation of Staff B completing the 25 hour state approved personal care training. -Staff B was not listed as a Nursing Aide on the Health Care Personnel Registry documentation.</p> <p>Telephone interview with Staff B on 7/27/16 at 2:14 PM revealed: -Staff B worked as a Personal Care Aide in the facility. -She worked in the facility on the evening/overnight shift. -She was not a Nursing Aide. -She had completed personal care aide training at her previous job but she did not have any documentation of the training. -She had not completed any personal care aide training at this job.</p> <p>Refer to the interview with the Administrator on 7/27/16 at 1:22 PM.</p> <p>C. Review of Staff C's personnel record revealed: -Staff C's hire date was 7/1/16. -She was hired as a Personal Care Aide. -There was no documentation of Staff C completing the 25 hour state approved personal care training. -Staff C was not listed as a Nursing Aide on the Health Care Personnel Registry documentation.</p> <p>Telephone interview with Staff C on 7/27/16 at 2:20 PM revealed: -Staff C worked as a Personal Care Aide at the facility. -She just started working at the facility the beginning of July 2016.</p>	C 153		

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C 153	<p>Continued From page 5</p> <ul style="list-style-type: none"> <li>-She worked part-time in the facility as a Personal Care Aide.</li> <li>-She only worked at the facility short periods of time and did not have to assist the residents.</li> <li>-She had taken the Nursing Aide class but never took the state exam.</li> <li>-She had previously worked as a personal care aide at other facilities.</li> </ul> <p>Interview with the Administrator on 7/27/16 at 1:22 PM revealed she thought Staff C was a Nursing Aide.</p> <p>Refer to the interview with the Administrator on 7/27/16 at 1:22 PM.</p> <p>Interview with the Administrator on 7/27/16 at 1:22 PM revealed:</p> <ul style="list-style-type: none"> <li>-She was not aware that all staff that were not a Nursing Assistant were required to have personal care aide training.</li> <li>-She was not sure if the facility pharmacy that provided other training's, offered the personal care aide training.</li> <li>-She would ensure staff received the required personal care aide training.</li> </ul>	C 153		
C 269	<p>10A NCAC 13G .0904 (c-6) Nutrition And Food Service</p> <p>10A NCAC 13G .0904 Nutrition And Food Service</p> <p>Menus in Family Care Homes:</p> <p>(6) Menus for all therapeutic diets shall be planned or reviewed by a registered dietitian. The facility shall maintain verification of the registered dietitian's approval of the therapeutic diets which shall include an original signature by</p>	C 269		

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C 269	<p>Continued From page 6</p> <p>the registered dietitian and the registration number of the dietitian.</p> <p>This Rule is not met as evidenced by: Based on observations, interviews, and record review, the facility failed to assure menus for 1 of 1 therapeutic diets were planned by a registered dietician and available for staff guidance for 1 of 3 residents (#1) sampled with physician ordered low concentrated sweets (LCS) diet.</p> <p>The findings are:</p> <p>Review of Resident #1's current FL-2 dated 6/6/16 revealed: -Diagnoses included benign essential hypertension, gastro-esophageal reflux disease, hyperlipidemia, cerebral artery occlusion, hypokalemia, arterial fibrillation, gout and diabetes mellitus -A diet order for a low concentrated sweets (LCS) diet. -An order for finger stick blood sugar checks once per week.</p> <p>Interview with Resident #1 on 7/27/16 at 9:40 AM revealed: -He had lived at the facility for about 2 years. -He had been in the hospital for a kidney stone and just been discharged. -He had a history of diabetes but no longer had to take medications to control. -He had been able to manage his blood sugar with only diet. -The facility had very good food. -The Medication Aide checked his blood sugar once a week and the results were always "good"</p>	C 269		

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C 269	<p>Continued From page 7</p> <p>Review of Resident #1's documented finger stick blood sugar results for June 2016 and July 2016 ranged from 88 - 125.</p> <p>Interview with the Supervisor in Charge (SIC) on 7/27/16 at 12:30 PM revealed:</p> <ul style="list-style-type: none"> <li>-She was the primary day shift employee.</li> <li>-She cooked the residents meals whenever she worked.</li> <li>-The residents diet list was on the refrigerator.</li> <li>-There was a menu on the refrigerator that rotated every week.</li> <li>-She did not always follow the menu because the residents would have special request for food.</li> <li>-She tried to give the residents things they liked to eat.</li> <li>-She did not do the grocery shopping.</li> <li>-The Administrator went grocery shopping about twice per month.</li> <li>-She did not add any extra salt to the foods she prepared.</li> <li>-She prepared unsweet and sweet tea for the residents that that were diabetic.</li> <li>-She always tried to bake the meats and had baked the fish served for lunch.</li> <li>-Resident #1 was diabetic but only had his finger stick blood sugar checked once per week.</li> </ul> <p>Interview with the Administrator on 7/27/16 at 12:10 PM revealed:</p> <ul style="list-style-type: none"> <li>-There was a diet list on the refrigerator.</li> <li>-There were 4 weeks of menus on the refrigerator that rotated weekly.</li> <li>-She ordered food from a delivery supplier and picked up fresh meats from a butcher shop.</li> <li>-She would purchase fresh vegetables and fruit.</li> <li>-She was not aware she needed a therapeutic diet menu for any resident that was not on a regular diet.</li> </ul>	C 269		

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C 269	<p>Continued From page 8</p> <ul style="list-style-type: none"> <li>-The Administrator had never been told she needed a dietician to approve the facility's therapeutic diet menus.</li> <li>-The facility used a regular diet menu to prepare meals for the residents.</li> <li>-The regular diet menu had been previously approved at a previous survey.</li> <li>-The Administrator would have a dietician to prepare a menu for any diet that was not a regular diet.</li> </ul> <p>Review of the menu posted in the facility on 7/27/16 revealed:</p> <ul style="list-style-type: none"> <li>-The menu posted was for a regular diet.</li> <li>-There were no therapeutic diets listed for guidance of the food service staff.</li> </ul>	C 269		
C992	<p>G.S. § 131D-45 G.S. § 131D-45. Examination and screening for</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</p>	C992		

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C992	<p>Continued From page 9</p> <p>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 record reviews and interviews, the facility failed to assure a complete screening and examination for the presence of controlled substances was performed for 2 of 2 staff sampled (Staff B and C) hired after 10/01/13.</p> <p>The findings are:</p> <p>A. Review of Staff B's personnel record revealed: -Staff B's hire date was 3/1/16. -There was no documentation of a controlled substance screening.</p> <p>Telephone interview with Staff B on 7/27/16 at 2:14 PM revealed: -Staff B worked as a Personal Care Aide in the facility. -She worked in the facility on the evening/overnight shift. -She had not taken a controlled substance screening to work at the facility.</p>	C992		

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C992	<p>Continued From page 10</p> <p>-She was not told by the Administrator that she needed to take a controlled substance screening.</p> <p>Refer to the interview with the Administrator on 7/27/16 at 1:22 PM.</p> <p>B. Review of Staff C's personnel record revealed: -Staff C's hire date was 7/1/16. -There was no documentation of a controlled substance screening.</p> <p>Telephone interview with Staff C on 7/27/16 at 2:20 PM revealed: -Staff C worked as a Personal Care Aide at the facility. -She just started working at the facility the beginning of July 2016. -She worked part-time in the facility as a Personal Care Aide. -She thought she had taken a controlled substance screening. -She thought the Administrator sent her to take a controlled substance screening. -She was not sure where the results were.</p> <p>Interview with the Administrator on 7/27/16 at 1:22 PM revealed she did not sent Staff C to have a controlled substance screening.</p> <p>Refer to the interview with the Administrator on 7/27/16 at 1:22 PM.</p> <p>Interview with the Administrator on 7/27/16 at 1:22 PM revealed: -She was not aware that all staff hired after 10/01/13 was required to have a controlled substance screening. -There were none of her staff hired after 10/01/13 that had a controlled substance screening. -She would have all staff hired after 10/01/13</p>	C992		

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C992	Continued From page 11 perform a controlled substance screening.	C992		