

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>FCL057003</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>R</b> <b>09/19/2016</b>
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NAME OF PROVIDER OR SUPPLIER  <b>MINTZ FAMILY CARE HOME #3</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>196 MILLER ROAD</b> <b>MARSHALL, NC 28753</b>
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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 Care Licensure Section conducted a follow-up survey on September 15 - 16, 2016 with an exit conference via telephone on September 19, 2016.	{C 000}		
{C 074}	<p>10A NCAC 13G .0315(a)(1) Housekeeping and Furnishings</p> <p>10A NCAC 13G .0315 Housekeeping And Furnishings</p> <p>(a) Each family care home shall:</p> <p>(1) have walls, ceilings, and floors or floor coverings kept clean and in good repair; This Rule shall apply to new and existing homes.</p> <p>This Rule is not met as evidenced by: Based on observation, record review and interviews, the facility failed to keep clean grout in 1 of 2 common resident bathrooms, 1 of 5 ceiling fans and a floor in 1 of 3 resident rooms; and to either repair or replace stained floor tiles in 2 of 2 common resident bathrooms; shower floor tiles, a malfunctioning toilet and a ceiling light globe in 1 of 2 common resident bathrooms; a missing nightlight cover in the hallway, door gaps in 2 of 3 entrances to the facility, missing light bulbs in the living and dining rooms, a malfunctioning ceiling light fixture in 1 of 3 resident rooms, holes in the hallway tub enclosure wall and missing or ripped screens in a resident's window and the main entrance screen door.</p> <p>The findings are:</p> <p>Review of the most current sanitation inspection report dated 5/6/16 revealed: -An overall score of 88. -A 2 point deduction in the category of Floors with</p>	{C 074}		

Division of Health Service Regulation LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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{C 074}	<p>Continued From page 1</p> <p>the comment "All floors in the bathrooms need to be cleaned. Edges of floors where the wall meets and in hard to reach areas need to be cleaned."</p> <p>Observation on 9/15/16 at 11:01AM of the resident room to the left of the hallway exit door, and the hallway exit door itself, revealed: -A light fixture in the ceiling fan with no bulb (the fan worked). -Debris on the floor, along the baseboards and around furniture. -An approximately 2 inch gap along the entire bottom of the door with no threshold on the floor. -When the door was closed, light was plainly visible coming in from the outside.</p> <p>Interview on 9/15/16 at 11:01AM with the resident of the room to the left of the hallway exit door revealed: -The light fixture in the ceiling fan used to flicker, but then stopped working altogether and he could not recall how long this had occurred. -Earlier in the summer, a snake had come into the facility through the gap in the hallway door.</p> <p>Observation on 9/15/16 at 11:05AM of the common resident bathroom on the left side of the hallway revealed: -An approximately 12 inch long by 8 inch high rectangular opening in the tub surround, around the faucet and faucet handles, exposing the inside of the wall. -A pile of drywall material and tiles stacked on the edge of the bathtub.</p> <p>Confidential interview with a resident revealed: -He was taking a bath "a few days ago" and the wall crumbled into the tub. -He was the one who stacked the drywall and tiles on the edge of the tub.</p>	{C 074}		

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{C 074}	<p>Continued From page 2</p> <p>-He was not sure if staff knew about the condition of the tub wall.</p> <p>Interview on 9/15/16 at 11:07AM of Staff B, Supervisor-in-Charge (SIC) (from a sister facility on the property) revealed:                      -Staff D and Staff E were newly hired.                      -Staff D and Staff E were not knowledgeable about facility matters at this point and as she had been on the property since August, 2016 she might be able to answer questions.                      -She did not know anything about the tub wall.                      -A snake did come into the facility a few weeks prior, but it was caught and removed outside.</p> <p>Interview on 9/15/16 at 11:33AM with Staff E revealed he had pickup up the drywall pieces and tile from the edge of the tub and discarded them in the kitchen trash.</p> <p>Observation on 9/15/16 at 11:33AM of the kitchen trash with Staff E present revealed the drywall pieces and tile in the kitchen trash.</p> <p>Further observation on 9/15/16 at 11:35AM of the common resident bathroom on the left side of the hallway revealed:                      -Darkened stained grout along the top of the tub where it made contact with the tile on the tub walls.                      -Darkened stained floor tile around the base of the toilet bowl.</p> <p>Observation on 9/15/16 at 11:35AM of the common resident bathroom on the right side of the hallway revealed:                      -Numerous missing 1 inch square floor tiles around the floor drain in the shower.                      -When flushing the toilet, the bowl did not completely empty unless the flush handle was</p>	{C 074}		

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{C 074}	<p>Continued From page 3</p> <p>held down.</p> <ul style="list-style-type: none"> <li>-A missing globe for the ceiling light fixture.</li> <li>-Darkened stained floor tile around the base of the toilet bowl and between the toilet bowl and shower.</li> </ul> <p>Observation on 9/15/16 at 11:45AM of the resident hallway revealed:</p> <ul style="list-style-type: none"> <li>-An approximately 6 inch diameter circular hole in the drywall where the inside hallway door exit knob made contact with the wall.</li> <li>-No light cover on the wall-installed nightlight between the laundry room and bathroom doors (the light was on).</li> <li>-Numerous alive winged insects (commonly known as "stinkbugs") on the ceiling.</li> </ul> <p>Observation on 9/15/16 at 11:45AM of the living room revealed:</p> <ul style="list-style-type: none"> <li>-The inside door was opened and the screen door was wide open with no automatic door closer noted on the door or door frame.</li> <li>-A three-bulb light fixture attached to the ceiling fan with no light bulbs in any of the sockets and no other light source in the living room.</li> <li>-When the ceiling fan was shut off, a thick coating of dust was noted on the edges of the fan blades.</li> </ul> <p>Observation on 9/15/16 at 11:50AM of the dining room revealed a three-bulb light fixture attached to the ceiling fan with only one light bulb in a sockets (the light was on) and no other light source in the dining room.</p> <p>Observation on 9/15/16 at 11:55AM of the windows of the first resident room on the left of the hallway revealed:</p> <ul style="list-style-type: none"> <li>-Both windows were closed.</li> <li>-The window closest to the main entrance did not have a screen.</li> </ul>	{C 074}		

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{C 074}	<p>Continued From page 4</p> <p>Observation on 9/15/16 at 11:55AM of the front entrance revealed the wall sconce light to the right of the entrance did not come on by the switch just inside the door.</p> <p>Confidential interview with a second resident revealed: -The "front porch light went out two days ago." -A "black snake" had come into the facility through the gap in the back (hallway) door. -"Snakes and spiders" had been seen in the facility.</p> <p>Observation on 9/15/16 at 12:04PM of the kitchen revealed: -The inside door was open. -The screen door was closed but light from outside could be seen through an approximately 2 inch gap along the entire bottom of the screen door. -The bottom of the screen door did not make contact with the metal threshold on the floor.</p> <p>Interview on 9/15/16 at 12:30PM the former Staff F, SIC, revealed: -A resident had reported to her that one piece of tile from the tub wall fell off, which was shown to her. -When the Administrator/Owner was at the facility with a technician to look at door alarms, he was made aware of the tub wall and stated it would get repaired. -"The next thing I knew it [hole in tub wall] was huge." -She did not know if the residents had used the tub since the hole appeared.</p> <p>Observation on 9/16/16 at 2:03PM of the main entrance revealed:</p>	{C 074}		

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{C 074}	<p>Continued From page 5</p> <ul style="list-style-type: none"> <li>-The inside door was open.</li> <li>-The screen door was closed but the screen was ripped at the bottom corner of the window opening in the screen door.</li> </ul> <p>Observation on 9/16/16 at 2:04PM of the living room revealed numerous live "stinkbugs" attached to the living room window curtains.</p> <p>Observation on 9/16/16 at 2:15PM of the kitchen revealed:</p> <ul style="list-style-type: none"> <li>-The inside door was open.</li> <li>-The screen door was open.</li> </ul> <p>Telephone interview on 9/19/16 at 1:20PM with a member of the Management revealed:</p> <ul style="list-style-type: none"> <li>-She provided oversight of residents and staff on behalf of the Administrator/Owner of the facility.</li> <li>-She was at the facility everyday but did not know if she was looking at "everything going on."</li> <li>-She was aware of housekeeping and maintenance issues and gave the Administrator/Owner a "list."</li> <li>-There was an "on-going list of things" needing attention.</li> <li>-The Administrator/Owner did fix things and made "lists," but she and him have talked about maintenance being too much for him to handle.</li> <li>-A plumber was hired the previous week to fix the tiles on the walls, but the Administrator/Owner did not know about a hole in the tub wall.</li> <li>-Staff "come and go" and existing staff need "retraining."</li> </ul>	{C 074}		
{C 112}	<p>10A NCAC 13G .0318(a) Outside Premises</p> <p>10A NCAC 13G .0318 Outside Premises (a) The outside grounds of new and existing family care homes shall be maintained in a clean</p>	{C 112}		

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{C 112}	<p>Continued From page 6</p> <p>and safe condition.</p> <p>This Rule is not met as evidenced by: Based on observations, record review and interviews, the facility failed to properly contain numerous bags of household trash, to remove clutter from around the facility and to keep in good repair a wooden picnic table used by the residents.</p> <p>The findings are:</p> <p>Review of the most current sanitation inspection report dated 5/6/16 revealed: -An overall score of 88. -A 2 point deduction in the category of Solid Wastes with the comment "Trash can in the back needs to be covered with a lid. Person in Charge said they would no longer be using it and will be using a dumpster."</p> <p>Observation on 9/15/16 at 10:30AM of the side yard area revealed: -Residents seated at a wooden picnic table with a rough, dirty surface and two broken table boards with missing pieces of wood. -A wood shed in the side yard by the driveway, missing its door and making visible its contents. -A blue 33 gallon plastic trash can with no lid, full above the rim of the can with household trash. -Placed on the ground to the right corner of the wood shed were numerous black trash bags of household trash and cardboard boxes, some of the bags were ripped open with their contents spilling onto the ground. -Immediately in front of the shed were food scraps including rotten vegetables, a metal pan with food residue resembling a tomato sauce product, a bean can, a soda can and a soda bottle.</p>	{C 112}		

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{C 112}	<p>Continued From page 7</p> <ul style="list-style-type: none"> <li>-Against the left wall inside the shed was a folded walker.</li> <li>-On the floor of the shed were numerous cardboard boxes and plastic bags full of household trash, some of which were ripped open with their contents spilling on the ground.</li> <li>-Flying over the bags of household trash were numerous flies and buzzing yellow insects.</li> <li>-In the side yard was an irregular large patch of dead grass measuring approximately 10 feet by 10 feet with small pieces of household trash, including food wrapper and styrofoam plates, embedded in the dead grass.</li> </ul> <p>Observation on 9/15/15 at 11:54AM of the area surround the facility revealed:</p> <ul style="list-style-type: none"> <li>-Four 5 gallon pails, a wood board across three of the pails and two metal cans, all lined up against the front of the facility.</li> <li>-A wood board, plastic flower pot, metal can, throw rug and boxes, all lined up against the side of the facility.</li> <li>-Four blue 33 gallon plastic garbage cans with lids, with one can empty, another 1/2 full of household trash and the remaining cans completely full of bags of household trash.</li> </ul> <p>Confidential interview with one resident revealed:</p> <ul style="list-style-type: none"> <li>-The Administrator/Owner was supposed to take trash off the property.</li> <li>-"Someone" was hired to take away trash which was done the week prior.</li> <li>-He had not been stung by any flying insects.</li> <li>-He had seen a "mouse" outside the day before and "shooed it off" but had never seen any rodents inside the facility.</li> </ul> <p>Confidential interview with a second resident revealed:</p> <ul style="list-style-type: none"> <li>-Trash had been in the wood shed for "a couple</li> </ul>	{C 112}		

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{C 112}	<p>Continued From page 8</p> <p>of weeks." -Since he had lived at the facility he had seen trash removed two times.</p> <p>Confidential interview with a third resident revealed: -The trash cans were new but the "trash was overflowing." -Trash had been building up at the shed.</p> <p>Interview on 9/15/16 at 11:07AM with Staff B, Supervisor-in-Charge (SIC), revealed: -She was assigned to a sister facility located on the property. -The trash had been sitting inside the shed "for a week." -The Administrator/Owner had taken some trash away in a trailer. -The facilities on the property had recently received new trash cans and someone had been hired to empty them on Mondays. -She had not seen it but was told that residents would try to go through the trash. -The former SIC (Staff F) of the facility had made no mention to her of the trash.</p> <p>Interview on 9/15/16 at 12:12PM with a member of the Management revealed: -She provided oversight of residents and staff on behalf of the Administrator/Owner of the facility. -The Administrator/Owner had been using a trailer to haul trash away but that was "not working." -The new trash cans were obtained to collect trash and they would be emptied "more often." -There had been a temporary dumpster for trash. -The former SIC (Staff F) had said nothing regarding problems with trash.</p> <p>Interview on 9/15/16 at 12:30PM with Staff F, the</p>	{C 112}		

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{C 112}	Continued From page 9  former SIC, revealed: -The new trash cans had been in place for two weeks and at the time they were delivered the trash was removed from the property. -Trash was picked up again this past Monday (9/12/16) from all the cans from all the houses on the property. -The Administrator/Owner had recently had a "dumpster thing" and the she was not sure but the trash in the wood shed might have been left over from that. -She "would be afraid to guess" how long was trash was in the shed as she hardly ever went out to the shed area.	{C 112}		
C 141	10A NCAC 13G .0406 (1) Other Staff Qualification  10A NCAC 13G .0406 Other Staff Qualifications  (a) Each staff person of a family care home shall: (1) have a job description that reflects actual duties and responsibilities and is signed by the administrator and the employee;  This Rule is not met as evidenced by: TYPE B VIOLATION  Based on observation, record review and interviews, the facility failed to have in place a qualified and identified staff member upon the transfer of a qualified Supervisor-in-Charge to a sister facility.  The findings are:	C 141		

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C 141	<p>Continued From page 10</p> <p>Interview on 9/15/16 at 10:00AM with Staff E revealed: -He became the Supervisor-in-Charge (SIC) "an hour ago." -The previous SIC, Staff F, had left that same morning after breakfast to become the SIC for a sister facility located off the property. -Staff D was going to be the SIC of the facility, but she was not on the property today due to required training.</p> <p>Continued interview on 9/15/16 at 10:00AM with Staff E, joined by Staff A, SIC and Staff B, SIC revealed: -"We do not have a supervisor for #3 [the facility]." -Staff A, SIC would come to the facility from the sister facility to pass medications as Staff D and Staff E were not yet qualified to pass medications. -Staff A, SIC and Staff B, SIC had started working as the SICs at the sister facilities on the property on 8/5/16. -Staff D and Staff E started working at the facility on 9/15/16.</p> <p>Confidential interviews with 2 of 4 residents revealed they received their morning medications on 9/15/16 by Staff F, SIC who had left after medication pass to work at another facility.</p> <p>Interview on 9/15/16 at 11:07AM with Staff B, SIC (from a sister facility on the property) revealed: -She had started work as an SIC at a sister facility off the property in December, 2015 and then transferred to be the SIC at a sister on the property in August, 2016. -Staff D and Staff E were moving into the facility today. -Staff F, SIC was previously assigned to the</p>	C 141		

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C 141	<p>Continued From page 11</p> <p>facility, had found out "a few days ago" that she would be transferred to a sister facility off the property and on that day Staff D and Staff E found out they would be assigned to the facility.</p> <p>-Staff D was not on the property today as she was attending a 15 hour medication aide training class.</p> <p>-"Once qualified," Staff E would be an SIC.</p> <p>-Staff E was helping the facility by cleaning and doing "nothing else."</p> <p>-Staff A, SIC and Staff B, SIC were going to help with resident meals and medications.</p> <p>Interview on 9/15/16 at 12:12PM with a member of the Management revealed:</p> <p>-She provided oversight of residents and staff on behalf of the Administrator/Owner of the facility.</p> <p>-Due to a staff resignation, Staff F, SIC had to move to a sister facility off the property to fill the gap.</p> <p>-She was "hopefully hiring her [Staff D] today" for the facility but Staff D was currently attending the 15 hour medication aide training class.</p> <p>-Staff E had a tuberculosis (TB) test placed yesterday which were due to be read tomorrow, drug screening for both would be completed that afternoon and criminal background checks were submitted with results pending.</p> <p>-Staff D would be "certified first" as an SIC then Staff E who would get into the next medication aide training class.</p> <p>Interview on 9/15/16 at 12:30PM with SIC Staff F (former facility SIC) revealed:</p> <p>-All the SICs on the property talked with each other about all the residents in the facility and at sister facilities.</p> <p>-There was currently "no trouble in this house."</p> <p>-She found out two days ago that SIC Staff D and SIC Staff E were to take over the facility but they</p>	C 141		

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STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>FCL057003</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>R</b> <b>09/19/2016</b>
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NAME OF PROVIDER OR SUPPLIER  <b>MINTZ FAMILY CARE HOME #3</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>196 MILLER ROAD</b> <b>MARSHALL, NC 28753</b>
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C 141	<p>Continued From page 12</p> <p>have not yet received any "orientation" to that point.</p> <p>Review of Staff E's personnel file revealed: -SIC Staff E had completed the first of the required two-step TB testing (due to be read on 9/16/16) and had documentation of a HCPR check, but had no other hiring requirements and no medication aide training requirements.</p> <p>_____</p> <p>A Plan of Protection was obtained from the member of the Management dated 9/15/16 and included: -The facility would ensure qualified staff were in the facility until new staff (SIC Staff D and SIC Staff E) had received their qualifications by 9/30/16. -SIC Staff C was qualified and identified to be in the home until new staff were trained. -SIC Staff A and SIC Staff B would administer medications to residents until new staff were trained as medication aides and to provide supervision of the facility.</p> <p>THE CORRECTION DATE FOR THIS TYPE B VIOLATION SHALL NOT EXCEED NOVEMBER 3, 2016.</p>	C 141		
C 202	<p>10A NCAC 13G .0702(a) Tuberculosis Test and Medical Examination</p> <p>10A NCAC 13G .0702 Tuberculosis Test and Medical Examination (a) Upon admission to a family care home each resident shall be tested for tuberculosis disease in compliance with the control measures adopted by the Commission for Health Services as specified in 10A NCAC 41A .0205 including subsequent amendments and editions. Copies of</p>	C 202		

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C 202	<p>Continued From page 13</p> <p>the rule are available at no charge by contacting the Department of Health and Human Services, Tuberculosis Control Program, 1902 Mail Service Center, Raleigh, North Carolina 27699-1902.</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 initiate or complete two-step tuberculosis testing for 2 of 4 residents (Residents #2 and #3).</p> <p>The findings are:</p> <p>A. Review of Resident #2's current FL-2 dated 6/3/16 revealed diagnoses included schizophrenia and chronic obstructive pulmonary disease (COPD).</p> <p>Review of Resident #2's Resident Register revealed an admission date of 2/2/16.</p> <p>Review of Resident #2 record revealed no documentation of two-step tuberculosis (TB) testing.</p> <p>Based on record review and observations, Resident #2 was determined to be un-interviewable.</p> <p>Interview on 9/16/16 at 10:55AM with Staff A, Supervisor-in-Charge (SIC) and Staff B, SIC revealed:</p> <ul style="list-style-type: none"> <li>-They were SICs at sister facilities on the property and would provide on-sight supervision until new staff were completely trained.</li> <li>-They knew Resident #2 needed TB testing as the former SIC had told them of this.</li> <li>-The nurse from the contracted pharmacy was scheduled to come to the facility to place a TB</li> </ul>	C 202		

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C 202	<p>Continued From page 14</p> <p>test for Resident #2 and another resident at a sister facility on the property.</p> <p>-Resident #2 was at the facility during the time the former SIC was assigned to the facility.</p> <p>-TB testing should be done in the first 30 days of a resident's admission.</p> <p>Interview on 9/16/16 at 11:32AM with the member of the Management revealed:</p> <p>-She provided oversight of residents and staff on behalf of the Administrator/Owner of the facility.</p> <p>-She had been "backed up" with taking residents to medical appointments to track residents who needed TB testing.</p> <p>-If a potential resident for admission to the facility was in the hospital, she asked the hospital to place their first of the two TB tests before they would even take them.</p> <p>-Residents were taken to their physician's offices to have TB tests placed as well.</p> <p>-She had been telling staff they needed to "stay on top of it [TB testing]."</p> <p>-She had thought TB testing had been "fixed" for the facility as it had been addressed at sister facilities.</p> <p>Attempted telephone interview on 9/16/16 at 1:45PM with the Guardian of Resident #2 was unsuccessful.</p> <p>Attempted telephone interview on 9/19/16 at 9:00AM with Staff F, former SIC, was unsuccessful.</p> <p>B. Review of Resident #3's current FL-2 dated 7/27/16 revealed diagnoses including schizophrenia and depression.</p> <p>Review of Resident #3's Resident Register revealed an admission date of 7/18/16.</p>	C 202		

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C 202	<p>Continued From page 15</p> <p>Review of Resident #3's record revealed: -A tuberculosis (TB) test was placed on 7/27/16 and on 7/29/16 was documented as a negative test result. -There was no documentation of the second test of the two-step TB testing was done.</p> <p>Interview on 9/16/16 at 10:55AM with Staff A, Supervisor-in-Charge (SIC) and Staff B, SIC revealed: -They were SICs at sister facilities on the property and would provide on-site supervision until new staff were completely trained. -TB testing should be done in the first 30 days of a resident's admission.</p> <p>Interview on 9/16/16 at 11:32AM with a member of the Management revealed: -She provided oversight of residents and staff on behalf of the Administrator/Owner of the facility. -The nurse from the contracted pharmacy was scheduled to come to the facility to place a second TB test for Resident #3. -She had been "backed up" with taking residents to medical appointments to track residents who needed TB testing. -If a potential resident for admission to the facility was in the hospital, she was asking the hospital to place their first of the two TB tests before they would even take them. -Residents were taken to their physician office's to have TB tests placed as well. -She had been telling staff they needed to "stay on top of it [TB testing]." -She had thought TB testing had been "fixed" for the facility as it had been addressed at sister facilities.</p> <p>Telephone interview on 9/16/16 at 1:35PM with</p>	C 202		

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C 202	<p>Continued From page 16</p> <p>the Guardian of Resident #3 revealed: -No awareness of required TB testing being completed for the resident. -No awareness of problems with the care of the resident at the facility.</p> <p>Attempted telephone interview on 9/19/16 at 9:00AM with Staff F, former SIC, was unsuccessful.</p> <p>_____</p> <p>A Plan of Protection was obtained from a member of the Management on 9/16/16 and included: -TB testing would be obtained for the named residents on Monday, 9/19/16 and the second TB test (for Resident #2) would be obtained three weeks after, by 10/10/16. -Future potential residents would not be admitted in the future without TB tests in place. -The Social Worker would monitor resident records monthly.</p> <p>THE CORRECTION DATE FOR THIS TYPE B VIOLATION SHALL NOT EXCEED NOVEMBER 3, 2016.</p>	C 202		
C 259	<p>10A NCAC 13G .0904(a)(4) Nutrition and Food Service</p> <p>10A NCAC 13G .0904 Nutrition and Food Service (a) Food Procurement and Safety in Family Care Homes: (4) There shall be at least a three-day supply of perishable food and a five-day supply of non-perishable food in the facility based on the menus, for both regular and therapeutic diets.</p> <p>This Rule is not met as evidenced by: Based on observation and interviews, the facility failed to have on hand a 3 day supply of</p>	C 259		

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C 259	<p>Continued From page 17</p> <p>perishable food or a 5 day supply of non-perishable food.</p> <p>The findings are:</p> <p>Interview on 9/15/16 at 10:00AM with Staff E revealed: -He became the Supervisor-in-Charge (SIC) "an hour ago." -The previous SIC, Staff F, had left that same morning after breakfast to become the SIC for a sister facility located off the property. -The residents had been fed breakfast and as there was a new supervisor the facility would be "getting groceries today."</p> <p>Observation on 9/15/16 at 12:05 of the kitchen and pantry revealed: -An empty refrigerator except for a jar of mayonnaise and and a jar of applesauce in the door shelf. -An empty freezer compartment except for a bagged bread product. -An empty upright deep freezer in the pantry. -Empty shelving in the pantry. -Empty kitchen cabinets except for a spice container, a container of baking soda, two boxes of cold cereal, a box of vanilla wafers, an open jar of peanut butter and small bags of snack food.</p> <p>Interviews on 9/15/16 at 12:30PM with Staff F, the former Supervisor-in-Charge (SIC) and Staff A, SIC (from a sister facility on the property) revealed: -SICs purchased resident food out of their paychecks and as Staff F had purchased the facility food items, that was why she took them to the new home she was working in and there was no food in the facility. -The food removed from the facility will be used to</p>	C 259		

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C 259	<p>Continued From page 18</p> <p>feed residents in her new home.</p> <p>-The Administrator/Owner would give a "grocery loan" to the new SIC to purchase groceries for that month.</p> <p>-Staff A, SIC would take the new staff member (in training to be the SIC) to meet the Administrator/Owner ,or a member of the Management, at the grocery store that same day to purchase groceries.</p> <p>Interview on 9/15/16 at 1:20PM with a member of the Management revealed:</p> <p>-She provided oversight of residents and staff on behalf of the Administrator/Owner of the facility.</p> <p>-She would accompany the new staff member to the store to help her with the purchase of a one-month's supply of groceries.</p> <p>-The SICs of the sister facilities on the property had provided food for the resident's lunch.</p> <p>Observation on 9/15/16 at 2:30PM revealed individuals bringing into the facility a cardboard box with four gallons of milk and numerous flats of eggs.</p> <p>Observation on 9/15/16 at 3:45PM revealed an individual bringing numerous dry good products to the facility.</p>	C 259		
{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>	{C 912}		

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{C 912}	<p>Continued From page 19</p> <p>This Rule is not met as evidenced by: Based on observation, record review and interview, the facility failed to assure residents received care and services that are adequate, appropriate and in compliance with federal and state laws and rules and regulations related to maintenance of outside premises, staff qualifications, resident tuberculosis testing and nutrition and food services.</p> <p>Based on observation, record review and interviews, the facility failed to have in place a qualified and identified staff member upon the transfer of a qualified Supervisor-in-Charge to a sister facility [Refer to Tag 141, 10A NCAC 13G .0406(a)(1), Other Staff Qualifications (Type B Violation)].</p> <p>Based on observation, record review and interview, the facility failed to initiate or complete two-step tuberculosis testing for 2 of 4 residents (Residents #2 and #3) [Refer to Tag 202, 10A NCAC 13G .0702(a), Tuberculosis Test and Medical Examination (Type B Violation)].</p>	{C 912}		