STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	FCL040006	A. BUILDING: _____ B. WING _____	06/03/2016

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
CARRIE'S FAMILY CARE HOME	1025 POPE FARM ROAD STANTONSBURG, NC 27883

(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 and the Greene County Department of Social Services conducted an annual survey on June 3, 2016.	C 000		
C 147	10A NCAC 13G .0406(a)(7) Other Staff Qualifications 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; This Rule is not met as evidenced by: Based on personnel records and interview, the facility failed to assure 1 (Staff B) of 3 staff sampled had a criminal background check in accordance with G.S. 114-19.10 and G.S. 131D-40. The findings are: Review of Staff B's personnel record revealed: - She was hired as a Supervisor-in-Charge (SIC) on 12/10/10. -No documentation of a criminal background check was found in Staff B's record. Interview with Staff B on 6/03/16 at 3:30 p.m. revealed: -She could not find documentation of a criminal background check in her personnel record. -A criminal background check had being completed for her. -The criminal background check had been misplaced. -Another criminal background check for Staff B was completed on 6/03/16.	C 147		

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C 147	Continued From page 1 -The administrator was responsible for the completion of a criminal background check on all staff, prior to hire. -The Administrator had referred all questions to the SIC.	C 147		
C 375	10A NCAC 13G .1009(a)(1) Pharmaceutical Care 10A NCAC 13G .1009 Pharmaceutical Care (a) The facility shall obtain the services of a licensed pharmacist, prescribing practitioner or registered nurse for the provision of pharmaceutical care at least quarterly for residents or more frequently as determined by the Department, based on the documentation of significant medication problems identified during monitoring visits or other investigations in which the safety of the residents may be at risk. Pharmaceutical care involves the identification, prevention and resolution of medication related problems which includes at least the following: (1) an on-site medication review for each resident which includes at least the following: (A) the review of information in the resident's record such as diagnoses, history and physical, discharge summary, vital signs, physician's orders, progress notes, laboratory values and medication administration records, including current medication administration records, to determine that medications are administered as prescribed and ensure that any undesired side effects, potential and actual medication reactions or interactions, and medication errors are identified and reported to the appropriate prescribing practitioner; and, (B) making recommendations for change, if necessary, based on desired medication outcomes and ensuring that the appropriate prescribing practitioner is so informed; and,	C 375		

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C 375	Continued From page 2 (C) documenting the results of the medication review in the resident's record; This Rule is not met as evidenced by: Based on staff interview and record review; the facility failed to assure quarterly pharmaceutical reviews for 3 of 3 sampled residents. (Resident #1, #2 and #3) The findings are: 1. Review of Resident #1's current FL-2 dated 4/04/16 revealed a diagnosis of schizoaffective disorder bipolar type learning disorder. Review of Resident #1's Resident Register revealed date of admission to the facility was 10/07/12. Review of Resident #1's record revealed no documentation of a pharmacist review. Interview with the Supervisor-in-Charge (SIC) on 6/03/16 at 3:30 p.m. revealed: - She was aware Resident #1's pharmacist review was pass due. -Resident #1 had a pharmacist review completed on 1/08/16. -She could not find documentation of the previous pharmacist reviews for Resident #1. Refer to interview with the SIC on 6/03/16. 2. Review of Resident #2's current FL-2 dated 5/20/16 revealed diagnoses of schizophrenia paranoid and hypertension. Review of Resident #2's Resident Register revealed date of admission to the facility was	C 375		

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C 375	Continued From page 3 5/26/15. Review of Resident #2's record revealed the last pharmacist review was completed on 1/05/16. Interview with the Supervisor-in-Charge (SIC) on 6/03/16 at 3:30 p.m. revealed: -She was aware Resident #2's pharmacist review was pass due. -She could not find documentation of the previous pharmacist reviews for Resident #2. Refer to interview with the SIC on 6/03/16. 3. Review of Resident #3's current FL-2 dated 5/20/16 revealed diagnoses of intermittent explosive disorder, mild mental retardation and cannabis abuse. Review of Resident #3's Resident Register revealed date of admission to the facility was 5/26/15. Review of Resident #3's record revealed the last pharmacist review was completed on 1/08/16. Interview with the Supervisor-in-Charge (SIC) on 6/03/16 at 3:30 p.m. revealed: - She was aware Resident #3's pharmacist review was pass due. -She could not find documentation of the previous pharmacist reviews for Resident #3. Refer to interview with the SIC on 6/03/16. _____ Interview with the Supervisor-in-Charge (SIC) on 6/03/16 at 3:30 p.m. revealed: -She was aware the residents` pharmacy reviews were past due.	C 375		

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C 375	Continued From page 4 -She was aware the pharmacy reviews should have been completed in April 2016. -The pharmacist who completed the reviews in January 2016 was no longer able to do the pharmacy's reviews. She was in the process of contacting another pharmacist to complete the pharmacist's reviews. -She was responsible for making sure residents' pharmaceutical reviews were completed quarterly. -The Administrator had referred all questions to the SIC.	C 375		