of Health Service Regulation

T OF DEFICIENCIES OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	fcl079067	A. BUILDING: _____ B. WING _____	01/20/2016

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
FAITHWORKS ASSISTED LIVING	814 LINDSEY STREET REIDSVILLE, NC 27320

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C 000	Initial Comments The Adult Care Licensure Section conducted an annual survey on January 20, 2016	C 000		
C 105	10A NCAC 13G .0317(d) Building Service Equipment 10A NCAC 13G .0317 Building Service Equipment (d) The hot water tank shall be of such size to provide an adequate supply of hot water to the kitchen, bathrooms, and laundry. The hot water temperature at all fixtures used by residents shall be maintained at a minimum of 100 degrees F (38 degrees C) and shall not exceed 116 degrees F (46.7 degrees C). This Rule is not met as evidenced by: TYPE B VIOLATION Based on observations and interviews, the facility failed to maintain the hot water temperature between 100-116 degrees Fahrenheit (F) in 2 of 2 common bathrooms used by residents, each with 1 sink. The findings are: Observation on 01/20/16 at 10:50 am the two bathrooms used by residents in the facility revealed: -The first bathroom (unlabeled) was used by men. -The bathroom was occupied by a male resident. -The second bathroom (unlabeled) was used by women. -A check of the hot water temperature at the sink was 82 degrees F. Interview on 01/20/16 at 10:53 am with the	C 105 ADM	C 105 WATER TANK TEMPERATURE WAS ADJUSTED TO PROPER TEMPERATURE & WEEKLY LOGS MAINTAINED THEREAFTER SIC WILL CHECK MONTHLY TO INSURE LOGS ARE KEPT & ARE ACCURATE	11/21/16

Division of Health Service Regulation
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE Jack Martindale TITLE SIC (X6) DATE 9/30/16

Approved 9/30/16, KEHawkins/MHA FSCI

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C 105	Continued From page 1 Licensee/Supervisor-in-Charge (SIC) revealed: -He had just finished showers and was washing clothes. -He would check the hot water temperatures in about two hours. -Hot water temperatures had previously been high, about two years ago, so he checked hot water temperatures weekly. Observation on 01/20/16 at 10:54 am revealed the washing machine was observed in use and had been in use since the entrance to the facility at 10:45 am. A recheck of the hot water temperatures on 01/20/16 revealed the following: -At 2:18 pm hot water temperature at the sink in the men's bathroom was 124 degrees F. -AT 2:27 pm hot water temperature at the sink in the women's bathroom was 124 degrees F. Second interview on 01/20/16 at 2:38 pm with the Licensee/SIC revealed: -He had not adjusted the hot water temperatures in about two years. -He was unaware what the regulation maximum was for hot water temperatures. -He checked hot water temperatures weekly and documented the readings. -He last checked hot water temperatures in November 2015, but slacked off in December due to the holidays. -He would immediately, post signs as instructed by the surveyor and adjust the temperature down on the hot water heater. -He would also wash some clothes to drain the hot water tank of the remaining hot water. A review of the SIC's hot water temperature log revealed.	C 105		

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C 105	Continued From page 2 -All hot water temperatures ranged between 118 and 120 degrees F from August 2015 through November 2015. Observation on 01/20/16 at 2:42 pm revealed signs were posted to warn residents the water was hot and to ask for staff assistance when turning on the water. A third recheck on 01/20/16 of hot water temperatures in the men and women bathrooms using the facility's thermometer and the surveyor's thermometer revealed: -At 4:33 pm using the surveyor's thermometer, the hot water temperature at the sink in the men bathroom was 116 degrees F. -The hot water temperature using the facility's thermometer was 118 degrees F. -At 4:36 pm using the surveyor's thermometer, the hot water temperature at the sink in the women bathroom was 116 degrees F. -The hot water temperature using the facility's thermometer was 118 degrees F. On 01/20/16 at 4:40 pm, surveyor and the facility thermometers were calibrated in an ice water slurry revealed: -The facility's thermometer was 32 degrees F. -The surveyor's thermometer was 30 degrees F, needing to add 2 points, meaning initial hot water temperatures were 126 degrees F. Interview with four residents on 01/20/16 revealed: -Two residents said the water was hot, but they always added in cold water to make the water comfortable for them. -They had not mentioned the hot water to the SIC because the water had been hot for a long time. -One resident sometimes required staff	C 105		

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C 105	Continued From page 3 assistance to the bathroom and staff adjusted the hot water, if staff did not go with him to the bathroom was able to adjust the water himself. -One residents required staff assistance to the bathroom and staff always adjusted the hot water for him. The facility provided the following Plan of Protection as follows: -The sign to warn residents to use caution when turning on the hot water was posted. -The SIC adjusted the hot water temperatures down. -The SIC would check hot water temperatures later that night to ensure the hot water temperature does not go back up. -The SIC would check hot water temperatures first thing in the morning, after lunch, and before bed for the next 5 days, then will check hot water temperatures weekly. -If hot water temperatures are above 116 degrees F, the SIC will adjust the hot water temperatures down. CORRECTION DATE FOR THE TYPE B VIOLATION SHALL NOT EXCEED MARCH 6, 2016	C 105		
C 171	10A NCAC 13G .0504(a) Competency Validation For Licensed Health 10A NCAC 13G .0504 Competency Validation For Licensed Health Professional Support Tasks (a) A family care home shall assure that non-licensed personnel and licensed personnel not practicing in their licensed capacity as governed by their practice act and occupational licensing laws are competency validated by return demonstration for any personal care task	C 171	C171 STAFF C WAS scheduled FOR and completed LHAS SKILLS/COMPETENCY EVALUATION ON 1/21/16 ADMIN/SIC FACILITY WILL INSURE ALL EMPLOYEES ARE COMPETENT AND RECORDS ARE ON FILE IN FACILITY AS NEW EMPLOYEES ARE HIRED	1/21/16

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C 171	Continued From page 4 specified in Subparagraph (a)(1) through (28) of Rule .0903 of this Subchapter prior to staff performing the task and that their ongoing competency is assured through facility staff oversight and supervision. This Rule is not met as evidenced by: Based on observation, record review, and interview, the facility failed to assure staff (Staff C) was competency validated for Licensed Health Professional Support (LHPS) personal care tasks before performing the tasks. The findings are: Review of Staff C's personnel record revealed: -According to the facility's documentation, Staff C was hired in August 2014 (not specific date). -Staff C was hired as Relief person. -There was no LHPS documentation of competency validation for residents' personal care tasks in the record. Interview on 01/20/16 at 3:38 pm with the Licensee/SIC revealed: -Staff C worked as a relief person when he was not at the facility. -Staff C had worked at the facility since August or September 2014, but he was unable to recall the specific date Staff C was hired. -Staff C did not have a regular work schedule, she only worked when need. -Staff C had not worked since the first week in January 2016 (unable to recall specific date). -When Staff C worked she was the only staff member at the facility. -Staff C did provide hands on assist with transferring and ambulation to two residents living at the facility. - Staff C had not been scheduled to complete	C 171		

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C 171	Continued From page 5 LHPS competency validated, because Staff C had LHPS competency validation at another employment prior to coming to this facility. Attempt to contact Staff C on 01/20/16 at 2:48 pm by request to the Licensee/SIC to obtain Staff C's phone number or to have Staff C call the surveyor revealed no return phone call by the exit of the survey. Interview with 4 residents revealed: -Staff C had worked at the facility for about 1.5 years. -Staff C worked off and on at the facility. -Staff C was a relief person, but sometimes worked nights. -When Staff C worked at the facility no other staff was at the facility. -Staff C helped two residents with ambulation and transferring (getting out of bed to the wheelchair, showering, dressing, and toileting). -Two resident said Staff C last worked about two weeks ago.	C 171		
C 176	10A NCAC 13G .0507 Training on Cardio-Pulmonary Resuscitation 10A NCAC 13G .0507 Training on Cardio-Pulmonary Resuscitation Each family care home shall have at least one staff person on the premises at all times who has completed within the last 24 months a course on cardio-pulmonary resuscitation and choking management, including the Heimlich maneuver, provided by the American Heart Association, American Red Cross, National Safety Council, American Safety and Health Institute and Medic First Aid, or by a trainer with documented certification as a trainer on these procedures	C 176	C 176 STAFF C completed CPR on 1/16/16. Certification is now on file at FACILITY. ADM/SIC of FACILITY will insure all employees are certified and records on file. As new employees are hired	1/22/16

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C 176	Continued From page 6 from one of these organizations. If the only staff person on site has been deemed physically incapable of performing these procedures by a licensed physician, that person is exempt from the training. This Rule is not met as evidenced by: TYPE B VIOLATION Based on record review and interview, the facility failed to provide documentation of current training on Cardio-Pulmonary Resuscitation (CPR) and choking management, including the Heimlich Maneuver, for 1 of 3 sampled staff (Staff C). The findings are: Review of Staff C's personnel record revealed: -According to the facility's documentation, Staff C was hired in August 2014 (no specific date). -Staff C was hired as the facility's Relief person/SIC. -There was no documentation of CPR training in Staff C's record. Interview on 01/20/16 at 2:55 pm with the Licensee/SIC revealed: -Staff C had worked at the facility since August or September 2014. -He had not asked Staff C to bring her CPR card to the facility. -He thought Staff C had a current CPR card. -Due Staff C's inability to produce a CPR card, he was unable to validate Staff C had current CPR. -He did not have a schedule of when Staff C worked because she was a relief person and worked as needed. -Staff C lasted worked about two weeks ago. -When Staff C worked she was SIC and no other	C 176		

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C 176	Continued From page 7 staff available at the facility and Staff C would be responsible for CPR if needed. -There were 5 residents currently residing in the home. -He would contact Staff C to ensure she had current CPR and request she get a copy for his records. Attempt to contact Staff C on 01/20/16 at 2:48 pm by request to the Licensee/SIC to obtain Staff C's phone number or to have Staff C call the surveyor revealed no return phone call by the exit of the survey. Interview with 4 residents revealed: -Staff C had worked at the facility for about 1.5 years. -Staff C worked off and on at the facility. -Staff C was a relief person, but sometimes worked nights. -When Staff C worked at the facility no other staff was at the facility. The facility submitted a Plan of Protection on 01/21/16 as follows: -Signs were posted on 01/20/16 to warn the residents of hot water temperatures. -The Licensee/SIC adjusted hot water temperatures, and drained the hot water tank of all hot to reduce the temperature. -The Licensee/SIC will monitor hot water temperatures three times daily for the next week, and adjust temperatures if needed. -The Licensee/SIC will maintain a hot water temperature log, checking hot water temperatures weekly. CORRECTION DATE FOR THE TYPE B VIOLATION SHALL NOT EXCEED, MARCH 6, 2016	C 176		

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