Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL032131	A. BUILDING _____ B. WING _____	11/04/2016

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
ATRIA SOUTHPOINT WALK	5705 FAYETTEVILLE ROAD DURHAM, NC 27713

(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
D 000	Initial Comments The Adult Care Licensure Section conducted an annual survey on November 4, 2016.	D 000	Measure to correct deficiency area: Staff C and one other staff member received infection control training on 11/17/16. See attached.	
D934	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: Based on observation, interview and record review, the facility failed to assure 1 of 3 Staff (C) completed an annually state infection control training. The findings are: Review of Staff C's, Medication Aide (MA), personnel file revealed: -Staff C was hired to work at the facility on 8/22/14. -Staff C completed the state annual infection control training on 7/15/15. -There was no other documentation of a state	D934	Measure to prevent the problem from reoccuring: Adult Care Home will schedule infection control training twice a year. Person responsible for monitoring the situation to ensure it will no longer occur again: Resident Services Director (RSD) How monitoring will take place: RSD will be responsible for all Medication Technicians that are due for their annual training. If they cannot make it to the scheduled training, RSD will schedule make-up training. If Medication Technician is still unable to attend make-up training, Med Tech will be removed from schedule until required training is complete. Date by which correction made: 11/17/16 Executive Director will perform monthly reviews to ensure all staff are in compliance.	

Division of Health Service Regulation
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE Allison O'Shea TITLE Executive Director DATE 12-15-16

Approved - Acknowledged
K. Wright 1/17/17

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D934	Continued From page 1	D934		

infection control training.

Interview with the Resident Care Director (RCD) on 11/4/16 at 4:35 p.m. revealed:
-He kept-up with staff's state annual infection control training.
-Staff C last had an infection control training completed on 7/15/15.
-The RCD did a state annual infection control training on 9/16/16 with the MAs.
-Staff C was supposed to had completed the training on 9/16/16, but he did not come to the training.
-Nothing was done since staff C had not completed the infection control training.

Interview with the RCD on 11/4/16 at 6:15 p.m. revealed:
-He started working at the facility April 2016
-He did an audit of staff training when he first started working at the facility, which included infection control, and realized Staff C had not had an infection control training.
-He had not scheduled any other infection control training, since 9/16/16.

Interveiw with the Administrator on 11/4/16 at 5 20 p.m. revealed:
-The RCD kept up with staff infection control training.
-She was not aware staff C had not had the state annual infection control training
-If she was aware, she would have scheduled an infection control training for Staff C.

Staff C was not available for interview.