STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	FCL092206	A. BUILDING: _____ B. WING _____	R 03/06/2017

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
NOVELTY HEALTHCARE SERVICES	1101 LOXLEY PLACE RALEIGH, NC 27610

(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 March 6, 2017.	{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: Type B Violation Based on interviews and record reviews, the facility failed to assure 1 of 2 sampled staff (Staff A) had completed a criminal background check prior to hire at the facility. The findings are: Review of Staff A's personnel file revealed: -Staff A was hired at the facility on 01/05/17 as a Medication Aide. -There was no documentation that a Criminal Background Check had been completed. Interview with Staff A on 03/06/17 at 11:15 AM revealed: -She had done a criminal background check when she was working at her last job sometime last year. -She had not completed one since she had been working at this facility. -She had been working at this facility for about a month. -She was going today to have a criminal	{C 147}		

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{C 147}	Continued From page 1 background check completed. Interview with the Administrator on 03/06/17 at 10:47 AM revealed: -She had hired Staff A in January of 2017 and started her training. -Staff A did not work any at the facility until February 2017. -A Criminal Background check had been done on Staff A but Staff A had completed it herself and there was no copy of the background check. -She usually did the criminal background check herself but she let Staff A complete it herself. -She was responsible for making sure that all staff completed criminal background checks. -She was sending Staff A today to have a criminal background check completed. _____ The facility's failure to assure all staff had criminal background checks prior to hire was detrimental to resident's safety and constituted a Type B Violation. _____ Review of the facility's plan of protection dated for 03/06/17 revealed: -The Administrator will make sure that the criminal background check is done on all staff today 03/06/17. -The Administrator will assure that all staff have a criminal background check completed prior to hire at the facility. -This will be put in place by 03/15/17. CORRECTION DATE FOR THE TYPE B VIOLATION SHALL NOT EXCEED April 20, 2017.	{C 147}		

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{C 912}	Continued From page 2	{C 912}		
{C 912}	G.S. 131D-21(2) Declaration of Residents' Rights 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. This Rule is not met as evidenced by: Based on observation, record review, and interview, the facility failed to assure all residents received care and services which were adequate, appropriate, and in compliance with relevant federal and state laws and rules and regulations related to Criminal Background Checks. The findings are: 1. Based on interviews and record reviews, the facility failed to assure 1 of 2 sampled staff (Staff A) had completed a criminal background check prior to hire at the facility. [Refer to Tag D0145 10A NCAC 13F .0406(a)(5) Health Care Personal Registry (Type B Violation).]	{C 912}		