

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL092017	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____		(X3) DATE SURVEY COMPLETED R-C 06/28/2017
NAME OF PROVIDER OR SUPPLIER LAWNDALE MANOR			STREET ADDRESS, CITY, STATE, ZIP CODE 601 LAKESIDE DRIVE GARNER, NC 27529		
(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 a follow-up survey on June 27-28, 2017.	{D 000}			
{D 234}	10A NCAC 13F .0703(a) Tuberculosis Test, Medical Exam & Immunization 10A NCAC 13F .0703 Tuberculosis Test, Medical Examination & Immunizations (a) Upon admission to an adult 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 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. This Rule is not met as evidenced by: Based on record review and interviews, the facility failed to assure 2-step tuberculosis (TB) testing had been completed upon admission in compliance with the control measures adopted by the commission for Health Services for 2 of 5 sampled residents (Residents #1, #3). The findings are: 1. Review of Resident #1's current FL-2 dated 12/15/15 revealed diagnoses of anxiety, atrial fibrillation, gait dysfunction, insomnia, and osteoarthritis. Review of Resident #1's Resident Register revealed an admission date of 1/13/15. Review of Resident #1's record revealed: -Documentation of a TB test having been	{D 234}			

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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{D 234}	Continued From page 1 administered on 1/15/15 and read as negative on 1/17/15. -There was no documentation of another TB step being administered or of screening being done for admission to the facility. Based on observations, interviews, and record review, Resident #1 was not interviewable. Interview with Resident #1's Power of Attorney (POA) on 6/28/17 at 10:15 am revealed: -The POA took Resident #1 to an urgent care to get a TB test for the resident for admission to the facility. -The POA had no knowledge of a 2-step TB testing process being required for admission and was not told of a second step being requested or administered to Resident #1. Interview with the Health Service Director (HSD) on 6/28/17 at 4:20 pm revealed: -The facility's protocol was to have new residents have the 1st step for TB testing done before admission to the facility. -Resident #1's POA took her to get her 1st step TB test. Review of a facility Tuberculin Skin Test form revealed: -Resident #1 had a TB test administered on 1/15/15 and was read with negative results on 1/17/15. -The form was signed by the facility LHPS nurse. Attempted interview with the LHPS nurse on 6/28/17 was unsuccessful. Review of the facility TB Test, FL-2, and Careplan Checklist for residents revealed: -Resident #1's name was included in the listing of	{D 234}			

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{D 234}	Continued From page 2 residents on the checklist. -The TB Test 1st Step and TB Test 2nd Step blocks were blank for Resident #1. Interview with the Administrator on 6/28/17 at 4:30 pm revealed: -There was not a system in place to assure the 2nd step TB testing was done when Resident #1 was admitted. -The Administrator had no idea about having a 2nd step TB test done for Resident #1. - Monitoring TB testing for resident admission was part of the HSD's job. Refer to interview with the Health Service Director on 6/28/17 at 4:19 pm. Refer to interview with the Administrator on 6/28/17 at 4:30 pm. 2. Review of Resident #3's current FL2 dated 4/30/17 revealed: -Residents diagnoses included hypertension (HTN), history of cerebral vascular accident (CVA), depression, allergy rhinitis, lower back pain, glucose intolerance, left hemiparesis, and venous insufficiency. Review of Resident #3's record revealed : -The resident did not have a Resident Register. -According to the resident's data sheet, the resident was admitted to the facility on 7/03/03. Review of Resident #3's record revealed: -Resident #3 had TB skin test that was administered 2/15/03 and read on 2/18/03 with result as negative. -The facility form in Resident #3's chart titled "Tuberculin Skin Test" revealed a TB test was administered on 1/24/05 and read on 1/26/05 with	{D 234}		

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{D 234}	Continued From page 3 result as negative. Interview with the Health Services Director on 6/27/17 at 4:25 pm revealed: -She did not know when Resident #3's two-step TB skin test was due. -TB tests are filed in the residents record and that was probably all she had. -She did not think the residents record had been thinned but she would look. -She had been with the company "around 25 years" and was the one responsible for TB tests at the time of Resident #3's admission. Interview with Resident #3 on 6/28/17 at 1:00 pm revealed: -Resident did not know what a TB test was. -Resident remembered having something like that and it was a long time ago. Interview with Resident #3's Medical Doctor's office, nurse, on 6/28/2017 at 4:16pm, revealed that there were no records in their system indicating that this resident had a TB test and/or Chest X-ray to rule out TB. Refer to interview with Health Services Director on 6/28/17 at 4:19 pm. Refer to interview with the Administrator on 6/28/17 at 4:25 pm. Interview with the Health Services Director (HSD) on 6/28/17 at 4:19 pm revealed: -There was not a system in place for monitoring residents' TB testing at admission prior to March 2017 (date unknown). -Until March 2017, she did not have a system in place to make sure that residents had a 2nd step TB test.	{D 234}			

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{D 234}	Continued From page 4 -The protocol was for the new residents to have a 1st step TB test done before admission. - She made a check-off list of residents and staff who needed TB testing to give to the LHPS nurse. -The LHPS Nurse was responsible for obtaining the 2nd step for TB testing. -The LHPS nurse came in monthly around the 13th, 14th, or 15th of the month to do the TB tests. -The HSD was responsible for making sure that all residents had a TB skin test when admitted. Interview with the Administrator on 6/28/17 at 4:25 pm revealed: -No one was allowed to be admitted without a current TB test. - "I didn't realize you have to have a two-step (TB test)." -He "had no idea about having a two-step process". -There had been issues with getting a regular nurse consultant to do the tests. -The health department used to do the testing. - "It is the job of the Health Services Director to take care of this (TB testing)."	{D 234}	