STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	FCL054061	A. BUILDING: _____ B. WING _____	06/28/2018

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
BARNES FAMILY CARE HOME	1106 EAST CASWELL STREET KINSTON, NC 28502

(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 an annual survey on 06/28/18.	C 000		
C 074	10A NCAC 13G .0315(a)(1) Housekeeping and Furnishings 10A NCAC 13G .0315 Housekeeping And Furnishings (a) Each family care home shall: (1) have walls, ceilings, and floors or floor coverings kept clean and in good repair; This Rule shall apply to new and existing homes. This Rule is not met as evidenced by: Based on observations, interviews, and record review, the facility failed to assure the walls, ceilings, and floors were kept clean and in good repair in 3 of 3 resident bedrooms, 2 of 2 resident bathrooms, the kitchen, the dining room, the family room, and the hallway. The findings are: Observation of resident room #3 on 06/28/18 at 8:45am revealed: -There were areas of dust particles that were hanging approximately one inch from the ceiling. -The molding around the top of the walls had a layer of dust and areas with black dust buildup along the edges. -The back left corner of the ceiling had five areas that were covered with plaster that had one crack and areas that were chipping. -The entrance door had an area of approximately two feet by three inches of dark brown stain near the door knob. -The door frame had areas of dark stains and	C 074	The ceiling, molding and walls were cleaned will be checked weekly In process of repairing the crack in the ceiling,	7/6/18 8/30/18

POC reviewed and accepted, Kim Olson 8/28/18

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C 074	Continued From page 1 paint chipping. Observation of the bathroom in resident room #3 on 06/28/18 at 8:50am revealed: -The floor tile had multiple areas of dark brown and black stains on the grout. -The ceiling above the window had areas of dust particles. -The wall tile had areas of dark brown and black stains on the grout. -There were areas of paint chipping from the cabinets. -The grout on the wall and floor tile of the shower had areas of dark brown and black stains. -There was a tile missing from the shower wall above the water handle. -The air return vent had a thick coating of dust. -The inside and outside of the door frame had areas of dark black stains, scuffs and chipped paint. -The floor vent in front of the shower and toilet had chipped paint and was 90% covered in rust. Attempted interview on 06/28/18 at 9:30am with the resident who resided in resident room #3 was unsuccessful. Observation of the common bathroom in the hallway on 06/28/18 at 9:05am revealed: -The sink tile had multiple areas of dark brown and black stains on the grout. -The right side of the sink had areas where the tile was cracked and missing. -The back of the sink had black stains and rusted areas on the grout. -The wall tile around the toilet had black stains on the tile and the grout. -There were areas of paint chipping from the cabinets. -The linoleum flooring had areas that had several	C 074	Tile on floor and shower area in process of cleaning cabinet will be repainted Tile will be replaced Vent has been cleaned Regrout inside and outside door frame floor vents will be replaced in shower and toilet areas In the process of cleaning the tile and replacing cracked tile cabinet will be repainted	8/6/18 9/30/15 7/6/18 9/30/18 9/30/15

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C 074	Continued From page 2 bubble pockets causing it to lift from the floor, creating a fall hazard. -The air return vent had a thick coating of dust. -The trim along the floor had black stains. -The wall to the right of the shower had a two foot by four inch area that the paint is flaking and chipping from the wall. Interview with the Administrator on 06/28/18 at 9:08am revealed: -The staff member on duty would clean the facility every morning after breakfast, weekends after lunch and every night after bedtime. -She would work on cleaning the grout and other areas in the bathrooms. -She was not aware of the dust on the ceilings but would get it cleaned. -She would have a maintenance worker paint the walls, doors and door frames as needed next week and repair the flooring in the common bathroom. -She would replace the rusted floor vent in the bathroom of resident room #3. Observation of the kitchen on 06/28/18 at 8:30am revealed: -The edges of the linoleum flooring were rolled and detached from the floor and pulled up around the edges all around the perimeter of the kitchen. -There were multiple cuts and tears in the linoleum flooring near the dishwasher, refrigerator, and stove. -The linoleum flooring was torn and pulling up all around the edges of the floor vent near the dishwasher. -The metal floor vent near the dishwasher was rusted. -The metal baseboard heater on the wall was rusted all across the top and there were multiple areas of rust on the front metal panel.	C 074	Kitchen floor in the process of being replaced The metal floor vent has been replaced & the baseboard heater has been painted	9/25/18 7/30/18

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C 074	Continued From page 3 -The linoleum flooring was torn and pulling up around the metal baseboard heater. -There were multiple dried brown liquid spills running down the wood wall paneling behind the trash can that ran all the way down behind the metal baseboard heater. -There was a yellowish brown stain on the ceiling around the overhead light fixture. Observation of the family room on 06/28/18 at 8:34am revealed: -There was a dark stain about 6 x 12 inches on the carpet in front of the couch. -There were multiple areas of peeling wallpaper on all walls in the family room, especially around the seams. Interview with the Administrator on 06/28/18 at 9:20am revealed she could probably re-glue the wallpaper in the family room until she could get it in the budget to replace it. Observations of the dining room on 06/28/18 at 8:32am and 9:08am revealed: -The carpet was worn and had multiple dark stains scattered around the dining room. -There were multiple areas on the burgundy carpet near the kitchen that were faded and had white spots without burgundy color. -There was a metal baseboard heater on the wall beside the dining room table with multiple areas of rust and a coating of dust. Observation of resident bedroom #1 on 06/28/18 at 8:45am revealed: -There were multiple brown and black stains on the carpet beside each bed in the room and scattered on the carpet between the beds. -There was a hole in the wall about 1 inch in diameter beside the bed on the right.	C 074	Floor is being replaced Wood paneling has been cleaned Stain on ceiling will be cleaned Wall paper will be reseated as removed The wall is in the	9/25/18 7/2/18 8/30/18 9/30/18

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C 074	Continued From page 4 -There was a hole in the wall about 1 inch in diameter on the lower portion of the wall behind the door. -There were multiple black marks on the walls beside both beds. -The top of the metal baseboard heater on the wall below the window on the right was coated in dust. -The wall baseboard around the perimeter of the room was covered in dust. Interview with a resident residing in bedroom #1 on 06/28/18 at 10:45am revealed: -He was not sure what caused the hole in the wall behind the door but the hole had been there since he was admitted 4 to 5 years ago. -He usually vacuumed the bedroom himself. -The carpet was already stained when he came to the facility about 4 to 5 years ago. -The carpet had been shampooed in the living room and dining room but not in the bedrooms. Observation of the hallway on 06/28/18 at 9:04am revealed: -The air return vent on the wall at the end of the hall was covered with a thick coating of dust. -There were scattered areas of dark stains on the carpet up and down the hallway with a heavily soiled and worn area in front of the common bathroom door. -There was a coating of dust on the baseboard heater on the wall in the hallway. -There was a thick coating of dust on the wall baseboard around the perimeter of the hallway. Observation of resident bedroom #4 on 06/28/18 at 9:25am revealed there were two metal floor vents with multiple areas of rust. Interviews with the Administrator on 06/28/18 at	C 074	process of being repaired Marks have been removed and baseboards heater has been cleaned Administrator/SIC will monitor general cleaning weekly The air vent were cleaned and will cleaned weekly. Carpet was cleaned and will be cleaned every 3 to 6 mo ex as needed	6/29/18 6/29/18

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C 074	Continued From page 5 8:52am, 9:08am, and 9:30am revealed: -She was responsible for assuring the facility was clean, orderly and in good repair. -The cleaning schedule for the facility involved the supervisor-in-charge (SIC) cleaning after breakfast on Monday through Friday and on the weekends after lunch and after bedtime. -The process for repairs involved the SIC keeping a running list on the bulletin board for a maintenance worker to fix repairs. -It seemed like the condition of the facility "just got worse this year". -She planned to get a maintenance worker to work on it depending on the budget. -She hoped to get some repairs done by August 2018. -They did not have a maintenance staff who worked at the facility on a routine basis. -She would call a maintenance worker to make repairs as needed. -She had not noticed the rust on the metal baseboard heaters on the walls and she would add them to the maintenance list to be painted. -She usually got the carpet shampooed every 6 months. -The residents sometimes ate in their rooms and the stains on the carpet were food or drink spills and shampooing the carpet usually helped. -She was not sure how long ago the carpet was last shampooed. -It may have been 6 to 8 weeks ago or 3 months ago. -She would clean the air vents to her list and clean them today, 06/28/18. -She would replace the rusted floor vents. Interview with the Administrator on 06/28/18 at 12:50pm revealed: -She spoke with someone from the carpet	C 074		

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C 074	Continued From page 6 cleaning company and she was going to check her calendar and call him back to scheduled carpet cleaning tomorrow, 06/29/18. -The carpet cleaning company did not always shampoo every room in the facility but usually did the heaviest soiled carpet and the carpet that really needed cleaning. Interview with the Administrator on 06/28/18 at 8:25am revealed: -She had scheduled her maintenance worker on Tuesday, 06/26/18, to come to the facility for some minor repairs today, 06/28/18. -The maintenance worker was going to bring some new chairs and work on the tub and a toilet. Interview with the Administrator on 06/28/18 at 8:30am revealed she called the maintenance worker and he would be coming to the facility tomorrow, 06/29/18. Attempted interview with the Maintenance Supervisor on 06/28/18 at 4:25pm was unsuccessful. Review of the facility's environmental inspection report dated 05/17/17 revealed: -The facility received an approved score with 4 demerits. -The linoleum floors were in bad repair. -Some walls were in bad repair. -The air vents and returns needed to be cleaned.	C 074	Carpet was cleaned and will be recleaned every 3 to 6mo. Spots will be cleaned as needed. SIC and administrator will monitor	6/29/18
C 076	10A NCAC 13G .0315(a)(3) Housekeeping and Furnishings 10A NCAC 13G .0315 Housekeeping and Furnishings (a) Each family care home shall:	C 076		

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C 076	Continued From page 7 (3) have furniture clean and in good repair; This Rule shall apply to new and existing homes. This Rule is not met as evidenced by: Based on observations and interviews, the facility failed to have furniture in good repair in 3 of 3 resident bedrooms, the dining room, and the family room including chairs, nightstands/bedside tables, dressers, a desk, a coffee table, an armoire, and a china hutch. The findings are: Observations of the dining room on 06/28/18 at 8:32am and 9:08am revealed: -One of the 6 wooden dining room chairs had a broken arm that was loose, unattached to one of two wooden posts connecting it to the seat of the chair. -The second wooden post under the arm of the dining room chair was missing. -The wooden post under the arm of the dining room chair was sticking out to the side of the arm pieces and had a sharp, jagged end. -There was a wooden desk in the corner that had a missing knob on the top drawer on the right side. -There was a wooden chair at the desk with missing stain and scratches in the wood. -There was a large crack in the glass door on the bottom right side of the china hutch. Interviews with the Administrator on 06/28/18 at 9:16am and 9:30am revealed: -The dining room chair had been broken about "a week or so". -She was planning to replace the chair. -She had not noticed the glass door on the hutch was broken.	C 076	Dining Chair will be replaced or repaired Knob on desk will be replaced - China cabinet will be removed all repairs will be maintained by STC and Administrators	8/15/18 8/30/18 8/30/18

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C 076	Continued From page 8 Observation of the family room on 06/28/18 at 8:34am revealed: -There was a wooden coffee table with a glass top that was missing two metal hinges on the top of the table. -The coffee table with the glass top had a thick coating of dust. Observation of resident bedroom #1 on 06/28/18 at 8:45am revealed: -The wooden bedside table on the left was missing stain and had scratches on multiple areas of the top, front, and sides. -There was a missing knob on the top drawer of the wooden bedside table on the left. -There were scratch marks on the top of the wooden bedside table on the right and there was a missing knob on the top drawer. Interview with a resident residing in bedroom #1 on 06/28/18 at 10:45am revealed: -The furniture in the bedroom had been missing knobs and stain "a while". -He could use the other knobs to open the drawers. Observation of resident bedroom #4 on 06/28/18 at 9:25am revealed: -There was a missing knob on the bottom drawer of a dresser with mirror on the left side of the room. -The dresser had scratches and some areas of missing stain. -There were two small bedside tables on the right side of the room at the end of the bed with missing stain and scratches in the wood. -There was a long bedside table between the head of the two beds that had multiple scratches and areas of missing stain.	C 076	Coffee table has been removed Furniture will be repaired or replaced and Knobs will be replaced on all furniture SIC will check weekly to insure repairs are reported to Administrator	8/6/18 9/30/18

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C 076	Continued From page 9 -There was a missing knob on 1 of 2 doors on the wooden armoire on the right side of the room. Interview with the Administrator on 06/28/18 at 9:25am revealed: -She would get some knobs to replace the missing ones on the furniture. -The residents would set their drinks on the table tops which caused the scratches and missing stain. -She could replace the bedside tables. Observation of resident room #3 on 06/28/18 at 8:45am revealed: -There were missing areas of stain on the front dresser drawers. -There were missing areas of stain and scratches on the front of the nightstand that had drawers. -There was a knob missing from the second drawer on the nightstand. -There were missing areas of stain on another nightstand that did not have drawers. -There was missing areas of stain on a wooden chair. Attempted interview on 06/28/18 at 9:30am with the resident who resided in resident room #3 was unsuccessful. Interview with the Administrator on 06/28/18 at 9:08am revealed: -She was responsible for assuring the furniture was clean and in good repair. -She was not aware of the missing areas of stain on the furniture but would make sure it is either repaired or replaced as soon as possible.	C 076	Furniture will be restained or replaced new knobs will be installed.	9/30/18
C 078	10A NCAC 13G .0315(a)(5) Housekeeping and Furnishings	C 078		

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C 078	Continued From page 10 10A NCAC 13G .0315 Housekeeping and Furnishings (a) Each family care home shall: (5) be maintained in an uncluttered, clean and orderly manner, free of all obstructions and hazards; This Rule shall apply to new and existing homes. This Rule is not met as evidenced by: Based on observations and interviews, the facility failed to assure the facility was clean and free of hazards in 2 of 2 resident bathrooms, 2 of 3 resident bedrooms, the kitchen, the dining room, and the porch including a screen door, handrail, porch screens, countertops, a sink, towel bars, an electrical outlet face plate, glass window panes, cabinets, a wall heater, bathtub/showers, and a shower curtain rod. The findings are: Observation of resident room #3 on 06/28/18 at 8:45am revealed the outside storm window was broken and missing a large piece of glass on the lower right area, exposing the remaining sharp glass of the window. Interviews with the Administrator on 06/28/18 at 9:08am and 12:32pm revealed: -She was not aware that the window was broken in resident room #3 but thought it was just cracked. -She was not sure if a resident broke the window in bedroom #3. -She did not witness the window being broken but she thought it was broken about a month ago.	C 078	Window was removed for safety	6/28/18

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C 078	Continued From page 11 -It could have been a former staff person who broke the window if the staff person had locked the key in the house and was trying to get in. -She would get a maintenance worker to replace it as soon as possible and tell the resident that resided in room #3 to not open the inside window. Observation of the bathroom in resident room #3 on 06/28/18 at 8:50am revealed: -There was a knob missing from the wall heater. -There was a towel bar missing from the wall with only the end connectors protruding from the wall, creating a sharp edge hazard on each connector where the bar is missing. Attempted interview on 06/28/18 at 9:30am with the resident who resided in resident room #3 was unsuccessful. Observation of the common bathroom in the hallway on 06/28/18 at 9:05am revealed: -The tile above the tub had multiple areas of dark brown and black stains on the grout that met the tub. -The tub had black stains around the inside. -The shower curtain rod had missing paint and rust on the underside. -There was a towel bar missing from the wall with only the end connectors sticking out on the wall. -One of the hinges on the cabinet door above the toilet was rusted and not connected to the cabinet, allowing the door to hang when opened and exposing sharp rusted broken metal pieces of the hinges.. -One of the hinges on the cabinet door below the sink was rusted and not connected to the cabinet, allowing the door to hang when opened and exposing sharp rusted broken metal pieces of the hinges..	C 078	- Knob from wall heater will be replaced - Towel bar has been removed. - Has been cleaned and will be checked weekly - Shower curtain rod has been replaced - will be replaced or removed - in process of replacing hinges on door cabinets - doors.	8/15/18 7/26/18 6/29/18 8/1/18 10/1

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C 076	Continued From page 12 Interview with two residents on 06/28/18 at 8:07am and 10:45am revealed staff cleaned the facility including the bathrooms but they were unsure how often because the residents went to a day program on weekdays and were gone most of the day. Interview with the Administrator on 06/28/18 at 9:08am revealed: -She had scheduled a maintenance worker to replace the bathroom sink and counter in the common bathroom for August 2018. -She was not aware of the rusted and broken hinges on the bathroom cabinets but would have a maintenance worker repair them next week. Observation of the screened porch on 06/28/18 at 8:20am revealed: -The screen on the bottom half of the screen door was pulled away from the door in the top corner and hanging down. -Two of the four decorative metal bars on the bottom half of the screen door were bent and pulled away from the door causing the two metal bars to stick out at least 6 inches from the door. -The metal bars were sticking out at eye level and presented a hazard when reaching to open the door. Interview with a resident on 06/28/18 at 8:20am revealed the screen door on the porch had been that way since he was admitted in 2015. Interview with the Administrator on 06/28/18 at 9:35am revealed: -She could not recall how long the screen door to the porch had been broken. -One of the residents got upset and hit the door and he would sometimes slam the door, causing the damage.	C 076	Door to screen in porch will be removed until repaired or replaced	10/1/18

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	FCL054061	A. BUILDING: _____ B. WING _____	06/28/2018

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C 078	Continued From page 14 -She hoped to get some repairs done by August 2018. -It was not in the budget to be able to repair or replace the countertops so she would probably do that next year. Interview with the Administrator on 06/28/18 at 8:25am revealed she had scheduled a maintenance worker on Tuesday, 06/26/18, to come to the facility for some minor repairs today, 06/28/18. Interview with the Administrator on 06/28/18 at 8:30am revealed she called the maintenance worker and he would be coming to the facility tomorrow, 06/29/18. Attempted interview with the maintenance worker on 06/28/18 at 4:25pm was unsuccessful.	C 078	Will repair or replace by September	9/15/18
C 102	10A NCAC 13G .0317 (a) Building Service Equipment 10A NCAC 13G .0317 Building Service Equipment (a) The building and all fire safety, electrical, mechanical, and plumbing equipment in a family care home shall be maintained in a safe and operating condition This Rule is not met as evidenced by: Based on observations and interviews, the facility failed to assure all electrical and mechanical equipment in the facility were maintained in a safe and operating condition as related to multiple lighting fixtures not working properly and a broken	C 102		

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C 102	Continued From page 15 face plate on an electrical outlet. The findings are: Observation of resident room #3 on 06/28/18 at 8:45am revealed: -The overhead light in the room was on. -The light switch on the wall would not turn the light off. Interview with the Administrator on 06/28/18 at 9:08am revealed: -She was not aware of the broken light switch in resident room #3 but would have a maintenance worker fix it as soon as possible. Observation of the bathroom in resident room #3 on 06/28/18 at 8:50am revealed there were 3 light sockets above the sink with bulbs, but only one of the bulbs was working. Attempted interview on 06/28/18 at 9:30am with the resident who resided in resident room #3 was unsuccessful. Observation of the common bathroom in the hallway on 06/28/18 at 9:05am revealed the metal casing holding the light above the sink had areas of missing paint and rust. Observation of the kitchen on 06/28/18 at 8:30am revealed: -The surface of the counter top was worn with a yellow stain near the microwave. -The surface of the countertop was worn and had cracks in it between the sink and the refrigerator. Observation of the family room on 06/28/18 at 9:18am revealed: -One of 3 round glass globes on the light fixture in	C 102	In process of repairing the light switch Bulbs have been replaced	8/15/18 7/30/18

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C 102	Continued From page 16 the center of the ceiling was missing. -The metal end of a light bulb was twisted and appeared stuck in the light socket for the missing globe on the light fixture. -The light fixture would not turn on when the light switch was flipped to the on position. Interview with the Administrator on 06/28/18 at 9:18am revealed: -She did not realize there was a broken off piece of the end of a light bulb stuck in the socket for the missing globe on the light fixture. -She was not aware the light would not turn on when the switch was flipped up. -She would have the maintenance worker check it when he came to the facility. Observations of resident bedroom #4 on 06/28/18 at 9:25am and 10:30am revealed: -There was no overhead light fixture in the ceiling. -The only source of light in the room was 2 lamps on a bedside table between the two beds. -There was a tall lamp on the left side of the table that worked when turned on. -There was a shorter lamp on the right side of table that had no bulb and the switch on the lamp did not turn. Interview with resident who resided in resident bedroom #4 on 06/28/18 at 11:35am revealed: -He had been living at the facility for over 5 years. -He had two lamps in the room. -Only one of the lamps had a bulb that worked. -He did not know when the other lamp stopped working. Observation of the kitchen on 06/28/18 at 11:10am revealed: -The ceiling light fixture was missing 3 of 4 bulbs. -The single bulb in the fixture was not working	C 102	Bulbs were replaced staff will monitor lamps to make sure they work	6/30/18

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C 102	Continued From page 17 when the light switch was flipped up. Interview with the Administrator on 06/28/18 at 11:10am revealed: -She needed to replace the missing light bulbs in the kitchen light fixture. -The one bulb in the fixture also needed replacing because it did not work. Interview with the Administrator on 06/28/18 at 8:52am revealed: -She was responsible for assuring the facility was in good repair. -It seemed like the condition of the facility "just got worse this year". -She planned to get her maintenance worker to work on it depending on the budget. -She hoped to get some repairs done by August 2018. -They did not have a maintenance person who worked at the facility on a routine basis. -She would call a maintenance worker to make repairs as needed. -She would make sure all light bulbs were working. Interview with the Administrator on 06/28/18 at 8:25am revealed she had scheduled a maintenance worker on Tuesday, 06/26/18, to come to the facility for some minor repairs today, 06/28/18. Interview with the Administrator on 06/28/18 at 8:30am revealed she called the maintenance worker and he would be coming to the facility tomorrow, 06/29/18. Attempted interview with the maintenance worker on 06/28/18 at 4:25pm was unsuccessful.	C 102	Missing bulbs were replaced and in working order New light fixture will be installed	6/28/18 9/30/18

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C 140	Continued From page 18	C 140		
C 140	10A NCAC 13G .0405(a)(b) Test For Tuberculosis 10A NCAC 13G .0405 Test For Tuberculosis (a) Upon employment or living in a family care home, the administrator, all other staff and any live-in non-residents shall be tested for tuberculosis disease in compliance with 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, NC 27699-1902. (b) There shall be documentation on file in the home that the administrator, all other staff and any live-in non-residents are free of tuberculosis disease that poses a direct threat to the health or safety of others. This Rule is not met as evidenced by: Based on observations, interviews and record reviews, the facility failed to assure 1 of 3 staff (B) sampled was tested upon employment for tuberculosis (TB) disease in compliance with control measures adopted by the Commission for Health Services. The findings are: Review of Staff B's personnel file revealed: -He was hired as a supervisor-in-charge (SIC) on 03/07/08. -There was a tuberculosis (TB) skin test placed on 03/11/08 and read as negative on 03/14/08. -There was a TB skin test placed on 02/19/16 and	C 140		

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C 140	Continued From page 19 read as negative on 02/21/16. -There was no documentation of any other TB skin tests for Staff B. -There was no two step TB skin test for Staff B. Interviews with the Administrator on 06/28/18 at 1:20pm and 3:50pm revealed: -She and her family members (Staff B and Staff C) had been running the facility for years. -She and her office assistant were responsible for making sure TB skin tests were on file as required. -Staff B should have a two step TB skin test on file. -She was not aware the two TB skin tests on file for Staff B were not within 12 months of each other. -Staff B may have a thinned personnel file with another TB skin test. -She would check on it. Additional TB skin tests for Staff B were not provided by the facility prior to survey exit.	C 140	- 2 Step TB Skin Test Copy of TB Skin test sent from nurse that administer the 2-step test on file dates can be verified by [redacted]	7/5/18
C935	G.S. § 131D-4.5B (b) ACH Medication Aides;Training and Competency G.S. § 131D-4.5B (b) Adult Care Home Medication Aides; Training and Competency Evaluation Requirements. (b) Beginning October 1, 2013, an adult care home is prohibited from allowing staff to perform any unsupervised medication aide duties unless that individual has previously worked as a medication aide during the previous 24 months in an adult care home or successfully completed all of the following: (1) A five-hour training program developed by the	C935		

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C935	Continued From page 20 Department that includes training and instruction in all of the following: a. The key principles of medication administration. b. The federal Centers for Disease Control and Prevention guidelines on infection control and, if applicable, safe injection practices and procedures for monitoring or testing in which bleeding occurs or the potential for bleeding exists. (2) A clinical skills evaluation consistent with 10A NCAC 13F .0503 and 10A NCAC 13G .0503. (3) Within 60 days from the date of hire, the individual must have completed the following: a. An additional 10-hour training program developed by the Department that includes training and instruction in all of the following: 1. The key principles of medication administration. 2. The federal Centers of Disease Control and Prevention guidelines on infection control and, if applicable, safe injection practices and procedures for monitoring or testing in which bleeding occurs or the potential for bleeding exists. b. An examination developed and administered by the Division of Health Service Regulation in accordance with subsection (c) of this section. This Rule is not met as evidenced by: Based on observations, interviews and record reviews, the facility failed to assure 3 of 3 staff sampled (A, B, C) who administered medications had documentation of completing the medication clinical skills checklist prior to administering medications and the 5, 10, or 15 hour state approved medication administration training courses as required.	C935		

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C935	Continued From page 21 The findings are: 1. Review of Staff A's personnel file revealed: -She was the Administrator with a hire date of 03/07/08. -Staff B completed the medication clinical skills checklist on 07/16/17. -The last page of the medication clinical skills checklist was missing. -Staff B passed the written medication aide exam on 06/16/05. -There was no documentation Staff A completed the 5, 10, or 15 hour medication administration training courses. Review of the February 2018 - June 2018 medication administration records (MARs) revealed Staff A had documented administration of medications all 5 of those months. Interviews with 5 residents on 06/28/18 revealed Staff A administered medications to them on a regular basis and had for years. Interviews with the Administrator (Staff A) on 06/28/18 at 9:10am, 1:20pm, and 3:35pm revealed: -She had been administering medications since she opened the facility several years ago. -She and two other staff currently were working at the facility because she had terminated some former staff about a month ago. -She had not taken the 5, 10, or 15 hour medication courses because she did not need them since she had been a medication aide for years. -Her original medication clinical skills checklist was done sometime in 2009. -She would check the thinned personnel files to see if she could find it.	C935	Documentation & training was destroyed in the flood but verified by nurse 7/25/18 and can verify by dept of [redacted] Copy enclosed	

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C935	Continued From page 22 -She did not know the last page of the checklist completed in 2017 was missing. Attempted telephone interview with the facilty's contracted registered nurse on 06/28/18 was unsuccessful. Refer to interview with the Administrator on 06/28/18 at 3:50pm. 2. Review of Staff B's personnel file revealed: -He was hired as a supervisor-in-charge (SIC) on 03/07/08. -Staff B completed the medication clinical skills checklist on 05/18/18. -Staff B passed the written medication aide exam on 02/17/09. -There was no documentation Staff B completed the 5, 10, or 15 hour medication administration training courses. Observation on 06/28/18 at 8:00am upon entrance to the facility revealed Staff B was the only staff person on duty at that time. Interview with Staff B on 06/28/18 at 8:00am revealed: -He was currently the SIC on duty but Staff A was on her way to the facility to relieve him because had to go to his other job. -He administered medications to the residents, including that morning on 06/28/18. Review of the February 2018 - June 2018 medication administration records (MARs) revealed: -Staff B had documented administration of medications all 5 of those months with initials and equivalent signature. -Staff B had documented administration of	C935		

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C935	Continued From page 23 medications prior to the medication clinical skills checklist being completed on 05/18/18. Interviews with 5 residents on 06/28/18 revealed Staff B administered medications to them on a regular basis and had for years. Interview with the Administrator on 06/28/18 at 9:10am revealed: -Staff B was a SIC and he had administered medications to the resident since he started working at the facility. -She and Staff B administered medications most of the time. -Staff B had not taken the 5, 10, or 15 hours medication courses because he did not need to take it since he had been a medication aide for years. -Staff B's original medication clinical skills checklist was done sometime in 2009. -She would check the thinned personnel files to see if she could find it. Attempted telephone interview with the facilty's contracted registered nurse on 06/28/18 was unsuccessful. Refer to interview with the Administrator on 06/28/18 at 3:50pm. 3. Review of Staff C's personnel file revealed: -He was hired as a supervisor-in-charge (SIC) on 07/07/08. -Staff C completed the medication clinical skills checklist on 05/18/18. -Staff C passed the written medication aide exam on 02/17/09. -There was no documentation Staff C completed the 5, 10, or 15 hour medication administration training courses.	C935		

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C935	Continued From page 24 Review of the February 2018 - June 2018 medication administration records (MARs) revealed: -No documentation with an equivalent signature for Staff C. -Staff C and Staff B had the same initials and name except the suffix at the end (Jr. and Sr.). Interview with the Administrator on 06/28/18 at 9:10am revealed: -Staff C administered medications if she and Staff B were unavailable. -Staff C last administered medications about 4 or 5 months ago. -She was not sure if some of the initials on the MARs were Staff C's since he and Staff B had the same initials and name except the suffix (Jr. and Sr.) Interviews with 5 residents on 06/28/18 revealed Staff A and Staff B mostly administered their medications and they were unsure the last time Staff C had administered medications. Interviews with the Administrator on 06/28/18 at 9:10am, 1:20pm, and 3:35pm revealed: -Staff C had administered medications occasionally since he started working there several years ago. -Staff C had not taken the 5, 10, or 15 hour medication courses because he did not need them since he had been a medication aide for years. -Staff C's original medication clinical skills checklist was done sometime in 2009. -She would check the thinned personnel files to see if she could find it. Attempted telephone interview with the facilty's	C935		

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C935	Continued From page 25 contracted registered nurse on 06/28/18 was unsuccessful. Refer to interview with the Administrator on 06/28/18 at 3:50pm. Interview with the Administrator on 06/28/18 at 3:50pm revealed: -She and her office assistant were responsible for making sure the medication aide qualifications were completed and on file. -She thought the medication clinical skills checklist had to be done yearly. -She would either shred or put the previous medication clinical skills checklist in a thinned record once a new one was completed each year. -She would try to locate the original medication clinical skills checklist.	C935		