Received via E-mail 11-1-2018

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FORM APPROVED

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
	HAL034068	A. BUILDING: _____ B. WING _____	R-C 10/05/2018

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
MEMORY CARE OF THE TRIAD	413 NORTH MAIN STREET KERNERSVILLE, NC 27284

(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 and complaint investigation on October 4, 2018 and October 5, 2018.	{D 000}		
{D935}	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 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	{D935}	-Executive Director will make sure all Medication Technicians complete the 15 hour medication training during orientation. This will be a standard practice. As of 10/26/18 all Medication Technicians have completed the 15 hour Medication training.	

Division of Health Service Regulation

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE: Candace McFarren · TITLE: Executive Director · (X6) DATE: 11/1/18

STATE FORM 6899 T5WD12 If continuation sheet 1 of 3

Reviewed and Accepted 11-9-2018 HRA

Division of Health Service Regulation

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{D935}	Continued From page 1	{D935}		

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:
Non-compliance continues.

Based on interviews and record reviews, the facility failed to assure 2 of 2 medication aides sampled (Staff A and B) completed the 5, 10 or 15 hour medication training or had verification of previous employment before administering medication to residents.

The findings are:

Review of Staff A, Medication Aide's (MA) personnel record revealed:
-Staff A was hired on 03/06/18.
-There was documentation Staff A completed a medication clinical skills validation on 02/28/18.
-There was documentation Staff A successfully passed the written medication administration exam on 10/9/08.
-There was no documentation of 5, 10 or 15 hour medication aide training completed.
-There was incomplete documentation of employment verification for Staff A prior to beginning work as a MA at the facility.
-There was verification of employment from a previous facility for the previous 24 months.

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{D935}	Continued From page 2 Interview with Staff A on 10/04/18 at 3:55 pm revealed: -She had worked consistently as a MA since 2008. -She was not sure if she had completed the 5, 10 or 15 hour medication training in the past. -She did not know she had to provide documention of employment as a MA since 2013. Interview with the Administrator on 10/05/18 at 10:00 am revealed: -She was responsible for making sure staff completed the 5, 10 or 15 hour medication training or had verification of previous employment prior to administering medications. -She thought she was only required to verify employment for the previous 24 months prior to starting at the facility. -She would have Staff A complete the required training immediately.	{D935}		