STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL051064	A. BUILDING: _____ B. WING _____	R 07/10/2019

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
CLASSIC CARE HOMES # 2	103 ANNIE PARKER CIRCLE SMITHFIELD, NC 27577

(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 July 10, 2019.	{D 000}		
{D 131}	10A NCAC 13F .0406(a) Test For Tuberculosis 10A NCAC 13F .0406 Test For Tuberculosis (a) Upon employment or living in an adult care home, the administrator and 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. This Rule is not met as evidenced by: FOLLOW-UP TO TYPE B VIOLATION The Type B Violation was abated. Non-compliance continues. Based on record reviews and interviews, the facility failed to assure 2 of 3 sampled staff (Staff B and C) had completed a tuberculosis (TB) skin test upon hire in compliance with control measures adopted by the Commission for Health Services. The findings are: 1. Review of Staff B, medication aide, personnel record revealed: -Staff B's hire date was documented as September 2018 (there was not an exact day documented). -There was a TB skin test placed on 06/17/19 and	{D 131}		

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{D 131}	Continued From page 1 read as negative on 06/19/19. -There were no other TB skin tests on record for Staff B. Interview with Staff B on 07/10/19 at 1:35pm revealed: -She had been working at the facility since September 2018. -The former Administrator had not "mentioned" to her about completing TB testing prior to April 2019. -The former Administrator placed a note in the envelope with her paycheck in April 2019 for her to go and get a TB skin test. -She had one TB skin test done in June 2019 and she did not know that she needed another TB skin test. -The former Administrator did not tell that she needed to have two TB skin tests done in April 2019. -The current Administrator had given her written notification that she needed a TB skin test on 07/10/19. Review of a facility memo dated 07/10/19 revealed there was a request for Staff B to have a TB test completed for her employment. Refer to interview with the Administrator on 07/10/19 at 12:50pm. Refer to interview with the Business Office Manager on 07/10/19 at 12:50pm. 2. Review of Staff C, medication aide, personnel record revealed: -Staff C's hire date was documented as September 2018 (there was not an exact day documented). -There was a TB skin test placed on 04/29/19 and	{D 131}		

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{D 131}	Continued From page 2 read as negative on 05/02/19. -There were no other TB skin tests on record for Staff C. Telephone interview with Staff C on 07/10/19 at 1:25pm revealed she had been working at the facility since September 2018 and the previous Administrator never asked her to do any TB testing when she started working at the facility. Interview with Staff C on 07/10/19 at 1:54pm revealed: -She did not know she needed to have a TB skin test until April 2019 when the previous Administrator put the note in the envelope with her check. -The note only asked her to have a TB skin test done and not a second TB skin test. -She did not know she needed another skin test until the new Administrator told her about it today (07/10/19) and gave her a written request to get the TB test done. Review of a facility memo dated 07/10/19 revealed there was a request for Staff C to have a TB test completed for her employment. Refer to interview with the Administrator on 07/10/19 at 12:50pm. Refer to interview with the Business Office Manager on 07/10/19 at 12:50pm. Interview with the Administrator on 07/10/19 at 12:50pm revealed: -She and the BOM were responsible to make sure the staff had two-step TB skin tests. -She had started working at the facility on 06/10/19 and the BOM started in July 2019. -They were still in the process of reviewing the	{D 131}		

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{D 131}	Continued From page 3 personnel records. -She did not realize the two staff had not completed their two-step TB skin tests. -She did not understand why the two-step TB skin tests for the two staff had not been completed with the previous Administrator when the staff were hired. Interview with the Business Office Manager on 07/10/19 at 12:50pm revealed: -She had started working at the facility in July 2019 and the current Administrator had just started in June 2019. -She and the Administrator were in the process of reviewing all the personnel records to ensure their compliance. -There was a lot of documentation missing from the personnel records. -She and the Administrator flagged the personnel records and planned to get the staff in compliance as they reviewed the personnel records. -She did not know the two staff had not completed their two TB skin tests.	{D 131}		
{D992}	G.S.§ 131D-45 (a) Examination and screening G.S. § 131D-45. Examination and screening for the presence of controlled substances required for applicants for employment in adult care homes. (a) An offer of employment by an adult care home licensed under this Article to an applicant is conditioned on the applicant's consent to an examination and screening for controlled substances. The examination and screening shall be conducted in accordance with Article 20 of Chapter 95 of the General Statutes. A screening	{D992}		

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{D992}	Continued From page 4 procedure that utilizes a single-use test device may be used for the examination and screening of applicants and may be administered on-site. If the results of the applicant's examination and screening indicate the presence of a controlled substance, the adult care home shall not employ the applicant unless the applicant first provides to the adult care home written verification from the applicant's prescribing physician that every controlled substance identified by the examination and screening is prescribed by that physician to treat the applicant's medical or psychological condition. The verification from the physician shall include the name of the controlled substance, the prescribed dosage and frequency, and the condition for which the substance is prescribed. If the result of an applicant's or employee's examination and screening indicates the presence of a controlled substance, the adult care home may require a second examination and screening to verify the results of the prior examination and screening. This Rule is not met as evidenced by: Based on interviews and record reviews, the facility failed to assure an examination and screening for the presence of controlled substances was performed for 1of 3 sampled staff (Staff B) hired after 10/01/13. The findings are: Review of Staff B's personnel record revealed: -She was employed as a medication aide (MA). -Staff B's hire date was documented as September 2018 (there was not an exact day documented).	{D992}		

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{D992}	Continued From page 5 -There was no documentation of completion of controlled substance examination and screening. Interview with the Administrator on 07/10/19 at 12:50pm revealed: -She and the business office manager (BOM) were responsible to make sure the staff were screenings. -She had started working at the facility on 06/10/19 and the BOM started in July 2019. -They were still in the process of reviewing the staff's personnel records. -She realized Staff B had not been screened for controlled substances when she reviewed her personnel record (time not specified). -Staff B was supposed to be screened on on 07/08/19; but she lost her keys and the screening for controlled substances was not done. -She would send Staff B to have her drug screen completed today (07/10/19). Interview with the BOM on 07/10/19 at 12:52pm revealed: -She had started working at the facility in July 2019 and the current Administrator had started working at the facility in June 2019. -She and the Administrator were in the process of reviewing all the staff's personnel records to ensure their compliance. -There was a lot of documentation missing from the staff personnel records. -She and the Administrator flagged the staff personnel records when they were found out of compliance. -They planned to get the staff in compliance as they reviewed the personnel records. -She did not know Staff B had not been screened for controlled substances. Interview with Staff B on 07/10/19 at 1:35pm	{D992}		

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{D992}	Continued From page 6 revealed: -She had been working at the facility since September 2018. -The former Administrator had not "mentioned" to her about being screened for controlled substances when she hired. -The former Administrator put a note in the envelope with her paycheck in April 2019 for her to get a drug test. -The former Administrator never followed up about the drug test and she had not been screened for controlled substances since she got the note in April 2019. -The current Administrator gave her written notification that she needed to a drug test for her employment on 07/10/19. -She was going to get the drug screen done today (07/10/19). Review of a facility memo dated 07/10/19 revealed there was a request for Staff B to complete a drug screen.	{D992}		