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
	FCL045091	A. BUILDING: _____ B. WING _____	03/19/2019

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
SOUNDVIEW FAMILY CARE HOMES UNIT F	24 EAST MONET FLAT ROCK, NC 28731

(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 and follow up survey on 03/19/19.	C 000	C934 Infection control certificate from time of hire placed in personnel file. Personnel files will be audited quarterly to ensure all required documentation is on hand at all times.	5/20/19
C 934	G.S.131D-4.5B (a) ACH Infection Prevention Requirements G.S. 131D-4.5B Adult Care Home Infection Prevention Requirements (a) By January 1, 2012, the Division of Health Service Regulation shall develop a mandatory, annual in-service training program for adult care home medication aides on infection control, safe practices for injections and any other procedures during which bleeding typically occurs, and glucose monitoring. Each medication aide who successfully completes the in-service training program shall receive partial credit, in an amount determined by the Department, toward the continuing education requirements for adult care home medication aides established by the Commission pursuant to G.S. 131D-4.5 This Rule is not met as evidenced by: Based on interviews and record reviews, the facility failed to assure 1 of 2 sampled medication aides (Staff A) completed the state mandated infection control training annually. The findings are: Review of Staff A's personnel file revealed: -Staff A was hired as a medication aide on 09/01/17. -There was no documentation Staff A had completed the annual mandatory infection control training.	C 934		

Review and accepted 08/08/19 RD

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C 934	Continued From page 1 Interview with the Property Manager on 03/19/19 at 2:22pm revealed: -She did not know if Staff A had completed the annual infection control training. -The paperwork for the training was in another facility and there was not any staff available to retrieve it. Telephone interview with the Administrator on 03/19/19 at 2:40pm revealed: -Staff at the facility had the annual infection control training in December 2018. -The paperwork for the training was in another facility and there was not any staff available to retrieve it. Attempted telephone interview with Staff A on 03/19/19 at 2:27pm was unsuccessful.	C 934		