STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL034090	A. BUILDING: _____ B. WING _____	12/18/2020

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
CLEMMONS VILLAGE I	6401 HOLDER ROAD CLEMMONS, NC 27012

(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 complaint investigation and a COVID-19 Focused infection control survey with an on-site visit on 12/15/20 and 12/17/20 and desk review on 12/16/20 through 12/18/20 with a telephone exit on 12/18/20.	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:	D935		

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D935	Continued From page 1 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 interviews and record reviews, the facility failed to assure that 2 of 3 sampled staff (Staff A and B) who administered medications had documentation of completion of a Medication Clinical Skills Competency Validation prior to administering medications to residents at the current facility. The findings are: 1. Review of Staff B, Resident Care Director's (RCD), personnel record revealed: -Staff B was hired on 08/27/12 at a sister facility with the same company and was promoted to RCD in August 2020 at the current facility. -There was documentation Staff B passed the written medication aide (MA) exam on 07/31/13. -There was documentation of a Medication	D935		

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D935	Continued From page 2	D935		

Clinical Skills Competency Validation dated 04/24/13 from a sister facility.
-There was no documentation Staff B completed a Medication Clinical skills Competency Validation in August 2020 prior to passing medications.

Review of residents' October, November, and December 2020 electronic Medication Administration Records (eMARs) revealed:
-Staff A documented the administration of medications 1 day in October 2020.
-Staff A documented the administration of medications 1 day in November 2020.
-Staff A documented the administration of medications 1 day in December 2020.

Interview with Staff B on 12/17/20 at 12:22 pm revealed:
-She had worked at the current facility since August 2020 when she was promoted to RCD but had worked at a sister facility with the same company since 2012.
-She worked as a MA and administered medication when she needed to.
-When she worked a a MA in it was usually on second shift.
-She passed her MA exam in 2013.
-She had completed a medication aide competency validation checklist at a sister facility.
-She did not know she was required to do a new Medication Clinical Skills Competency Validation checklist for the current facility because she continued to work was with the same company.
-The Human Resource (HR) Assistant was responsible for personnel records, but had also transferred to the current facility in October 2020 from a sister facility.

Telephone interview the HR Assistant on 12/18/20 at 11:03 am revealed:

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D935	Continued From page 3	D935		

-She had started transitioning to the current facility in October 2020 but due to the COVID-19 outbreak she had not been able to do a complete audit of personnel records.
-She did not know MAs were required to complete a new Medication Clinical Skills Competency Validation checklist when MAs transferring from a sister facility with the same company.

Interview with the Administrator on 12/17/20 at 12:20 pm revealed:
-She did not know Staff B needed a new Medication Clinical Skills Competency Validation checklist completed for the current facility because she had completed one at a sister facility.
-The HR Assistant was new to the facility also and probably was not aware of the requirement.

2. Review of Staff A, Assistant Administrator's, personnel record revealed:
-Staff A was hired on 12/29/11 at a sister facility with the same company and was promoted to Assistant Administrator in August 2020 at the current facility.
-There was documentation Staff A passed the written medication aide (MA) exam on 07/28/10.
-There was documentation of a Medication Clinical Skills Competency Validation dated 01/20/12 at a sister facility.
-There was no documentation Staff A completed a Medication Clinical Skills Competency Validation at the current facility in August 2020 prior to passing medications.

Review of residents' October, November, and December 2020 electronic Medication Administration Records (eMARs) revealed:
-Staff A documented the administration of

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D935	Continued From page 4	D935		

medications 1 day in October 2020.
-Staff A did not document the administration of medications in November and December 2020.

Interview with Staff A on 12/17/20 at 12:19 pm revealed:
-She had worked at the current facility since August 2020 when she was promoted to Assistant Administrator, but had worked at a sister facility with the same company since 2011.
-She worked as a MA and administered medication when she needed to, but not been very often.
-She passed her MA written exam in 2010.
-She had completed a Medication Clinical Skills Competency Validation checklist at a sister facility.
-She did not know she was required to do a new Medication Clinical Skills Competency Validation checklist for the current facility because she worked with the same company.
-The Human Resource (HR) Assistant was responsible for personnel records, but had also transferred to the facility in October 2020 from a sister facility.

Telephone interview the HR Assistant on 12/18/20 at 11:03 am revealed:
-She had started transitioning to the current facility in October 2020, but due to the COVID-19 outbreak she had not been able to do a complete audit of personnel records.
-She did not know MAs were required to complete a new Medication Clinical Skills Competency Validation checklist when transferring from a sister facility with the same company.

Interview with the Administrator on 12/17/20 at 12:20 pm revealed:

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D935	Continued From page 5 -She did not know Staff A needed a new Medication Clinical Skills Competency Validation checklist completed for the current facility because she had completed one at a sister facility. -The HR Assistant was new to the facility also and probably was not aware of the requirement.	D935		