

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: fc1092252	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED C 09/08/2021
NAME OF PROVIDER OR SUPPLIER HEART TO LIVE		STREET ADDRESS, CITY, STATE, ZIP CODE 1410 KILDAIRE FARM ROAD CARY, NC 27511		
(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 a follow-up survey and complaint investigation on September 8, 2021.	C 000		
C 145	10A NCAC 13G .0406(a)(5) Other Staff Qualifications 10A NCAC 13G .0406 Other Staff Qualifications (a) Each staff person of a family care home shall: (5) have no substantiated findings listed on the North Carolina Health Care Personnel Registry according to G.S. 131E-256; This Rule is not met as evidenced by: Based on record reviews and interviews the facility failed to ensure 1 of 2 sampled staff (Staff B) had no substantiated findings on the North Carolina Health Care Personnel Registry (HCPR) prior to hire. The findings are: Review of Staff B's personnel record revealed: -There was no date of hire documented. -Her title at the facility was a personal care aide (PCA). -There was documentation a HCPR check was completed for Staff B on 09/06/21. -There were no documented findings on the HCPR check performed 09/06/21. Interview with Staff B on 09/08/21 at 9:30am revealed: -She was a personal care aide (PCA). -She had just started working at the facility two weeks ago. -She assisted the resident with whatever the	C 145		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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C 145	Continued From page 1 resident needed her to do. -She talked to the residents and performed cleaning tasks. Interview with the Administrator on 09/08/21 at 11:16am revealed: -She was responsible for performing HCPR checks on new employees. -She knew HCPR checks were required for staff prior to hire. -It was "impossible" for her to get everything done because of other things that go on. -She was the only person working at the facility prior to Staff B coming to work at the facility. -Staff B was in a probationary status and she (Administrator) was still obtaining new employee documents. -Staff B started working "around 10 days" ago.	C 145			