STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	FCL011268	A. BUILDING: _____ B. WING _____	11/22/2022

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
ANGEL HOUSE V	60 E HORNOT CIRCLE ASHEVILLE, NC 28806

(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 survey on November 22, 2022.	C 000		
C935	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 Prevention guidelines on infection control and, if	C935		

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C935	Continued From page 1 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 ensure 1 of 3 sampled medication aides (staff B) had successfully passed the state medication aide exam within 60 days of completing the 15- hour medication aide training and validation of their medication administration competency checklist before administering medications unsupervised. The findings are: Review of Staff B, Supervisor in Charge (SIC), personnel file revealed: -She was hired on 10/07/22. -She completed the 15-hour medication aide training on 11/07/22 and 11/08/22. -She completed the medication administration competency checklist on 11/08/22. -There was no documentation of Staff B taking the state medication aide (MA) exam. Interview with Staff B on 11/22/22 at 8:49am revealed: -She had given medications to all the residents the morning of 11/22/22. -She was not a medication aide yet because she had not taken her state MA exam. -No one was present when she administered medications to all the residents on the morning of 11/22/22.	C935		

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C935	Continued From page 2 -She was scheduled to take her state MA exam on 11/22/22. -Sometimes there was another MA present when she gave medications, but she had been passing medication independently to residents in the facility without supervision. Interview with the Administrator on 11/22/22 at 2:00pm revealed: -Staff B had not yet taken the state MA exam. -Staff B was scheduled to take it online on 11/22/22. -She was not aware that Staff B had to take and pass the state MA exam before she could independently administer medications without supervision.	C935		