STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	FCL0011169	A. BUILDING: _____ B. WING _____	08/08/2023

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
DEE & G ENRICHMENT CENTER I	155 CARRIAGE LOOP BURLINGTON, NC 27217

(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 August 8, 2023.	C 000		
C 202	10A NCAC 13G .0702(a) Tuberculosis Test and Medical Examination 10A NCAC 13G .0702 Tuberculosis Test and Medical Examination (a) Upon admission to a family care home each resident shall be tested for tuberculosis disease in compliance with the 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, North Carolina 27699-1902. This Rule is not met as evidenced by: Based on record reviews and interviews, the facility failed to ensure 3 of 3 (#1, #2 and #3) sampled residents had completed two-step tuberculosis (TB) testing in compliance with the control measures for the Commission for Health Services and placed in the documentation's were completed and placed in the residents' records. The findings are: 1.Review of Resident #1's current FL-2 dated 04/24/23 revealed diagnoses of diabetes, schizophrenia and major depression. Review of Resident #1's Resident Register revealed an admission date of 05/03/23. Review of Resident #1's record revealed: -There was no documentation of a first TB skin	C 202		

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C 202	Continued From page 1	C 202		

test administered before Resident #1's date of admission.
-There was no documentation of a request for TB skin testing for Resident #1 after her admission to the facility.
-There was no documentation of Resident #1 having any TB skin testing done for admission to the facility prior to the survey conducted on 08/08/23.

Interview with Resident #1 on 08/08/23 at 4:00pm revealed:
-She was taken to the clinic, by the Administrator, for the first TB skin step to be administered.
-She was told by the Administrator she would be taken to the clinic for the second TB skin test.
-She had not been taken to have a second TB skin test administered.
-She did not know why she was not taken to the clinic to have the second TB skin test administered.

Refer to interview with the Administrator on 08/08/23 at 5:45pm

2. Review of Resident #2's current FL-2 dated 04/12/23 revealed diagnoses of epilepsy, convulsions and seizures.

Review of Resident #2's Resident Register revealed an admission date of 04/10/23.
-There was no documentation of a first TB skin test administered before Resident #1's date of admission.
-There was no documentation of TB skin testing for Resident #2 since his admission to the facility.
-There was no documentation of Resident #2 having TB skin testing done for admission to the facility prior to the survey conducted on 08/08/23.

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C 202	Continued From page 2 Interview with Resident #2 on 08/08/23 at 3:45pm revealed: -Resident #2 was never tested for TB for admission to the facility. -He did not know he needed to have TB skin testing for admission to the facility. -The Administrator had not asked him to have TB testing done for admission to the facility. -The Administrator never offered to take him to a clinic to have TB testing done. -Resident #2 kept a copy of all his medical papers and did not have any TB skin testing information documents in his papers. -The Administrator should have the documentation of any TB skin testing for him in her records. Refer to interview with the Administrator on 08/08/23 at 5:45pm. 3. Review of Resident #3's FL-2 dated 01/05/22 revealed diagnoses of schizophrenia and hallucinations. Review of Resident #3's Resident Register revealed an admission date of 01/02/23. Review of Resident #3's record revealed: -There was no documentation of a first TB skin test administered before Resident #3's date of admission. -There was no documentation of TB skin testing for Resident #3 after her admission to the facility. -There was no documentation of Resident #3 having TB skin testing done for admission to the facility prior to the survey conducted on 08/08/23. Interview with Resident #3 on 08/08/23 at 4:20pm revealed:	C 202		

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C 202	Continued From page 3 -She was not administered a TB skin test before admission or after admission to the facility. -She was not aware a 2-step TB skin test was required for admission to the facility. The Administrator had not asked her to have the TB skin tests. Refer to interview with the Administrator on 08/08/23 at 5:45pm _____ Interview with the Administrator on 08/08/23 at 5:45pm revealed: -Residents were to have their first TB skin testing before admission and second testing after admission. -The complete documentation was to be in the resident's record. -She was not aware the TB documentation for Resident #1, Resident #2 and Resident #3 were missing. -Some of the residents' records may have been removed and placed in storage by mistake and quickly placed back in the residents' record. -If the TB skin test documentation was not found, Residents #1, #2 and #3 should be taken to the clinic to obtain the TB skin tests and the documentation placed in their records. TB skin testing documentation for Resident #1, Resident #2 and Resident #3 was not submitted by the end of the survey on 08/08/23.	C 202		