STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	FCL074050	A. BUILDING: _____ B. WING _____	R 04/04/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
L AND C FAMILY CARE HOME LLC	6347 FAIRWAY DRIVE GRIFTON, NC 28530

(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 on 04/04/24.	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 findings listed on the North Carolina Health Care Personnel Registry according to G.S. 131E-256; This Rule is not met as evidenced by: TYPE B VIOLATION Based on record reviews and interviews, the facility failed to ensure 2 of 3 staff (Staff B and C) were verified through the North Carolina Health Care Personnel Registry (HCPR) upon hire. The findings are: 1. Review of Staff B's personnel record on 04/04/24 revealed: -There was no hire date documented. -Staff B's employment application was dated 01/22/21. -There was no documentation that a Health Care Personnel Registry (HCPR) check was completed upon hire. Interview with Staff B on 04/04/24 at 4:17pm revealed she had worked at the facility as a medication aide (MA) since January 2021. Interview with the Administrator on 04/04/24 at 4:38pm revealed:	C 145		

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C 145	Continued From page 1 -She was responsible for completing the HCPR checks for employees upon hire. -She thought she completed the HCPR check when Staff B was hired but she was not able to locate that documentation. 2. Observation upon entry to the facility on 04/04/24 at: 9:45am revealed: -A male answered the door and identified himself as staff. -There were no other staff members at the facility. -There was one resident in the facility. Interview with Staff C on 04/04/24 at 9:46am revealed: -The Administrator was not currently present at the facility and he was not sure where the Administrator was or what time she would return. -He was the only staff member present in the facility. -There was one resident present in the facility, the other five residents had been taken to their day program by the Administrator. -He had worked at the facility for a little over a month. -His duties mainly included housekeeping, but he was able to assist residents if they needed help getting dressed. -He did not administer medications. Interview with the Administrator on 04/04/24 at 10:18am revealed: -She returned to the facility after taking 5 residents to their day program. -Staff C was her family member that just came to help for a few minutes today while she took 5 residents to their day program. -Staff C was not an employee at the facility. -She had Staff B with her when she returned to	C 145		

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C 145	Continued From page 2 the facility and Staff B was a medication aide (MA) that recently returned to work after a short term medical leave. Second interview with the Administrator on 04/04/24 at 4:19pm revealed: -There were no current personnel records for Staff C because he was not a current employee at the facility. -Staff C was a family member and she occasionally hired him to complete maintenance or housekeeping projects around the care home. -Staff C was at the facility on 04/09/24 to help with a maintenance contractor that was scheduled for service earlier that morning. Third interview with the Administrator on 04/04/24 at 4:38pm revealed: -She was responsible for completing the HCPR checks for employees upon hire. -She left the facility to pick up another staff member and to take five residents to the day program an around 8:00am on 04/04/24. -One resident who did not attend the day program remained in the facility because he was sleeping in and did not want to go with her to take the other residents to the day program. -Staff C was present in the facility and she only planned to be away from the facility around an hour or an hour and half, -Staff C was present in the facility when she left one resident in the home while she transported staff and the other residents. -Staff C was not a current employee and she knew she should not have left one resident in the home without a qualified staff member. _____ The facility failed to ensure Staff B and C were verified through the North Carolina Health Care Personnel Registry (HCPR) upon hire. This	C 145		

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C 145	Continued From page 3 failure was detrimental to the health, safety, and welfare of the residents residing in the facility and constitutes a Type B Violation. _____ The facility provided a plan of protection in accordance with G.S. 131D-34 on 04/04/24 for this violation. THE CORRECTION DATE FOR THE TYPE B VIOLATION SHALL NOT EXCEED MAY 19, 2024.	C 145		
C 147	10A NCAC 13G .0406(a)(7) Other Staff Qualifications 10A NCAC 13G .0406 Other Staff Qualifications (a) Each staff person of a family care home shall: (7) have a criminal background check completed in accordance with G.S. 131D-40 and results available in the staff person's personnel file; This Rule is not met as evidenced by: Based on record reviews and interviews, the facility failed to ensure each staff person of a family care home had a criminal background check completed in accordance with G.S. 131D-40 with results available in the staff's personnel record for 1 of 3 staff (Staff C). The findings are: Observation upon entry to the facility on 04/04/24 at: 9:45am revealed: -A male answered the door and identified himself as staff. -There were no other staff members at the facility. -There was one resident in the facility.	C 147		

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C 147	Continued From page 4 Interview with Staff C on 04/04/24 at 9:46am revealed: -The Administrator was not currently present at the facility and he was not sure where the Administrator was or what time she would return. -He was the only staff member present in the facility. -There was one resident present in the facility, the other five residents had been taken to their day program by the Administrator. -He had worked at the facility for a little over a month. -His duties mainly included housekeeping, but he was able to assist residents if they needed help getting dressed. -He did not administer medications. Second interview with the Administrator on 04/04/24 at 4:19pm revealed: -There were no current personnel records for Staff C because he was not a current employee at the facility. -Staff C was a family member and she occasionally hired him to complete maintenance or housekeeping projects around the care home. -Staff C was at the facility on 04/09/24 to help with a maintenance contractor that was scheduled for service earlier that morning. Third interview with the Administrator on 04/04/24 at 4:38pm revealed: -She left the facility to pick up another staff member and to take five residents to the day program an around 8:00am on 04/04/24. -One resident who did not attend the day program remained in the facility because he was sleeping in and did not want to go with her to take the other residents to the day program. -Staff C was present in the facility and she only	C 147		

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C 147	Continued From page 5 planned to be away from the facility around an hour or an hour and half, -Staff C was present in the facility when she left one resident in the home while she transported staff and the other residents. -Staff C was not a current employee and she knew she should not have left one resident in the home without a qualified staff member.	C 147		
C 148	10A NCAC 13G .0406 (a)(8) Other Staff Qualifications 10A NCAC 13G .0406 Other Staff Qualifications (a) Each staff person of a family care home shall: (8) have an examination and screening for the presence of controlled substances completed in accordance with G.S. 131D-45 and results available in the staff person's personnel file; This Rule is not met as evidenced by: Based on observations, interviews and record reviews, the facility failed to ensure all staff were examined and screened for the presence of controlled substances upon hire and results were documented in the staff's personnel record for 1 of 3 staff (Staff C). The findings are: Attempted review of Staff C's personnel records on 04/04/24 at 1:00pm revealed there were no personnel records for Staff C. Interview with Staff C on 04/04/24 at 9:46am revealed: -He had worked at the facility for a little over a	C 148		

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C 148	Continued From page 6 month. -He usually worked a few hours each week from Tuesday through Friday. -He usually came in at 7:00am four days week. -His duties included housekeeping, but he was able to assist residents if they needed help getting dressed. -He did not administer medications. Interview with the Administrator on 04/04/24 at 4:19pm revealed: -There were no current personnel records for Staff C at the facility. -Staff C was a family member and was not an employee at the facility. -Staff C was employed at another facility she owned, but not at the current facility. -Staff C came to help with housekeeping and minor repairs as needed. -She thought Staff C had personnel records in a storage barn at the second facility that she owned but was not sure. -She was responsible for completing the drug screen for staff prior to their employment. -She should have reviewed Staff C's personnel records to ensure the drug screen had been completed.	C 148		
C 176	10A NCAC 13G .0507 Training on Cardio-Pulmonary Resuscitation 10A NCAC 13G .0507 Training on Cardio-Pulmonary Resuscitation Each family care home shall have one staff person on the premises at all times who has completed within the last 24 months a course on cardio-pulmonary resuscitation and choking management, including the Heimlich maneuver, provided by the American Heart Association,	C 176		

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C 176	Continued From page 7 American Red Cross, National Safety Council, American Safety and Health Institute and Medic First Aid, or by a trainer with documented certification as a trainer on these procedures from one of these organizations. The staff person trained according to this Rule shall have access at all times in the facility to a one-way valve pocket mask for use in performing cardio-pulmonary resuscitation. This Rule is not met as evidenced by: TYPE B VIOLATION Based on observations, record reviews, and interviews, the facility failed to ensure at least one staff person was at the facility at all times who had completed a cardio-pulmonary resuscitation (CPR) and choking management course within the last 24 months for 1 of 3 staff (Staff C). The findings are: Observation upon entry to the facility on 04/04/24 at 9:45am revealed: -A male answered the door and identified himself as staff. -There were no other staff members at the facility. -There was one resident in the facility. Interview with Staff C after entry to the facility on 04/04/24 at 9:46am revealed: -He had worked at the facility as a caregiver for a little over a month. -He arrived at the facility today (04/04/24) at 7:00am. -He was the only staff member present in the facility.	C 176		

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C 176	Continued From page 8 -He usually worked a few hours each week from Tuesday through Friday. -He usually came in at 7:00am four days a week. -There was one resident currently at the home, the other five residents had been taken to their day program by the Administrator. -Sometimes he worked alone at the facility for one to two hours when the Administrator took five residents to a day program, and he stayed at the home with one resident until the Administrator returned. Interview with Staff C on 04/04/24 at 10:12am revealed: -The Administrator had not returned to the facility. -He had no idea when the Administrator would return to the facility or where she was located. -He provided residents at the facility with meals, snacks and helped with personal care needs. -The Administrator was not currently present at the facility, and he was not sure where the Administrator was or what time she would return. -His duties mainly included housekeeping, but he was able to assist residents if they needed help getting dressed. -He did not administer medications. Observation of the Administrator on 04/04/24 at 10:17am revealed the Administrator and another individual entered through the back door of the facility. Interview with the Administrator on 04/04/24 at 10:18am revealed: -She returned to the facility after taking 5 residents to their day program. -Staff C was her family member that just came to help for a few minutes today while she took 5 residents to their day program. -Staff C was not an employee at the facility and	C 176		

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C 176	Continued From page 9	C 176		

did not have a staff record.
-She had Staff B with her when she returned to the facility and Staff B was a medication aide (MA) that recently returned to work at the facility.

Review of Resident #1's record on 04/04/24 at 12:30pm revealed Resident #1 did not have a do not resuscitate (DNR) on file.

Review of Resident #2's record on 04/04/24 at 10:25am revealed Resident #2 did not have a DNR on file.

Review of Resident #3's record on 04/04/24 at 10:18am revealed Resident #3 did not have a DNR on file.

Review of a fourth residents' record on 04/04/24 at 3:22pm revealed the fourth resident did not have a DNR on file.

Review of a fifth residents' record on 04/04/24 at 3:22pm revealed the fifth resident did not have a DNR on file.

Review of a sixth residents' record on 04/04/24 at 3:23pm revealed the sixth resident did not have a DNR on file.

Review of staff records on 04/04/24 revealed there was no record for Staff C, or record of him having cardio-pulmonary resuscitation (CPR) training.

Interview with the Administrator on 04/04/24 at 1:00pm revealed:
-She asked Staff C to come to the facility this morning to let repairmen into the facility and to be available for a resident that was at the home and did not go with her to transport the other residents

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C 176	Continued From page 10 to a day program. -She served residents breakfast on 04/04/24 at 7:00am. -She administered residents their medications on 04/04/24 between 7:00am to 7:15am. -She left the facility at 8:00am to transport 5 residents to their day program. -When she left the residents at the day program, she went to pick up Staff B who was a MA. -When she arrived at the facility with the MA, she told Staff C that he could leave the facility. Second interview with the Administrator on 04/04/24 at 4:19pm revealed: -Staff C was not an employee at the facility. -Staff C had been an employee at a second facility she owned three years ago. -There were no staff records available for Staff C at the facility. -She thought Staff C had personnel records in a storage barn at the second facility that she owned but was not sure. -Staff C came to work at the facility when she needed something cleaned. -Staff C should not have been at the facility this morning. _____ The Administrator failed to ensure there was at least one staff at the facility at all times who had successfully completed a cardio-pulmonary resuscitation (CPR) and choking management course within the last 24 months. Staff C did not complete a CPR and choking management course within the last 24 months, which placed residents who were full codes at risk for the possible delay of life-saving measures if needed. This failure was detrimental to the health and welfare of the residents and constitutes a Type B Violation. _____	C 176		

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C 176	Continued From page 11 The facility provided a plan of protection in accordance with G.S. 131D-34 on 04/04/24 for this violation. CORRECTION DATE FOR THE TYPE B VIOLATION SHALL NOT EXCEED MAY 19, 2024.	C 176		
C 186	10A NCAC 13G .0601 (b)(1) Management And Other Staff 10A NCAC 13G .0601 Management And Other Staff (b) At all times there shall be one administrator or supervisor-in-charge who is directly responsible for assuring that all required duties are carried out in the home and for assuring that at no time is a resident left alone in the home without a staff member. Except for the provisions cited in Paragraph (c) of this Rule regarding the occasional absence of the administrator or supervisor-in-charge, one of the following arrangements shall be used: (1) The administrator shall be in the home or reside within 500 feet of the home with a means of two-way telecommunication with the home at all times. When the administrator does not live in the licensed home, there shall be at least one staff member who lives in the home or one on each shift and the administrator shall be directly responsible for assuring that all required duties are carried out in the home;	C 186		

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C 186	Continued From page 12 This Rule is not met as evidenced by: Based on observations, interviews, and record reviews the facility failed to ensure the Administrator was responsible for the total operation of the home and that at no time a resident was left alone. The findings are: Review of the facility's license revealed: -The facility was licensed effective 01/01/24 for a capacity of 6 ambulatory residents. -The expiration date of the facility's license was 12/31/24. Observation upon entry to the facility on 04/04/24 at: 9:45am revealed: -Staff C answered the door and identified himself as staff. -There were no other staff members at the facility. -There was one resident in the facility. Interview with Staff C after entry to the facility on 04/04/24 at 9:46am revealed: -There was one resident at the home, the other five residents had been taken to their day program by the Administrator. -He had worked at the facility as a caregiver since March 2024. -He was the only staff member present in the facility. -He usually worked a few hours each week from Tuesday through Friday. Observation of Staff C after entry to the facility on 04/04/24 at 9:48am revealed: -Staff C called the Administrator to inform her that Division of Health Service Regulation (DHSR) staff were at the facility.	C 186		

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C 186	Continued From page 13 -Staff C had the Administrator on speaker when he called her from his cellular telephone. -The Administrator told Staff C to "go back in that staff room, and don't come back out until I get there." Interview with Staff C on 04/04/24 at 10:12am revealed: -He had no idea when the Administrator would return to the facility. -His duties included housekeeping, but he was able to assist residents if they needed help getting dressed. -He did not administer medications. Observation of the Administrator on 04/04/24 at 10:17am revealed the Administrator and another individual entered through the back door at the facility, entered the kitchen and then met DHSR staff at the dining room table. Interview with the Administrator on 04/04/24 at 10:18am revealed: -The facility census was 6 residents who were all ambulatory. -She returned to the facility after taking 5 residents to their day program. -Staff C was her family member that came to help for a few minutes today (04/04/24) while she took 5 residents to their day program. -Staff C was not an employee at the facility. -Staff B who was a medication aide (MA) arrived at the facility on 04/04/24, she had picked up Staff B on her way back to the facility. Second interview with the Administrator on 04/04/24 at 1:00pm revealed: -Staff C was her family member -She asked Staff C to come to the facility this morning to let repairmen into the facility.	C 186		

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NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
L AND C FAMILY CARE HOME LLC	6347 FAIRWAY DRIVE GRIFTON, NC 28530

(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 186	Continued From page 14 -She served residents breakfast on 04/04/24 at 7:00am. -She administered residents their medications on 04/04/24 between 7:00am to 7:15am. -She left the facility at 8:00am to transport 5 residents to their day program. -When she left the residents day program, she went to pick up Staff B who was an MA. -She arrived at the facility with the MA and told Staff C that he could leave the facility. Third interview with the Administrator on 04/04/24 at 4:19pm revealed: -Staff C had been an employee at a second facility she owns three years ago. -Staff C came to work at the facility when she needed something cleaned. -Staff C should not have been at the facility this morning. -She usually took all residents with her when she transported 5 residents to their day program, but the 6th resident wanted to sleep this morning, so she contacted her family member to come stay at the facility until she returned to the facility. -She also asked her family member to stay at the facility the morning of 04/04/24 so he could provide access to the facility for repairmen. -She should not leave residents with a family member who was not staff at the facility -She was responsible for the safety of the residents at the facility and should ensure a staff person is with the residents at all times at the facility.	C 186		