STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	FCL017009	A. BUILDING: _____ B. WING _____	12/04/2015

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
TERRY CARE HOME	2446 CHERRY GROVE ROAD YANCEYVILLE, NC 27379

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C 000	Initial Comments The Adult care Licensure Section completed an Annual and Follow-up Survey on 12/04/15.	C 000		
C 153	10A NCAC 13G .0501 (a) Personal Care Training And Competency 10A NCAC 13G .0501 Personal Care Training And Competency (a) The facility shall assure that personal care staff and those who directly supervise them in facilities without heavy care residents successfully complete a 25-hour training program, including competency evaluation, approved by the Department according to Rule .0502 of this Section. For the purposes of this Subchapter, heavy care residents are those for whom the facility is providing personal care tasks listed in Paragraph (i) of this Rule. Directly supervise means being on duty in the facility to oversee or direct the performance of staff duties. This Rule is not met as evidenced by: Based on interview and record review revealed the facility failed to assure one of two facility staff had completed a 25 hour personal care training program within six months of hire. The findings are: 1. Review of the record for Staff A revealed: - Staff A was hired on 7/28/14 as Administrator in Charge. - There was no documentation of completion of personal care training within six months of hire - There was documentation of a personal care skills check list dated 7/28/14.	C 153		

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C 153	Continued From page 1 Interview on 12/04/15 at 1:05p.m. with an Administrator in Charge revealed: - Staff A cooked, cleaned, administered medications, laundry and took care of resident appointments and paperwork. - The residents were not heavy care residents. - There were no transfers, toileting or bathing. - Mostly prompting was needed with residents and they were mostly independent. Interview on 12/04/15 at 2:30 p.m. with the Administrator/Licensee revealed: - All staff had personal care training. - She thought the training certificate for Staff A was in the staff record. - She would look for them and if not found, she would ensure Staff A would be retrained in personal care.	C 153		
C 934	G.S.131D-4.5B (a) ACH Infection Prevention Requirements G.S. 131D-4.5B Adult Care Home Infection Prevention Requirements (a) By January 1, 2012, the Division of Health Service Regulation shall develop a mandatory, annual in-service training program for adult care home medication aides on infection control, safe practices for injections and any other procedures during which bleeding typically occurs, and glucose monitoring. Each medication aide who successfully completes the in-service training program shall receive partial credit, in an amount determined by the Department, toward the continuing education requirements for adult care home medication aides established by the Commission pursuant to G.S. 131D-4.5	C 934		

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C 934	Continued From page 2 This Rule is not met as evidenced by: Based on interview and record review, the facility failed to assure the mandatory, annual in-service training program on infection control, was completed annually for 2 of 2 facility medication aides. (Staff A and B). The findings are: 1. Review of the record for Staff A revealed: - Staff A was hired on 7/28/14 as Administrator in Charge. - There was no documentation of completion of the mandatory, annual infection prevention training. Interview on 12/04/15 at 1:05 p.m. with an Administrator in Charge, Staff B, revealed: - Staff A administered medications to residents. - There was one resident in the facility at this time who was a diabetic and required fingerstick blood sugar checks. Staff A was not available for interview. Refer to interview on 12/04/15 at 2:30p.m. with the Administrator/Licensee. 2. Review of the record for Staff B revealed: - Staff B was hired on 7/01/13 as Administrator in Charge. - Staff B had passed the written medication administration examination on 9/13/02. - A medication administration clinical skills check list had been completed on 7/01/13.	C 934		

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C 934	Continued From page 3 - There was no documentation of current infection prevention training. - The last infection prevention training was dated 6/16/14 which is greater than one year ago. Interview on 12/04/15 at 1:05p.m. with Staff B, Administrator in Charge revealed: - Staff B administered medications to residents and completed fingerstick blood sugar checks for one resident in the facility. - She thought the infection training had been completed for the year. - The completed infection prevention training certificates should be in the staff records but she was not able to find them. Refer to interview on 12/04/15 at 2:30p.m. with the Administrator/Licensee. _____ Interview on 12/04/15 at 2:30 p.m. with the Administrator/Licensee revealed: - Infection prevention training for medication aides had been completed last year and was due to be completed again. - She knew it was overdue to be completed and had it scheduled with the facility nurse to completed soon. - She would ensure the training would be completed.	C 934		
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.	C935		

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C935	Continued From page 4 (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 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.	C935		

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C935	Continued From page 5 This Rule is not met as evidenced by: Based on record review and interviews, the facility failed to assure 1 of 2 medication aides had completed 15 hour medication aide training or had a verification of working as a medication aide in the 24 months prior to hire. (Staff A). The findings are: Review of the staff record for Staff A revealed: - Staff A was hired on 7/28/14 as an Administrator in Charge. - Staff A passed the written medication administration test on 7/28/06. - A medication clinical skills check list was completed for this facility on 7/28/14. - There was no documentation of a verification of working as a medication aide in the 24 months prior to hire at this faclity. - There was no documentation of the 15 hour medication administration training in the record. Interview on 12/04/15 at 1:05p.m. with an Administrator in Charge, Staff B, revealed: - Staff A filled in on days Staff B, Administrator in Charge was off the schedule. - Staff A passed medications for facility residents and completed fingerstick blood sugar checks on one facility resident with diabetes. Interview on 12/04/15 at 2:30p.m. with the Administrator/Licensee revealed: - Staff A had the 5 hour and 10 hour medication administration training when hired last year. - Staff A started passing medications after the training. - She thought the training certificates were in the staff records. - She knew the instructor would have the certificates.	C935		

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C935	Continued From page 6 No training certificates for medication administration 15 hour course were provided by the end of the survey.	C935		