STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	FCL096009	A. BUILDING: _____ B. WING _____	R 02/02/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
GRANTHAM FAMILY CARE # II	107 N GEORGIA AVENUE GOLDSBORO, NC 27530

(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 and the Wayne County Department of Social Services conducted an Annual and Follow Up Survvey on 02/02/2024.	C 000		
C 330	10A NCAC 13G .1004(a) Medication Administration 10A NCAC 13G .1004 Medication Administration (a) A family care home shall assure that the preparation and administration of medications, prescription and non-prescription and treatments by staff are in accordance with: (1) orders by a licensed prescribing practitioner which are maintained in the resident's record; and (2) rules in this Section and the facility's policies and procedures. This Rule is not met as evidenced by: Based on observations, interviews, and record reviews the facility failed to administer medications as ordered for 1 of 3 sampled residents including a medication used to clean and treat eyelid discomfort. The findings are: 1. Review of Resident #1's current FL-2 dated 07/13/23 revealed: -Diagnoses included schizophrenia, diabetes, hyperlipidemia, anemia, and vitamin D deficiency. -There was an order for Ocusoft Lid Scrub (used to treat eye lid discomfort) at bedtime. Observation of Resident #1's medications on hand on 02/02/24 at 10:30am revealed: -A full box of Ocusoft Lid Scrub (30) on the medication cart. - Ocusoft Lid Scrub was dispensed on 06/17/22 for a thirty day supply and on 07/29/24 for a thirty	C 330		

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C 330	Continued From page 1	C 330		

day supply.
- Ocusoft Lid Scrub that was dispensed on 06/17/22 expired on 06/17/23.
-No other Ocusoft Lid Scrub was on the medication cart.

Review of Resident #1's November 2023 medication administration record (MAR) revealed:
-There was an entry for Ocusoft Lid Scrub at bedtime scheduled at 8:00pm.
- Ocusoft Lid Scrub was documented as administered at 8:00pm 11/01/23 to 11/30/23.

Review of Resident #1's December 2023 medication administration record (MAR) revealed:
-There was an entry for Ocusoft Lid Scrub at bedtime scheduled at 8:00pm.
- Ocusoft Lid Scrub was documented as administered at 8:00pm 12/01/23 to 12/31/23.

Review of Resident #1's January 2024 medication administration record (MAR) revealed:
-There was an entry for Ocusoft Lid Scrub at bedtime scheduled at 8:00pm.
- Ocusoft Lid Scrub was documented as administered at 8:00pm 01/01/24 to 01/31/24.

Review of Resident #1's February 2024 medication administration record (MAR) revealed:
-There was an entry for Ocusoft Lid Scrub at bedtime scheduled at 8:00pm.
- Ocusoft Lid Scrub was documented as administered at 8:00pm 02/01/24.

Interview with a pharmacist at the facility contracted pharmacy on 02/02/24 at 11:20am revealed:
-Ocusoft Lid Scrub was first dispensed on 06/17/22 for a 30-day supply.
-Ocusoft Lid Scrub was last dispensed on

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C 330	Continued From page 2	C 330		

07/29/22 for a 30-day supply.
-The residents' eyes would not be as clean or discomfort may increase.

Interview with the Administrator/medication aide (MA on 02/02/24 at 11:45am revealed:
-The pharmacy entered medications on our MARs.
-She may not administer Ocusoft Lid Scrub every night.
-She was not sure why the medication was expired and on the medication cart.
-She did not know why Ocusoft Lid Scrub was not refilled.
-She could not explain why she was signing the MAR as administered when she did not administer the medication.

Interview with the pharmacy technician at the facility contracted pharmacy on 02/02/24 at 11:55am revealed:
-She completed the MARS for the facility.
-The prescription was only good for one year and expired on 06/16/23.
-She was responsible for removing medications from the MARs and should have removed Ocusoft Lid Scrub once it expired on 06/16/23.
-The facility had not requested any refills after 07/29/22.
-The facility was responsible for requesting a new prescription or they called the pharmacy and requested we call the provider for a new prescription.

Telephone interview with Resident #1 on 02/02/24 at 2:23pm revealed:
-He was at his day program.
-The Administrator/MA did not wash his eyes at bedtime.
-He washes his face every morning with soap and

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C 330	Continued From page 3 water in the shower. Attempted interview with Resident #1's Primary Care Provider on 02/02/24 at 12:30pm was unsuccessful.	C 330		
C 342	10A NCAC 13G .1004(j) Medication Administration 10A NCAC 13G .1004 Medication Administration (j) The resident's medication administration record (MAR) shall be accurate and include the following: (1) resident's name; (2) name of the medication or treatment order; (3) strength and dosage or quantity of medication administered; (4) instructions for administering the medication or treatment; (5) reason or justification for the administration of medications or treatments as needed (PRN) and documenting the resulting effect on the resident; (6) date and time of administration; (7) documentation of any omission of medications or treatments and the reason for the omission, including refusals; and (8) name or initials of the person administering the medication or treatment. If initials are used, a signature equivalent to those initials is to be documented and maintained with the medication administration record (MAR). This Rule is not met as evidenced by: Based on observations, interviews, and record reviews, the facility failed to ensure medication administration records were accurate for 1 of 3 sampled residents (#1) including inaccurate documentation for medications used to clean and treat eye lid discomfort.	C 342		

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C 342	Continued From page 4 The findings are: 1.Review of Resident #1's current FL-2 dated 07/13/23 revealed: -Diagnoses included schizophrenia, diabetes, hyperlipidemia, anemia, and vitamin D deficiency. -There was an order for Ocusoft Lid Scrub (used to clean and treat eye lid discomfort) at bedtime. Review of Resident #1's November 2023 medication administration record (MAR) revealed: -There was an entry for Ocusoft Lid Scrub at bedtime scheduled at 8:00pm. - Ocusoft Lid Scrub was documented as administered at 8:00pm 11/01/23 to 11/30/23. Review of Resident #1's December 2023 MAR revealed: -There was an entry for Ocusoft Lid Scrub at bedtime scheduled at 8:00pm. - Ocusoft Lid Scrub was documented as administered at 8:00pm 12/01/23 to 12/31/23. Review of Resident #1's January 2024 MAR revealed: -There was an entry for Ocusoft Lid Scrub at bedtime scheduled at 8:00pm. - Ocusoft Lid Scrub was documented as administered at 8:00pm 01/01/24 to 01/31/24. Review of Resident #1's February 2024 MAR revealed: -There was an entry for Ocusoft Lid Scrub at bedtime scheduled at 8:00pm. - Ocusoft Lid Scrub was documented as administered at 8:00pm 02/01/24. Observation of Resident #1's medications on hand on 02/02/24 at 10:30am revealed:	C 342		

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C 342	Continued From page 5 -A full box of Ocusoft Lid Scrub (30) on the medication cart. - Ocusoft Lid Scrub was dispensed on 06/17/22 for a thirty day supply and on 07/29/24 for a thirty day supply. - Ocusoft Lid Scrub that was dispensed on 06/17/22 expired on 06/17/23. -No other Ocusoft Lid Scrub was on the medication cart. Interview with a pharmacist at the facility contracted pharmacy on 02/02/24 at 11:20am revealed: -Ocusoft Lid Scrub was first dispensed on 06/17/22 for a 30-day supply. -Ocusoft Lid Scrub was last dispensed on 07/29/22 for a 30-day supply. -The residents' eyes would not be as clean or discomfort may increase. Interview with the pharmacy technician at the facility contracted pharmacy on 02/02/24 at 11:55am revealed: -She completed the MARS for the facility. -The prescription was only good for one year and expired on 06/16/23. -She was responsible for removing medications from the MARs and should have removed Ocusoft Lid Scrub once it expired on 06/16/23. -The facility had not requested any refills after 07/29/22. -The facility was responsible for requesting a new prescription or they called the pharmacy and requested we call the provider for a new prescription. Interview with the Administrator/medication aide (MA on 02/02/24 at 11:45am revealed: -The pharmacy entered medications on our MARs.	C 342		

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C 342	Continued From page 6 -She may not administer Ocusoft Lid Scrub every night. -She was not sure why the medication was expired and on the medication cart. -She did not know why Ocusoft Lid Scrub was not refilled. -She could not explain why she was signing the MAR as administered when she did not administer the medication. -The MAR should be accurate. Telephone interview with Resident #1 on 02/02/24 at 2:23pm revealed: -He was at his day program. -The Administrator/MA did not wash his eyes at bedtime. -He washes his face every morning with soap and water in the shower. Attempted interview with Resident #1's Primary Care Provider on 02/02/24 at 12:30pm was unsuccessful.	C 342		
C 375	10A NCAC 13G .1009(a)(1) Pharmaceutical Care 10A NCAC 13G .1009 Pharmaceutical Care (a) The facility shall obtain the services of a licensed pharmacist, prescribing practitioner or registered nurse for the provision of pharmaceutical care at least quarterly for residents or more frequently as determined by the Department, based on the documentation of significant medication problems identified during monitoring visits or other investigations in which the safety of the residents may be at risk. Pharmaceutical care involves the identification, prevention and resolution of medication related problems which includes at least the following: (1) an on-site medication review for each resident	C 375		

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C 375	Continued From page 7 which includes at least the following: (A) the review of information in the resident's record such as diagnoses, history and physical, discharge summary, vital signs, physician's orders, progress notes, laboratory values and medication administration records, including current medication administration records, to determine that medications are administered as prescribed and ensure that any undesired side effects, potential and actual medication reactions or interactions, and medication errors are identified and reported to the appropriate prescribing practitioner; and, (B) making recommendations for change, if necessary, based on desired medication outcomes and ensuring that the appropriate prescribing practitioner is so informed; and, (C) documenting the results of the medication review in the resident's record; This Rule is not met as evidenced by: Based on interviews and record reviews, the facility failed to ensure a licensed pharmacist, provider or registered nurse completed a quarterly onsite review for 3 of 3 sampled residents (#1, #2 and #3) which included the reconciliation of current orders, medication administration records (MARs) and medications in the facility. The findings are: 1. Review of Resident #1's current FL-2 dated 07/13/23 revealed diagnoses included schizophrenia, diabetes, hyperlipidemia, anemia, and vitamin D deficiency. Review of Resident #1's quarterly medication review revealed:	C 375		

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C 375	Continued From page 8 -There was a medication review completed on 07/07/23. -There was not another medication review completed since 07/07/23. Refer to the telephone interview with the facility's local pharmacy Physician on 02/02/24 at 11:29am. Refer to the telephone interview with the Administrator of another facility on 02/02/24 at 11:59am. Refer to interview with the Administrator on 02/02/24 at 11:46am. 2. Review of Resident #2's current FL-2 dated 12/28/23 revealed diagnoses included hypertension, schizophrenia, bipolar disorder, and hyponatremia. Review of Resident #2's quarterly medication review revealed: -There was a medication review completed on 07/07/23. -There was not another medication review completed since 07/07/23. Refer to the telephone interview with the facility's local pharmacy Physician on 02/02/24 at 11:29am. Refer to the telephone interview with the Administrator of another facility on 02/02/24 at 11:59am. Refer to interview with the Administrator on 02/02/24 at 11:46am. 3. Review of Resident #3's current FL2 dated	C 375		

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C 375	Continued From page 9 07/15/23 revealed diagnoses included schizophrenia, hypertension, and chronic kidney disease. Review of Resident #3's quarterly medication review revealed: -There was a medication review completed on 06/17/23. -There was not another medication review completed since 06/17/23. Refer to interview with the facility's local pharmacy Physician on 02/02/24 at 11:29am. Refer to the telephone interview with the Administrator of another facility on 02/02/24 at 11:59am. Refer to interview with the Administrator on 02/02/24 at 11:46am. _____ Telephone interview with the facility's local pharmacy's Physician on 02/02/24 at 11:29am revealed: -She last completed the medication reviews in July 2023. -She had been communicating with via text message with the Administrator of another facility who managed the medication reviews for the facility from July to December 2023. -She last scheduled an appointment to complete the medication reviews in December 2023, but the appointment was canceled and had not been rescheduled. -She was the person assigned to complete the medication reviews for the facility. Telephone interview with the Administrator of another facility on 02/0/24 at 11:59am revealed:	C 375		

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C 375	Continued From page 10 -The medication reviews appointments were canceled and rescheduled over a period of months in 2023 due to her having family emergencies. -There was an appointment to complete the medication reviews in October 2023, but the appointment was canceled due death in her family. -She was not able to keep the December 2023 due to her being sick and she did not reschedule the appointment. -She did not complete chart audits for the facility. -She was the person responsible for ensuring the quarterly medication reviews were completed. Interview with the Administrator on 02/02/24 at 11:46am revealed: -She completed file audits every 2 to 3 months but did not remember the last audit. -A family member, who was an Administrator at another facility, was the person responsible for ensuring the medication reviews were completed.	C 375		