STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL051002	A. BUILDING: _____ B. WING _____	02/19/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
AUTUMN HOME CARE OF JOHNSTON COUNTY I	474 JERRY ROAD SELMA, NC 27576

(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
D 000	Initial Comments The Adult Care Licensure Section conducted an annual survey on 02/18/25 to 02/19/25.	D 000		
D 306	10A NCAC 13F .0904(d)(4) Nutrition and Food Service 10A NCAC 13F .0904 Nutrition and Food Service (d) Food Requirements in Adult Care Homes: (4) Water shall be served to each resident at each meal, in addition to other beverages. This Rule is not met as evidenced by: Based on observations and interviews, the facility failed to ensure water was served at each meal, in addition to other beverages. The findings are: Observation of the lunch meal on 02/18/25 at 12:06pm revealed: -There were 7 residents present for the lunch meal. -There were 5 residents who were served only tea, and two residents were served water. -There were no additional glasses placed on the dining table for an additional beverage or water. -There was not a pitcher or container of water placed in the dining room to offer to residents. -The staff did not offer water to the residents drinking tea. Observation of the dinner meal on 02/18/25 at	D 306		

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D 306	Continued From page 1 5:01pm revealed: -There were 7 residents present for the dinner meal. -There were 5 residents who were served only tea, and two residents were served water. -There was not a pitcher or container of water placed in the dining room to offer to residents. Interview with a resident on 02/18/25 at 5:12pm revealed water was not served at every meal. Interview with a second resident on 02/18/25 at 5:13pm revealed she was not served water at every meal unless she asked for a glass of water. Interview with the medication aide (MA) on 02/18/25 at 5:14pm revealed: -Water was served to the residents at their breakfast meal. -She only served water to the two residents who did not drink tea or other beverages. -Residents were served water when they asked for water. -She had not made the pitcher of water for the lunch and dinner meals. Interview with the Administrator on 02/19/25 at 10:35am revealed: -Residents were to be served water with all three meals each day. -A pitcher of ice water was to be placed on the dining table to serve to residents who requested a glass of water. -Residents were encouraged to drink water because drinking water would prevent dehydration.	D 306		
D 378	10A NCAC 13F .1006 (b) Medication Storage	D 378		

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D 378	Continued From page 2 10A NCAC 13F .1006 Medication Storage (b) All prescription and non-prescription medications stored by the facility, including those requiring refrigeration, shall be maintained under locked security except when under the direct physical supervision of staff in charge of medication administration. This Rule is not met as evidenced by: Based on observations, interviews, and record reviews, the facility failed to ensure medications for residents were stored in a locked container in the refrigerator. The findings are: Observation of the kitchen on 02/18/25 at 10:00am revealed: -There was a small black box and a plastic zip storge bag on the second shelf on the refrigerator door. -The small black box was placed beside two bottles of ketchup. -The black box had an unlockable latch and contained Lantus 100 units/mL (U-100) for subcutaneous use only. -The clear plastic food storage bag contained 1 box of Ozempic 0.25mg/Dose (0.25mg syringe) was placed on top of the small black box. -There was a sign placed on the refrigerator door, "Workers Only Please. Thank you." Review of the facility's medication storage policy on 02/19/25 at 10:47pm revealed: -All medications, prescription and non-prescription, administered by facility staff, including those medications requiring refrigeration, were to be refrigerated.	D 378		

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D 378	Continued From page 3 -Medications will not be stored in a refrigerator with non-medication items unless stored in a container. -The container will be locked if the refrigerator does not contain a lock. Telephone interview with the facility's contracted Pharmacist on 02/19/25 at 10:50am revealed: -Lantus and Ozempic were medications used to treat diabetes. -The insulin should be stored in the refrigerator and locked to ensure the medication was not misused. -If the medication was not stored properly, the medication could lose it potentness and could not be affected for treating low or high blood sugar. Interview with the medication aide (MA) on 02/18/25 at 10:05am revealed: -The Lantus was kept in the black box and the Ozempic was kept in the zip plastic storage bag on the refrigerator shelf door. -She was not aware of the medication being kept in a locked container and stored separately away from the food. -Residents were not allowed to access the refrigerator at any time. -The facility had a written medication storage policy, but she could not remember what the policy stated about storing medication in the refrigerator. Telephone interview with the Administrator on 02/19/25 at 10:35am revealed: -The black box had a lock and should have been locked. -He was the person responsible for purchasing locked containers for residents' medication. -He was not aware the Lantus or Ozempic was not placed in the locked box.	D 378		

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D 378	Continued From page 4 -He had purchased a new locked container to store the Lantus and Ozempic.	D 378		