STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL014015	A. BUILDING: _____ B. WING _____	08/19/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
GRANDVIEW VILLA ASSISTED LIVING	2544 GRANDVIEW CIRCLE SW LENOIR, NC 28645

(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 08/19/25.	D 000		
D 358	10A NCAC 13F .1004 (a) Medication Administration 10A NCAC 13F .1004 Medication Administration (a) An adult 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 (Resident #3) related to a medication used to treat cholesterol. The findings are: Review of Resident #3's current FL2 dated 08/03/25 revealed diagnoses included hypertension, hyperlipidemia and hypothyroidism. Review of Resident #3's hospital discharge summary dated 07/11/25 revealed: -Resident #3 was admitted to the hospital on 06/13/25 for acute cystitis (urinary tract infection), bronchitis (inflammation of the lining of the bronchial tubes), and hypertension (high blood pressure). -There was an order for fenofibrate (used to treat high cholesterol) 145mg once in the morning.	D 358		

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D 358	Continued From page 1 Review of Resident #3's July 2025 electronic medication administration record (eMAR) revealed: -There was no entry fenofibrate 145mg. -There was no documentation of fenofibrate 145mg was administered from 07/11/25 through 07/31/25. Review of Resident #3's August 2025 eMAR revealed: -There was no entry fenofibrate 145mg. -There was no documentation of fenofibrate 145mg was administered from 08/01/25 through 08/18/25. Observation of Resident #3's medication on hand on 08/19/25 at 2:00pm revealed fenofibrate 145mg was not available for administration. Telephone interview with a pharmacist at the facility's contracted pharmacy on 08/19/25 at 3:02pm revealed: -The pharmacy received electronic medication orders for Resident #3 from a local hospital on 07/11/25 and fenofibrate was not included in the orders. -The pharmacy did not receive the hospital discharge instructions for Resident #3 from the facility and did not receive any physician's orders for fenofibrate. Interview with Resident #3's PCP on 08/19/2025 at 3:15pm revealed: -She was responsible for reviewing Resident #3's hospital discharge medications. -She admitted to overlooking Resident #3's fenofibrate when she reviewed the hospital discharge summary. -There were no adverse side effects from Resident #3 not receiving fenofibrate.	D 358		

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D 358	Continued From page 2 Interview with the MA supervisor on 08/19/25 at 2:50pm revealed: -She was responsible for reviewing hospital discharge instructions, confirming medications with the PCP, and faxing the discharge instructions to the pharmacy. -She compared the medication orders on the discharge instructions with the eMAR and ensured the medications were available in the medication cart. -She knew the local hospital sent electronic medication orders to the pharmacy for Resident #3. -She missed the faxing the discharge instructions to the pharmacy. Interview with the Administrator on 08/19/2025 at 2:40pm revealed: -She did not know Resident #3 had an order for fenofibrate. -The MA and the PCP were responsible for reviewing hospital discharge summaries. -MAs were responsible for reviewing medication orders and faxing medication orders to the pharmacy.	D 358		