STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	FCL092289	A. BUILDING: _____ B. WING _____	R 09/08/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
TWINKLE-STAR HOME SERVICES 2	202 BAINBRIDGE CIRCLE GARNER, NC 27529

(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 09/08/25.	{C 000}		
{C 218}	10A NCAC 13G .0704 (b) Resident Contract, Information on Facility 10A NCAC 13G .0704 Resident Contract, Information On Facility, and Resident Register (b) A family care home's administrator or supervisor-in-charge and the resident or the resident's responsible person shall complete and sign the Resident Register initial assessment within 72 hours of the resident's admission to the facility in accordance with G.S. 131D-2.15. The facility shall involve the resident in the completion of the Resident Register unless the resident is cognitively unable to participate. The Resident Register shall consist of the following: (1) resident's identification information including the resident's name, date of birth, sex, admission date, medical insurance, family and emergency contacts, advanced directives, and physician's name and address; (2) resident's current care needs including activities of daily living and services, use of assistive aids, orientation status; (3) resident's preferences including personal habits, food preferences and allergies, community involvement, and activity interests; (4) resident's consent and request for assistance including the release of information, personal funds management, personal lockable space, discharge information, and assistance with personal mail; (5) name of the individual identified by the resident who is to receive a copy of the notice of discharge per G.S. 131D- 4.8; and (6) resident's consent including a signature	{C 218}		

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{C 218}	Continued From page 1 confirming the review and receipt of information contained in the form. The Resident Register is available on the internet website, https://info.ncdhhs.gov/dhsr/acls/pdf/resregister.pdf, at no charge. The facility may use a resident information form other than the Resident Register as long as it contains same information as the Resident Register. Information on the Resident Register shall be kept updated and maintained 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 Resident Register was completed and signed for 2 of 2 residents (#1,#2). The findings are: 1. Review of Resident #1's current FL-2 dated 12/16/24 revealed: -Diagnoses included coronary artery disease, aphasia (difficulty with speech and communication), hypertension and hemiplegia. -Resident #1 was admited on 11/22/24. Review of Resident #1's Resident Register revealed: -Resident #1's birthday was documented for the date of admission. -There was documentation Resident #1 had a guardian. -There was documentation the Administrator signed the Resident Register on 11/22/24. -There was a computerized signature from	{C 218}		

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{C 218}	Continued From page 2 Resident #1's guardian but was not dated. Interview with the Administrator/Owner on 09/08/25 at 12:41pm revealed: -She was responsible for completing Resident Registers for residents on admission. -Resident #1 had a guardian and she must have forgotten to have him date when he signed the document. Attempted telephone interview with Resident #1's guardian on 09/08/25 at 11:30am was unsuccessful. 2. Review of Resident #2's current FL-2 dated 07/15/25 revealed: -Diagnoses included chronic kidney disease, chronic kidney failure and unspecified dementia. -Resident #2 was admitted on 05/02/22. Review of Resident #2's Resident Register revealed: -There was no date of admission documented. -There was documentation Resident #2 had a guardian. -The Administrator and Resident #2 had signed the Resident Register but was not dated. Interview with the Administrator/Owner on 09/08/25 at 12:41pm revealed: -She was responsible for completing Resident Registers for residents on admission. -Resident #2 had a guardian that came to the facility monthly. -Resident #2 signed his Resident Register. -She forgot to date her signature and have Resident #2 date his signature. Attempted telephone interview with Resident #2's guardian on 09/08/25 at 11:34am was	{C 218}		

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{C 218}	Continued From page 3 unsuccessful.	{C 218}		