STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	FCL018040	A. BUILDING: _____ B. WING _____	C 09/22/2025

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SERENITY FAMILY CARE HOME	2415 - B SOUTH CENTER STREET HICKORY, NC 28602

(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 Catawba County Department of Social Services conducted a complaint investigation on September 17, 2025, through September 19, 2025, and on September 22, 2025. The complaint investigation was initiated by Catawba County Department of Social Services on September 4, 2025.	C 000		
C 145	10A NCAC 13G .0406(a)(5) Other Staff Qualifications 10A NCAC 13G .0406 Other Staff Qualifications (a) Each staff person of a family care home shall: (5) have no findings listed on the North Carolina Health Care Personnel Registry according to G.S. 131E-256; This Rule is not met as evidenced by: Based on interviews and record reviews, the facility failed to obtain Health Care Personnel Registry (HCPR) checks for 3 of 4 sampled staff (Staff A, B, and D), prior to working in the facility. The findings are: 1. Review of Staff A's personnel record revealed: -Staff A was employed as a personal care aide (PCA) on 12/31/24. -There was no documentation a HCPR check was completed upon hire. -There was documentation a HCPR check was completed on 9/18/25, with no substantiated findings.	C 145		

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C 145	Continued From page 1 Refer to interview with the Administrator on 09/18/25 at 11:00am. 2. Review of Staff B's personnel record revealed: -Staff B was employed as a PCA on 03/28/25. -There was no documentation a HCPR check was completed upon hire. -There was documentation a HCPR check was completed on 9/18/25, with no substantiated findings. Refer to interview with the Administrator on 09/18/25 at 11:00am. 3. Review of Staff D's personnel record revealed: -Staff D was employed as a PCA, with no hire date recorded. -There was no documentation a HCPR check was completed upon hire. -There was documentation a HCPR check was completed on 09/18/25, with no substantiated findings. Refer to interview with the Administrator on 09/18/25 at 11:00am. Interview with the Administrator on 09/18/25 at 11:00am revealed: -She was responsible for ensuring the HCPR checks were completed upon hire for all staff. -She completed all the staff's HCPR checks when they were hired but did not know why they were not in the personal records.	C 145		
C 213	10A NCAC 13G .0704 (a)(1) Resident Contract, Information on Facility 10A NCAC 13G .0704 Resident Contract, Information on Facility, and Resident Register	C 213		

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C 213	Continued From page 2 (a) The administrator or supervisor-in-charge shall furnish and review with the resident or the resident's authorized representative as defined in Rule .1103 of this Subchapter information on the facility upon admission and when changes are made to that information. The facility shall involve the resident in the review of the resident contract and information on the facility unless the resident is cognitively unable to participate in the discussion. A statement indicating that this information has been received upon admission or amendment as required by this Rule shall be signed and dated by each person to whom it is given. This statement shall be retained in the resident's record in the facility. The information shall consist of the following: (1) the resident contract to which the following applies: (A) the contract shall specify charges for resident services and accommodations, including the cost of different levels of service, description of levels of care and services, and any other charges or fees; (B) the contract shall disclose any health needs or conditions that the facility has determined it cannot meet; (C) the contract shall be signed and dated by the administrator or supervisor-in-charge and the resident or the resident's authorized representative and a copy given to the resident or the resident's authorized representative and a copy kept in the resident's record; (D) the resident or the resident's authorized representative shall be given a written 30-day notice prior to any change in charges for resident services and accommodations, including the cost of different levels of service, description of level of care and services, and any other charges or fees, and be provided an amended	C 213		

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copy of the contract for review and confirmation of receipt;

(E) gratuities in addition to the established rates shall not be accepted; and

(F) The maximum monthly rate that may be charged to Special Assistance recipients as established by the North Carolina General Assembly;

This Rule is not met as evidenced by:
TYPE A1 VIOLATION

Based on interviews and record reviews, the facility failed to ensure the Administrator or Supervision-In-Charge furnished and reviewed resident contracts with the guardians of 4 of 5 sampled residents (#2, #3, #4, and #5) in regards to the cost for resident care and services, accommodations, including the cost of different levels of services, description of levels of care and services, and any other charges or fees.

The findings are:

1. Review of Resident #3's current FL2 dated 06/25/25 revealed:
-Diagnoses included neurocognitive disorder and vascular dementia.
-Resident #3 was intermittently disoriented.

Review of Resident #3's Resident Register revealed an admission date of 09/20/10.

Review of Resident #3's record revealed:

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-There was no resident contact.
-There was a change of change of ownership facility letter addressed to Resident #3's financial guardian and was signed and dated by the owner on 02/29/24.
-The letter included an evaluation to address Resident #3's current needs and adjustment to her monthly rate of $6304.20 with $1780.00 being paid privately; the facility raised Resident #3's monthly rent by 12% for an additional cost of $756.50 and informed the resident her new monthly rate would be $7060.70.
-There was an invoice dated 02/17/25 showing Resident #3's rent was $5700.00 and was paid on 02/24/25; there were past due companion service charges of $1509.00 for January 2025 and $1117.00 for February 2025.
-There was an invoice dated 03/12/25 showing Resident #3's rent of $5700.00 as paid without a date documented; there were past due companion service charges of $1509.00 for January 2025, $117.00 for February 2025, and $744 for March 2025.
-There was an invoice dated 05/13/25 showing Resident #3's rent was $5700.00, and was paid on 05/21/25; there were past due companion service charges of $1509.00 for January 2025, $117.00 for February 2025 and $744.00 for March 2025.

Review of Resident #3's facility outings companion services log dated 12/31/24 through 01/14/25 revealed:
-The companion services charge was $59.00/hour.
-On 12/31/24, there was a four-hour charge of $236 for a shopping store outing.
-On 01/02/25, there was a three-hour charge of $177.00 for a senior center outing.
-On 01/07/25, there was a three-hour charge of

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$177.00 for a senior center outing.
-On 01/09/25, there was a three-hour charge of $177.00 for a shopping store outing.
-On 01/14/25, there was a two-hour charge of $118.00 for a shopping outing.

Review of Resident #3's facility in-house companion services log dated 01/01/25 through 01/11/25 revealed:
-The in-house companion services charge was $39.00/hour.
-On 01/01/25, there was a three-hour charge of $117.00 for Little House on the Prairie discussion.
-On 01/03/25, there was a two-hour charge of $177.00 for dining and life talks.
-On 01/05/25, there was a four-hour charge of $156.00 for reorganizing room and dinner special.
-On 01/08/25, there was a four-hour charge of $177.00 for bingo and games.
-On 01/11/25, there was a three-hour charge of $117.00 for goat visit experience.

Review of Resident #3's facility outings companion services log dated 01/16/25 through 02/14/25 revealed:
-The outings companion services charge was $59.00/hour.
-On 01/16/25, there was a three-hour charge of $177.00 for senior center birthday party outing.
-On 01/21/25, there was a two-hour charge of $118.00 for a dinner outing.
-On 01/23/25, there was a two-hour charge of $118.00 for senior center outing.
-On 01/28/25, there was a two-hour charge of $118.00 for tobacco and vape store outing.
-On 02/14/25, there was a two-hour charge of $118.00 for a Valentine's community bingo outing.

Review of Resident #3's facility in-house companion services log dated 01/17/25 through

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C 213	Continued From page 6 02/13/25 revealed: -The in-house companion services charge was $39.00/hour. -On 01/17/25, there was a two-hour charge of $78.00 for tea party with the activity director. -On 01/20/25, there was a two-hour charge of $78.00 for read aloud and bingo. -On 02/07/25, there was a four-hour charge of $156.00 for conversation, encourage and makeup. -On 02/13/25, there was a four-hour charge of $156.00 for nature walk and picnic. Review of Resident #3's facility outings companion services log 02/18/25 through 03/12/25 revealed: -The outings companion charge was $59.00/hour. -On 02/17/25, there was a two-hour charge of $118.00 for "the rose." -On 03/03/25, there was a two-hour charge of $118.00 for therapy and encouragement outing. -On 03/12/25 there was a two-hour charge of $118.00 for "the rose." Review of Resident #3's facility in-house companion services log dated 02/17/25 through 03/11/25 revealed: -There was documentation of an in-house companion services charge was $39.00 per hour. -On 02/17/25, there was a two-hour tea party with a charge of $78.00. -On 02/28/25, there was a two-hour charge of $78.00 for encouragement and movie talks. -On 03/06/25, there was a two-hour charge of $78.00 for future talks and playing games. -On 03/10/25, there was a two-hour charge of $78.00 for encouragement talks and reminiscing. -On 0311/25, there was a two-hour charge of $78.00 for makeup and dress up.	C 213		

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C 213	Continued From page 7 Telephone interview with Resident #3's attorney appointed Guardian of Estate (GOE) on 09/19/25 at 12:40pm revealed: -He never signed a contract for Resident #3. -The facility sent him invoices for Resident #3's companion service charges, but he never agreed to companion services. -Resident #3 had been paying an unknown amount for a private room however several months ago when he had visited the resident, she had been moved to a semi-private room without his consent or knowledge. -Resident #3 had been billed the private room rate although she had been moved to a semi-private room for four months. Interview with Resident #3's guardian of person on 09/22/25 at 12:47pm revealed: -She became Resident #3's guardian of person on 07/09/25. -She was asked to sign Resident #3's financial contract on 09/19/25. -She could not sign a financial contract for Resident #3 because she was not the resident's financial guardian. -She had never been asked or contacted by the facility to sign a contract for Resident #3 prior to 09/19/25. -The facility did not notify her when they moved Resident #3 into a semi-private room. Interview with the Administrator on 09/18/25 at 11:00am revealed: -She knew Resident #3 did not have a signed resident contract. -New contracts were not initiated when the change of ownership occurred in 2023 and said, "I guess I should have". -The previous owners were responsible for completing resident contracts.	C 213		

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C 213	Continued From page 8 -She knew the owner of the facility had tried to get Resident #3's resident contract signed. Interview with the Owner of the facility on 09/18/25 at 2:20pm revealed: -He took over ownership of the facility in 2023 and was aware that Resident #3 did not have a signed resident contract. -He asked Resident #3's GOE and guardian of person to sign her contract numerous times, but they would not. -He had documentation of emails sent to both guardians. -Resident #3 was paying an additional cost for a private room but he did not know how much the facility was charging for the private room rate. -The facility moved Resident #3 into a semi-private room for about four months and did not notify her guardian. Requests were made on 09/18/25 at 2:20pm and on 09/19/25 at 11:29pm for copies of emails sent to Resident #3's GOE and guardian of person were not provided prior to exit. Based on interviews, documentation and record reviews it was determined Resident #3 was not interviewable. Refer to interview with the Administrator on 09/18/25 at 11:00am. 2. Review of Resident #2's current FL2 dated 06/1/25 revealed: -Diagnoses included vascular dementia, intracranial hemorrhage, chronic focal neurological deficit, seizures, and chronic kidney disease. -Resident #2 was intermittently disoriented.	C 213		

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Review or Resident #2's Resident Register revealed an admission date of 01/05/25.

Review of Resident #2's record revealed there was no resident contract.

Telephone interview with Resident #2's guardian on 09/18/25 at 3:45pm revealed:
-She never signed a facility contract upon Resident #2's admission.
-Resident #2 was admitted to the facility under a contract with a hospital who was responsible for his cost of care.

Based on interviews, documentation and record reviews it was determined Resident #2 was not interviewable.

Interview with the Administrator on 09/18/25 at 11:00am revealed she had not completed Resident #2's contract upon his admission..

Interview with the Owner of the facility on 09/18/25 at 2:20pm revealed he knew Resident #2 did not have a completed resident contract.

Refer to the telephone interview with the Owner of the facility on 09/19/25 at 11:29am.

3. Review of Resident #4's current FL2 dated 03/26/25 revealed:
-Diagnoses included Down's syndrome and Alzheimer's disease.
-Resident #4 was intermittently disoriented.

Review of Resident #4's Resident Register revealed an admission date of 04/20/12.

Review of Resident #4's record revealed:
-Resident #4 had an appointed guardian.

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C 213	Continued From page 10 -There was documentation of an activity outings waiver signed by Resident #4's guardian on 10/15/24. -There was no documentation of any other signed facility contracts. Telephone interview with Resident #4's guardian on 09/22/25 at 1:13pm revealed: -She was asked to sign Resident $4's facility contract on 09/19/25. -She had never been asked or contacted by the facility to sign a contract for Resident #4 prior to 09/19/25. Based on interviews, observations and record reviews it was determined Resident #4 was not interviewable. Interview with the Administrator on 09/18/25 at 11:00am revealed: -She had not completed the resident #4's contract. -She thought new contracts should have been initiated when the change of ownership occurred in 2023. -The previous owners were responsible for completing resident contracts. Interview with the Owner of the facility on 09/18/25 at 2:20pm revealed he knew Resident #4 did not have a completed resident contract. Refer to the telephone interview with the owner of the facility on 09/19/25 at 11:29am. 4. Review of Resident #5's current FL2 dated 06/01/25 revealed: -Diagnoses included Schizophrenia and irritable bowel syndrome. -Resident #5 was intermittently disoriented.	C 213		

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C 213	Continued From page 11 Review or Resident #5's Resident Register revealed an admission date of 08/02/23. Review or Resident #5's record revealed: -Resident #5 had an appointed guardian. -There was no documentation of any completed or signed facility contracts. Interview with Resident #5 on 09/17/25 at 4:25pm revealed she had never been asked to sign a resident contract. Interview with Resident #5's guardian on 03/22/25 at 12:55 pm revealed: -She was asked to sign Resident #5's facility contract on 09/19/25. -She had never been asked or contacted by the facility to sign a contract for Resident #4 prior to 09/19/25. Interview with the Administrator on 09/18/25 at 11:00am revealed: -She had not completed Resident #5's contract. -She thought new contracts should have been initiated when the change of ownership occurred in 2023 Interview with the Owner of the facility on 09/18/25 at 2:20pm revealed he knew Resident #5 did not have a completed resident contract. Refer to a telephone interview with the Owner of the facility on 09/19/25 at 11:29am. _____ Telephone interview with the Owner of the facility on 09/19/25 at 11:29am revealed: -He knew the residents did not have signed contracts. -New contracts were not initiated when the	C 213		

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C 213	Continued From page 12 change of ownership occurred in 2023. -The facility had recently reached out to the residents' guardians to sign contracts, but the guardians had refused. -He had email correspondence that documented the facility requested residents' guardians to sign facility contracts. Requests were made on 09/18/25 at 2:20pm and on 09/19/25 at 11:29pm for copies of emails sent to the residents' guardian of person but were not provided prior to exit. _____ The facility failed to ensure the residents had signed and completed contracts regarding the cost for resident care, services, and accommodations which resulted in Resident #3 paying for the cost of a private room after the resident was moved into a semi-private room for four months, and the facility charging for companion services that were not authorized by the resident's legal payee. This failure resulted in serious neglect and exploitation of the resident's funds and constitutes a Type A1 Violation. _____ The facility provided a plan of protection in accordance with G.S. 131D-34 on 09/19/25 for this violation. THE CORRECTION DATE FOR THIS TYPE A1 VIOLATION SHALL NOT EXCEED OCTOBER 22, 2025.	C 213		
C 311	10A NCAC 13G .0909 Residents' Rights 10A NCAC 13G .0909 Resident Rights A family care home shall assure that the rights of all residents guaranteed under G.S. 131D-21, Declaration of Residents' Rights, are maintained	C 311		

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C 311	Continued From page 13 and may be exercised without hindrance. This Rule is not met as evidenced by: TYPE A1 VIOLATION Based on interviews and record reviews, the facility failed to ensure residents were free from exploitation related to 1 of 5 sampled residents (#3) who received Medicare supplemental benefits and personal trust fund benefits on debit cards that were used by facility staff to make unauthorized purchases without the resident's Guardian of Estate (GOE) knowledge or authorization. The findings are: Review of Resident #3's current FL2 dated 06/25/25 revealed: -Diagnoses included neurocognitive disorder and vascular dementia. -Resident #3 was intermittently disoriented. Review of Resident #3's Resident Register revealed an admission date of 09/20/10. Telephone interview with Resident #3's attorney appointed GOE on 09/17/25 at 12:40pm revealed: -He was appointed Resident #3's guardian of the estate in 2014. -Resident #3 received a total of $260.00 per month on a personal debit card that was to be used for outings, cigarettes, snacks and clothing. -Resident #3 also received a total of $225.00 of Medicare supplemental benefits per month on a debit card. -The Administrator petitioned the court on 07/09/25 to become Resident #3's guardian which was denied due to conflict of interest.	C 311		

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C 311	Continued From page 14 -He had never signed a facility contract for Resident #3. Telephone interview with the Administrative Assistant at Resident #3's GOE's office on 09/19/25 at 2:36pm revealed: -She received a phone call from Resident #3 on 08/26/25 requesting money to be added onto her debit card. -Resident #3 was told she could not have any additional money besides her allowance she already received. -Resident #3 would not tell the guardian why she needed more money added to her debit card. -When the guardian reviewed Resident #3's debit card transactions, the guardian noticed transactions via a phone application (app) where money had been transferred to a former facility employee and the Administrator. -Resident #3 did not have access to a phone application so the Administrative Assistant cancelled the resident's debit card on 09/04/25 and the resident was moved to another facility on 09/11/25. Telephone interview with a Local Law Enforcement Officer (LEO) on 09/17/25 at 11:00am revealed: -She and another LEO visited the facility on 09/04/25 to investigate possible exploitation of Resident #3's trust account. -The LEO viewed videos of staff using Resident #3's debit cards to make purchases at local retail stores and gas stations. -She viewed a video of the Administrator using Resident #3's debit card to purchase gas for her personal vehicle. -She viewed a video of a co-owner of the facility using Resident #3's debit card, along with several other debits cards that were stored in a plastic	C 311		

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bag at a local retail store.
-There was at least $10,000 of Resident #3's funds that were unaccounted for.

Review of the facility purchase receipts from a local retail store dated 06/04/25 revealed:
-There was a receipt from a local retail store with multiple items purchased together for a total of $392.41.
-Resident #3's Medicare supplemental benefit card was used for the fourth card used in the transaction with a charge of $32.84.
-There was no documentation the facility had provided Resident #3's authorized representative with a copy of the receipt or documentation of Resident #3's authorized representative's signature.

Review of the facility purchase receipt from a local retail store dated 08/08/25 revealed:
-There were multiple items purchased together for a total of $803.92.
-Random purchases were highlighted by the facility to account for the purchases made on Resident #3's Medicare supplemental benefit card.
-These purchases were not in any type of order and had multiple items listed in-between what the facility stated Resident #3's benefit card purchased.
-Resident #3's Medicare supplemental benefit card was used for the first transaction with a charge of $406.75.
-There was no documentation the facility had provided Resident #3's authorized representative with a copy of the receipt or documentation of Resident #3's authorized representative's signature.

Review of Resident #3's Medicare supplemental

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C 311	Continued From page 16 benefits debit card statements dated 06/01/25 to 09/01/25 revealed: -On 06/01/25, a deposit of $225.00. -On 06/01/25, a charge of $192.71 from a local retail store. -On 06/04/25, a charge of $32.84 from a local retail store. -On 07/01/25, a deposit of $225.00. -On 07/01/25, a charge of $192.54 from a local retail store. -On 07/04/25, a charge of $43.25 from a local grocery store. -On 08/01/25, a deposit of $225.00. -On 08/08/25, a charge of $406.75 from a local retail store. -On 09/01/25, a deposit of $225.00. Review of the facility's purchase receipts from a local tobacco and vape store dated 06/16/25 revealed: -The receipt had the name of Resident #3 with "cigs" documented. -An unknown debit card was charged $32.09. -There was no documentation the facility had provided Resident #3's authorized representative with a copy of the receipt or documentation of Resident #3's authorized representative's signature. Review of the facility's purchase receipts from a local retail store dated 07/15/25 revealed: -There was a receipt for a local retail with multiple items purchased together for a total of $72.41. -There was documentation of Resident #3's debit card being charged $16.77. -There was no documentation the facility had provided Resident #3's authorized representative with a copy of the receipt or documentation of Resident #3's authorized representative's signature.	C 311		

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C 311	Continued From page 17 Review of Resident #3's debit card statements dated 06/02/25 to 09/03/25 revealed: -On 06/02/25, a charge of $81.52 from a local retail store. -On 06/09/25, a phone application withdrawal to a former facility employee of $50.00. -On 06/10/25, a charge of $19.22 from a local restaurant. -On 06/12/25, a charge of $8.54 from a local gas station. -On 06/16/25, a charge of $7.32 from a local grocery store. -On 06/28/25, a deposit of $260.00. -On 07/07/25, a charge of $47.01 from an online retail store. -On 07/08/25, a purchase of $21.14 from a local retail store. -On 07/14/25, a phone application withdrawal to a former facility employee of $50.00. -On 07/14/25, a charge of $23.73 from a local retail store. -On 07/16/25, a charge of $16.77 from a local retail store. -On 07/21/25, a deposit of $30.00. -On 07/31/25, a deposit of $260.00. -On 08/01/25, a charge of $19.70 from a local gas station. -On 08/02/25, a charge of $53.49 from a local tobacco and vape store. -On 08/02/25, a charge of $79.70 from a local gas station. -On 08/03/25, a charge of $25.00 from a local gas station. -On 08/04/25, a charge of $53.49 from a local tobacco and vape store. -On 08/04/25, a charge of $79.70 from a local gas station. -On 08/08/25, a charge of $43.51 from a retail store.	C 311		

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C 311	Continued From page 18 -On 08/11/25, a charge of $9.91 from a local gas station. -On 08/11/25, a charge of $16.07 from a local fast-food restaurant. -On 08/14/25, a charge of $13.96 from a local gas station. -On 08/15/25, a charge of $58.96 from a local retail store. -On 08/17/25, a charge of $1.32 and $50.00 phone application withdrawal to a former employee. -On 08/29/25, a deposit of $260.00. -On 08/31/25, a charge of $23.36 from a local gas station. -On 08/31/25, a charge of $5.66 from a local gas station. -On 09/02/25, a charge of $37.77 from a local gas station. -On 09/03/25, a charge of $4.75 from a local gas station. -On 09/03/25, a charge of $53.49 from a local shoe store. Interview with the Activity Director on 09/19/25 at 11:56am and on 09/22/25 at 3:00pm. -She was responsible for maintaining resident fund accounts. -The facility did not have a financial/resident contract signed and completed by Resident #3's guardian. -She did not provide an accounting of Resident #3's facility fund log to Resident #3's guardian. -She did not provide receipts to Resident #3's guardian or an accounting of money spent. -The facility did not buy Resident #3's items separately using the residents debit card. Interview with the Administrator on 09/18/25 at 4:40pm revealed: -The Activity Director was responsible for resident	C 311		

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C 311	Continued From page 19	C 311		

funds.
-She and the Activity Director have used Resident #3's debit cards to make purchases for the resident.
-The facility kept both of Resident #3's debit cards in the facility office since January 2025.
-She sometimes gave Resident #3 receipts but never saved any receipts.
-She only bought items for Resident #3 such as clothes, cigarettes, snacks and shoes.
-When asked if Resident #3's debit cards were ever used to purchase items for the facility she said, "not to my knowledge."
-She never used Resident #3's debit cards to purchase anything for herself, the facility or any other residents.
-She never used Resident #3's debit cards to purchase gas.
-She never kept any record of purchases she made for Resident #3.

Telephone interview with the Owner of the facility on 09/19/25 at 3:11pm revealed:
-The Activity Director was responsible for resident funds and billing.
-The facility had one account designated for the residents receiving Medicaid assistance.
- New contracts were not initiated when the change of ownership occurred in 2023.
-He knew facility employees had used Resident #3's debits cards to make purchases.
-The Activity Director, Administrator and a co-owner had used Resident #3's debit cards to make purchases.
-Resident #3 kept her own receipts.
-The facility did not make separate purchases using Resident #3's debit cards.
-All purchases were made in one transaction.
-He could not explain how Resident #3 was separately charged for random purchases when

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C 311	Continued From page 20 the facility also used several other debit cards to pay for one purchase. -Resident #3's debit cards were not used to purchase items for the facility or staff. -Sometimes Resident #3 wanted to buy items for other residents. -"Staff would be fired immediately if they used a resident's debit card" to make purchases for themselves. Attempted telephone interview with a co-owner of the facility on 09/19/25 at 2:29pm was unsuccessful. [Refer to Tag 0245, 10A NCAC 13G .0406(a)(5) Other Staff Qualifications (Type A1 Violation)]. [Refer to Tag 0213, 10A NCAC 13G .0704(a)(1) Resident Contract, Information on Facility (Type A1 Violation)]. [Refer to Tag 0399, 10A NCAC 13G .1103 Accounting for Resident's Personal Funds (Type B Violation)]. _____ The facility failed to ensure Resident #3 was free from exploitation when the facility used the resident's debit and Medicare benefit cards to purchase items without authorization by the resident's legal guardian and not keeping accurate records of purchases made. This failure resulted in exploitation of the resident and constitutes a Type A1 Violation. _____ The facility provided a plan of protection in accordance with G.S. 131D-34 on September 22, 2025, for this violation. THE CORRECTION DATE FOR THE TYPE A1 VIOLATION SHALL NOT EXCEED OCTOBER	C 311		

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C 311	Continued From page 21 22, 2025.	C 311		
C 399	10A NCAC 13G .1103 (c) Accounting For Resident's Personal Funds 10A NCAC 13G .1103 Accounting For Resident's Personal Funds (c) The facility shall provide each resident or the resident's authorized representative a written monthly accounting of the resident's funds handled by the administrator or the administrator's designee. The facility shall maintain at the facility a record signed by the resident or their authorized representative indicating whether the resident or their authorized representative agrees that the monthly accounting is accurate. The records shall be maintained by the facility for at least one year. This Rule is not met as evidenced by: TYPE B VIOLATION Based on interview and record review, the facility failed to ensure there was a record of each transaction involving the use of 3 of 3 sampled residents (#3, #4 and #5) personal funds signed by the residents or their authorized representative at least monthly verifying the accuracy of the disbursement of personal funds and that the record was maintained in the home. The Finding are: 1. Review of Resident #3's current FL2 dated 06/25/25 revealed: -Diagnoses included neurocognitive disorder and vascular dementia.	C 399		

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C 399	Continued From page 22 -Resident #3 was intermittently disoriented. Review of Resident #3's Resident Register revealed an admission date of 09/20/10. Telephone interview with Resident #3's attorney appointed Guardian of Estate (GOE) on 09/19/25 at 12:40pm revealed: -Resident #3's GOE was appointed in 2014. -Resident #3's GOE was never asked to sign resident's disbursement of personal funds records. -Resident #3's GOE had not received a record of personal funds or transactions from the facility. Review of Resident #3 June 2025 facility fund account spreadsheet revealed: -On 06/01/25, there was a deposit of $90.00 with a balance of $127.44 remaining. -On 06/05/25, there was a pharmacy charge documented for $115.38 with a balance of $12.06 remaining. -There was no documentation the facility had provided Resident #3's authorized representative with a copy of the resident's account information. -There was no documentation of Resident #3's authorized representative's signature. Review of Resident #3's July 2025 facility fund account spreadsheet revealed: -On 07/01/25, there was a deposit of $90.00 with a balance of $102.06 remaining. -On 07/03/25, there was a pharmacy charge documented for $49.00 with a balance of $53.06 remaining. -On 07/10/25, there was a charge for "smokes" documented for $32.09 with a balance of $20.97 remaining. -On 07/15/25, there was a department store expense documented for $55.64 with a balance	C 399		

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C 399	Continued From page 23 of -$34.67. -On 07/30/25, there was a charge for a "nail trim" documented for $20.00 with a balance of -$54.67. -On 07/31/25, there was a documented Medicaid deposit of $131.79 with a balance of $131.79. -There was no documentation the facility had provided Resident #3's authorized representative with a copy of the resident's account information. -There was no documentation of Resident #3's authorized representative's signature. Review of Resident #3's August 2025 facility fund account spreadsheet revealed: -On 8/1/25, there was a deposit of $90.00 with a balance of $42.79 remaining. -On 08/06/25, there was a pharmacy charge documented for $9.34 with a balance of $51.13 remaining. -There was no documentation the facility had provided Resident #3's authorized representative with a copy of the resident's account information. -There was no documentation of Resident #3's authorized representative's signature. Review of Resident #3's September 2025 facility fund account spreadsheet revealed: -On 09/01/25, there was a deposit of $90.00 with a balance of $38.75 remaining. -On 09/08/25, there was a pharmacy charge documented for $14.06 with a balance of $24.81 remaining. -There was no documentation the facility had provided Resident #3's authorized representative with a copy of the resident's account information. -There was no documentation of Resident #3's authorized representative's signature. Review of receipts provided by the facility for Resident #3 revealed: -On 06/04/25, there was a receipt for a local retail	C 399		

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store with multiple purchases made together for a total of $392.41.
-Resident #3's Medicare benefit card was used for the fourth transaction with a charge of $32.84. There was no documentation the facility had provided Resident #3's authorized representative with a copy of the receipt or documentation of Resident #3's authorized representative's signature.

Refer to interview with the Activity Director on 09/19/25 at 11:56am and on 09/22/25 at 3:00pm.

Refer to interview with the Administrator on 09/18/25 at 4:40pm.

Refer to interview and telephone interview with the Owner of the facility on 09/18/25 at 2:20pm, on 09/19/25 at 11:29am.

3. Review of Resident #4's current FL2 dated 03/26/25 revealed:
-Diagnoses included Down's syndrome and Alzheimer's disease.
-Resident #4 was intermittently disoriented.

Review of Resident #4's Resident Register revealed an admission date of 04/20/12.

Review of Resident #4's record revealed:
-Resident #4 had an appointed guardian.
-There was an activity outings waiver signed by Resident #4's guardian on 10/15/24.
-There was no documentation of any other signed facility contracts.

Review of Resident #4's June 2025 facility fund account spreadsheet revealed:
-On 06/01/25, there was a deposit of $335.59 with a balance of $335.59 remaining.

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C 399	Continued From page 25 -On 06/01/25, there was a deposit of $90.00 with a balance of $425.59 remaining. -On 06/05/25, there was a pharmacy charge documented for $21.55 with a balance of $404.04 remaining. -There was no documentation the facility provided Resident #4's authorized representative with a copy of the resident's account information. -There was no documentation of Resident #4's authorized representative's signature. Review of Resident #4's July 2025 facility fund account spreadsheet revealed: -On 07/01/25, there was a deposit of $90.00 with a balance of $494.04 remaining. -On 07/03/25, there was a pharmacy charge documented for $9.38 with a balance of $484.66 remaining. -On 07/30/25, there was a charge for a manicure of $38.00 with a balance of $445.66 remaining. -There was no documentation the facility provided Resident #4's authorized representative with a copy of the resident's account information. -There was no documentation of Resident #4's authorized representative's signature. Review of Resident #4's August 2025 facility fund account spreadsheet revealed: -On 8/1/25, there was a deposit of $90.00 with a balance of $536.66 remaining. -On 08/06/25, there was a pharmacy charge documented for $25.88 with a balance of $510.78 remaining. -On 08/27/25, there was a charge for gel nails of $43.00 with a balance of $467.78 remaining. -There was no documentation the facility had provided Resident #4's authorized representative with a copy of the resident's account information. -There was no documentation of Resident #4's authorized representative's signature.	C 399		

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(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 399	Continued From page 26 Review of Resident #4's September 2025 facility fund account spreadsheet revealed: -On 09/01/25, there was a deposit of $90.00 with a balance of $437.69 remaining. -On 09/08/25, there was a pharmacy charge documented for $10.19 with a balance of $427.50 remaining. -There was no documentation the facility had provided Resident #4's authorized representative with a copy of the resident's account information. -There was no documentation of Resident #4's authorized representative's signature. Refer to interview with the Activity Director on 09/19/25 at 11:56am and on 09/22/25 at 3:00pm. Refer to interview with the Administrator on 09/18/25 at 4:40pm. Refer to interview and telephone interview with the Owner of the facility on 09/18/25 at 2:20pm, on 09/19/25 at 11:29am. Based on interviews, observations and record reviews, it was determined that Resident #4 was not interviewable. 4. Review of Resident #5's current FL2 dated 06/01/25 revealed: -Diagnoses included Schizophrenia and irritable bowel syndrome. -Resident #5 was intermittently disoriented. Review or Resident #5's Resident Register revealed an admission date of 08/02/23. Review of Resident #5's record revealed the resident had an appointed guardian.	C 399		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	FCL018040	A. BUILDING: _____ B. WING _____	C 09/22/2025

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C 399	Continued From page 27 Interview with Resident #5 on 09/17/25 at 4:25pm revealed she was never asked to sign anything or was given any receipts when she got her nails done. Review of Resident #5's June 2025 facility fund account spreadsheet revealed: -On 06/01/25, there was a documented Medicaid deposit of $90.00 with a balance of $250.28 remaining. -On 06/05/25, there was a pharmacy charge documented for $26.35 with a balance of $223.93 remaining. -There was no documentation the facility had provided Resident #5's authorized representative with a copy of the resident's account information. -There was no documentation of Resident #5's authorized representative's signature. Review of Resident #5's July 2025 facility fund account spreadsheet revealed: -On 07/01/25, there was a documented Medicaid deposit of $90.00 with a balance of $313.93 remaining. -On 07/03/25, there was a pharmacy charge documented for $13.20 with a balance of $300.73 remaining. -There was no documentation the facility had provided Resident #5's authorized representative with a copy of the resident's account information. -There was no documentation of Resident #5's authorized representative's signature. Review of Resident #5's August 2025 facility fund account spreadsheet revealed: -On 8/1/25, there was a documented Medicaid deposit of $90.00 with a balance of $390.73 remaining. -On 08/06/25, there was a pharmacy charge documented for $19.98 with a balance of $373.75	C 399		

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	FCL018040	A. BUILDING: _____ B. WING _____	C 09/22/2025

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C 399	Continued From page 28	C 399		

remaining.
-On 08/27/25, there was a charge for a nail trim of $23.00 with a balance of $350.75 remaining.
-There was no documentation the facility had provided Resident #3's authorized representative with a copy of the resident's account information.
-There was no documentation of Resident #5's authorized representative's signature.

Review of Resident #5's September 2025 facility fund account spreadsheet revealed:
-On 09/01/25, there was a documented Medicaid deposit of $90.00 with a balance of $300.75 remaining.
-On 09/08/25, there was a pharmacy charge documented for $16.44 with a balance of $284.31 remaining.
-There was no documentation the facility provided Resident #5's authorized representative with a copy of the resident's account information.
-There was no documentation of Resident #5's authorized representative's signature.

Refer to interview with the Activity Director on 09/19/25 at 11:56am and on 09/22/25 at 3:00pm.

Refer to interview with the Administrator on 09/18/25 at 4:40pm.

Refer to interview and telephone interview with the Owner of the facility on 09/18/25 at 2:20pm, on 09/19/25 at 11:29am.

_____

Interview with the Activity Director on 09/19/25 at 11:56am and on 09/22/25 at 3:00pm revealed:
-She was responsible for maintaining resident fund accounts.
-The facility had one account designated for the residents receiving special assistance.
-The facility did not have a financial/resident

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
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C 399	Continued From page 29 contract signed and completed for all the residents. -She did not provide an accounting of the residents' funds accounts to the residents or their authorized representatives. -She did not provide receipts to the residents or their guardians, or an accounting of funds spent. -She did not request personal funds be signed by the residents or their authorized representative at least monthly verifying the accuracy. Interview with the Administrator on 09/18/25 at 4:40pm revealed: -The Activity Director was responsible for resident funds. - "Every once in a while, I gave resident's their receipts" but did not keep any documentation. Interview and telephone interview with the Owner of the facility on 09/18/25 at 2:20pm, on 09/19/25 at 11:29am revealed: -The Activity Director was responsible for maintaining resident personal funds. -The facility had one account designated for the residents receiving special assistance. -Receipts were given to the residents and not to their representatives. _____ The facility failed to ensure accurate records were kept for residents' personal funds, signed by the resident or their authorized representative at least monthly verifying the accuracy of the disbursement of personal funds and maintained in the home. This failure was detrimental to the welfare of the residents and constitutes a Type B Violation. _____ The facility provided a plan of protection in accordance with G.S. 131D-34 on September 22, 2025, for this violation.	C 399		

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C 399	Continued From page 30 THE CORRECTION DATE FOR THE TYPE B VIOLATION SHALL NOT EXCEED NOVEMBER 6, 2025.	C 399		