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D 000	Initial Comments The Adult Care Licensure Section and the Polk County Department of Social Services conducted an annual and follow-up survey and complaint investigation on 01/21/26-01/23/26. The complaint investigation was initiated by Rutherford County Department of Social Services on 01/15/26.	D 000		
D 273	10A NCAC 13F .0902(b) Health Care 10A NCAC 13F .0902 Health Care (b) The facility shall assure referral and follow-up to meet the routine and acute health care needs of residents. This Rule is not met as evidenced by: TYPE B VIOLATION Based on interviews and record reviews, the facility failed to ensure healthcare referral and follow-up for 1 of 5 sampled residents (Resident #2) related to an injury to the right hand. The findings are: Review of Resident #2's current FL2 dated 12/31/25 revealed diagnoses included cerebral vascular accident, hemiparesis (a neurological condition characterized by weakness, reduced strength, or impaired movement on one side of the body), congestive heart failure, chronic obstructive pulmonary disease, diabetes mellitus type 2, and hypertension. Review of Resident #2's care plan dated 01/22/26 revealed: -Resident #2 required limited assistance with toileting, bathing, dressing, and grooming.	D 273		

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D 273	Continued From page 1 -Resident #2 required supervision with ambulation and eating. Interview with Resident #2 on 01/21/26 at 9:45am revealed two months ago she broke her hand trying to get her pants down to go to the bathroom. Interview with Resident #2 on 01/22/26 at 12:50pm revealed: -On Saturday morning (11/22/25), she was trying to get her pants down to go to the bathroom. -Her pinky finger of her right hand got hung up in the pants which caused hyperextension (the forceful extension of a limb or joint beyond its normal limits as to cause injury) of the pinky finger. -Her hand became very painful after the incident. -She told the medication aide (MA) on duty what had happened to her hand and that her hand was very painful. -The MA administered acetaminophen (used to treat mild to moderate pain) to Resident #2 for the pain. -The acetaminophen did not help the pain in her hand. -Her right hand was visibly swollen in the afternoon on 11/22/25. -She told the MA on duty "all day" on (11/22/25) her hand was "killing me." -A family member came to visit her on the morning of 11/23/25. -The family member noticed the right hand was swollen. -The family member asked the facility staff to call an ambulance to take her to the hospital for evaluation of the right hand. Review of Resident #2's local emergency department (ED) discharge summary dated	D 273		

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D 273	Continued From page 2 11/23/25 revealed: -Resident #2 presented to the ED for evaluation of right wrist pain. -The right hand was bruised and painful to the touch and there was discomfort with range of motion. -The x-rays showed a fracture of the 5th metacarpal (the long bone in the hand located on the pinky finger side of the hand which forms the framework of the palm and connecting the wrist to the little finger) with minimal displacement. -The diagnosis was right hand fracture. -Discharge instructions included wearing a splint for 2-3 weeks, ice 20 minutes 4-5 times a day for pain control and swelling, and use acetaminophen for discomfort. Telephone interview with a MA on 01/22/26 at 3:01pm revealed: -She routinely worked day shift on the weekends as a MA. -She was the MA on duty when Resident #2 injured her right hand. -Resident #2 told her when she pulled up her pants and "something snapped" in her right hand. -Resident #2 complained of pain in the right hand. -Resident #2 asked her for pain medication. -She administered acetaminophen to Resident #2 for the pain in the hand. -Resident #2's right hand had not been swollen when she looked at it on 11/22/25. -She did not remember if she had contacted Resident #2's PCP about Resident #2's complaints of pain in the hand. -Resident #2's right hand had been a "little" swollen when she looked at it on the morning of 11/23/25. -Resident #2 went to the hospital on 11/23/25 for evaluation.	D 273		

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Review of Resident #2's charting notes for 11/21/25 to 11/28/25 revealed there was no note concerning PCP contact on 11/22/25 for pain and swelling of the right hand.

Telephone interview with Resident #2's PCP on 01/23/26 at 8:21am revealed:
-The facility staff did not contact her with concerns regarding Resident #2's right hand injury on 11/22/25.
-The facility staff should have reached out to her or the on call service for an order for a mobile xray of Resident #2's right hand on 11/22/25.
-Resident #2 would have had a standing order for acetaminophen for the staff to use for pain.

Telephone interview with Resident #2's family member on 01/23/26 at 12:43pm revealed:
-He came to visit Resident #2 on the morning of 11/23/25.
-He knew her hand was broken when he saw it.
-Resident #2's hand was "really swollen."
-Resident #2 would "grimace" and "yell out" when her hand was touched because "it hurt so bad."
-Resident #2 told him she hurt her hand trying to pull her pants down to use the bathroom.
-Resident #2 said the hand hurt "really bad" and all the facility staff had given her was acetaminophen for the pain in her hand.
-He asked the staff to call an ambulance to take Resident #2 to the hospital.

Interview with the Administrator on 01/23/26 at 12:05pm revealed:
-She was not working the day Resident #2 injured her right hand.
-A MA called her and told her Resident #2 said her right hand hurt.
-She asked the MA to ask Resident #2 what had happened.

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D 273	Continued From page 4 -Resident #2 told the MA she did not know what happened. -The MA told her Resident #2's hand looked "perfectly normal." -She asked the MA to ask Resident #2 if she needed something for pain. -Resident #2 told the MA she did not want anything because acetaminophen did not work. -Resident #2 just continued on as normal. -She came to work the next morning (11/23/25) and the hand looked a "little swollen" and she asked Resident #2 and her family member if they wanted to do an x-ray in house. -The family member said he wanted Resident #2 to be sent to the hospital. _____ The facility delayed evaluation and treatment of Resident #2's right hand fracture causing Resident #2 to experience increased pain and swelling. This was detrimental to the residents health, safety, and welfare and constitutes a Type B Violation. _____ The facility provided a plan of protection in accordance with G.S. 131D-34 on 01/23/26 for this violation. CORRECTION DATE FOR THE TYPE B VIOLATION SHALL NOT EXCEED MARCH 9, 2026.	D 273		
D 276	10A NCAC 13F .0902(c)(3-4) Health Care 10A NCAC 13F .0902 Health Care (c) The facility shall assure documentation of the following in the resident's record: (3) written procedures, treatments or orders from a physician or other licensed health professional; and	D 276		

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D 276	Continued From page 5 (4) implementation of procedures, treatments or orders specified in Subparagraph (c)(3) of this Rule. This Rule is not met as evidenced by: Based on interviews and record reviews, the facility failed to ensure fingerstick blood sugars (FSBS) were obtained as ordered for 1 of 5 sampled residents (Resident #2). The findings are: Review of Resident #2's current FL2 dated 12/31/25 revealed: -Diagnoses included diabetes mellitus type 2. -There was an order to check FSBS once daily at 6:00am. Review of Resident #2's primary care provider (PCP) order dated 06/20/25 revealed FSBS once daily in the mornings. Review of Resident #2's PCP order dated 11/21/25 revealed FSBS once daily at 6:00am. Review of Resident #2's FSBS administration history dated 11/25/25 to 01/22/26 revealed: -From 12/03/25-01/08/26, the FSBS were scheduled to be collected at 5:00am. -There were 11 occurrences out of 36 opportunities when the FSBS was collected prior to 5:00am (on 12/03/25 at 4:04am, on 12/04/25 at 4:18am, on 12/07/25 at 4:17am, on 12/08/25 at 4:47am, on 12/11/25 at 4:48am, on 12/18/25 at 4:54am, on 12/19/25 at 4:32am, on 12/20/25 at 4:53am, on 12/21/25 at 4:38am, 12/27/25 at 4:21am, and on 01/07/26 at 4:04am). -From 01/09/26-01/22/26, the FSBS were scheduled to be collected at 7:00am.	D 276		

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-There were 7 occurrences out of 14 opportunities when the FSBS was collected after 8:00am (on 01/09/26 at 9:24am, on 01/12/26 at 9:41am, on 01/14/26 at 8:25am, on 01/17/26 at 8:51am, on 01/18/26 at 8:27am, on 01/19/26 at 8:24am, and on 01/21/26 at 8:42am.)

Interview with Resident #2 on 01/21/26 at 9:45am and on 01/22/26 at 12:50pm revealed:
-There was an order to check her FSBS daily at 6:00am.
-Staff were checking her FSBS in the mornings between 4:00am and 5:00am.
-She did not want staff to check her FSBS so early because she was still sleeping.
-A family member spoke with the Administrator about the staff waking her up for a FSBS.
-Staff now checked her FSBS after she had eaten breakfast at 8:00am.

Telephone interview with Resident #2's PCP on 01/23/26 at 8:21am revealed:
-She wanted Resident #2's FSBS to be collected before Resident #2 ate breakfast.
-She primarily went by Resident #2's A1C (a blood test that reflects your average blood glucose levels over the past 3 months) when making decisions about Resident #2's care.

Interview with the Administrator on 01/23/26 at 12:05pm revealed:
-Third shift used to be responsible for obtaining Resident #2's FSBS.
-First shift staff were now coming in at 6:00am to administer medications and were responsible for collecting FSBS.
-The first shift staff should collect FSBS at 6:00am prior to starting to administer medications.
-The first shift staff were not obtaining FSBS prior

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D 276	Continued From page 7 to administering medications which resulted in Resident #2's FSBS being outside the timeframe. -The staff obtained early FSBS for Resident #2 only when the resident was already up or did not feel well. -The staff did not wake Resident #2 to check her FSBS.	D 276		
D 338	10A NCAC 13F .0909 Resident Rights 10A NCAC 13F .0909 Resident Rights An adult care home shall assure that the rights of all residents guaranteed under G.S. 131D-21, Declaration of Residents' Rights, are maintained and may be exercised without hindrance. This Rule is not met as evidenced by: TYPE B VIOLATION Based on interviews and record reviews, the facility failed to ensure resident dignity was maintained for 2 of 2 sampled residents (Residents #4 and #5) related to photos, comments, and emojis posted to a group chat application. The findings are: Review of the facility's consent for photography policy revealed: -There was an area for handwritten initials of residents and or responsible parties before each of the following statements: "-I agree to have photos taken for identification and medical purposes." "-I agree to have photos taken during activities and events in the facility." "-I agree to have photos taken for marketing	D 338		

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purposes."
-There was not a statement for the resident or their responsible party to consent to have photos taken and shared among staff using a group chat application.

1. Review of Resident #4's current FL2 dated 12/26/25 revealed:
-Diagnoses included vascular dementia and anxiety.
-She was documented as ambulatory and constantly disoriented.

Review of Resident #4's Resident Register revealed she was admitted to the facility on 12/26/25.

Review of Resident #4's care plan dated 12/31/25 revealed:
-She ambulated independently.
-She needed supervision with eating, toileting, and dressing.

Review of a photo of Resident #4 posted in the facility group chat application revealed:
-There was no visible date on the photo.
-The photo was taken in the staff breakroom.
-Resident #4's pants and pullup were pulled down to her knees, and she was in a crouched position over a trash can.
-Resident #4's face was visible in the photo.
-There was a message under the photo which read "Ummm hello what is going on today" at 1:55pm.
-There were two "laughs until you cry" emojis and one "facepalm" emoji below the photo and message.

Interview with a medication aide (MA) on 01/21/26 at 3:23pm revealed:

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-Resident #4 was a new admission to the facility.
-She heard the breakroom door open after a staff member had exited the breakroom.
-She went to the breakroom to see who was in there.
-She found Resident #4 urinating in the trashcan.
-She took a picture of Resident #4 urinating in the trashcan.
-She posted the picture to the facility's group chat application.
-She posted the picture to show Resident #4's change in behavior.
-She posted it to the group chat because different staff worked every day and it was easier than messaging each staff individually.
-Resident #4 was "modest" and what happened was "not like her to do that."
-Resident #4 had a dementia diagnosis.
-The group chat application was used to communicate with employees on other shifts.
-The group chat application was used to let employees know what was going on with the residents.
-Only employees of the facility were included in the group chat.
-There were 20 plus employees who received communications through the group chat.

Review of a second photo of Resident #4 posted in the facility group chat application revealed:
-Resident #4 on her knees faced away from the camera on a disposable incontinence bed pad in the floor of the facility hallway.
-Resident #4 was undressed from the waist down with the exception of an adult pullup and one shoe.
-There was a pair of blue jeans lying on the floor behind Resident #4.

Interview with a second MA on 01/21/26 at

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4:05pm revealed:
-She had taken the photo of Resident #4 on the hallway floor.
-Resident #4 had just started a new medication when the photo was taken.
-She took the photo to communicate the change in Resident #4's behavior.
-Resident #4 was undressing and getting into the floor of the hallway which was not normal behavior for her.
-She had already assisted Resident #4 to put her pants on twice before she took the photo.
-Resident #4 was not aware the MA had taken the photo of her.
-She posted the photo to the facility's group chat.
-It was easier to communicate using the group chat application than communicating directly with the Administrator or other staff who also provided care to Resident #4.

Review of a video of Resident #4 posted in the facility group chat application revealed:
-Resident #4 was standing in a bathroom in front of a mirror and sink.
-Resident #4 used both of her hands to bring water to her face repeatedly to rinse her face.
-The message below the video read "Toothpaste facial anyone?"

Interview with a personal care aide (PCA) on 01/23/26 at 3:35pm revealed:
-She had taken the video of Resident #4 as she washed her face in her bathroom and posted it to the group chat application.
-"It was humor."
-"You have to make light of things."
-Resident #4 had gotten toothpaste confused with face cream.
-She posted it so other employees were aware toothpaste needed to be something they watched

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out for with Resident #4.
-She was not making fun of Resident #4.
-"It was like finding your grandma doing it and I was laughing it off."

Review of Resident #4's chart notes dated 12/29/25 through 01/22/26 revealed:
-There was documentation on 01/10/26 that Resident #4's Primary Care Provider (PCP) was contacted related to an incident of using the bathroom in an office trashcan.
-There was documentation on 12/29/25 and 01/17/26 and 02/21/26 that Resident #4 was found undressed in her room.
-There was documentation on 01/21/26 that Resident #4 was found undressed in another resident's room.

Interview with the Administrator on 01/21/26 at 1:00pm revealed:
-She saw the photo of Resident #4 squatting over the trash can posted in the MA group chat.
-She saw the photo of Resident #4 on her knees in the hallway without pants posted in the MA group chat.
-She and the staff had been talking with a family member about Resident #4's behavior prior to admission and these behaviors in the photos were new.
-She and the staff had been working with Resident #4's primary care provider (PCP) to adjust her medications.
-The photos were posted by the staff to show behaviors that were "completely out of the norm" for Resident #4.

Interview with the Administrator on 01/23/26 at 10:15am revealed Resident #4's POA was out of town, and her current contact was another family member.

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D 338	Continued From page 12 Telephone interview with Resident #4's family member on 01/23/26 at 10:18am revealed: -Resident #4 was diagnosed with dementia and was admitted to the facility about three weeks ago because she had become increasingly difficult to manage at home. -The POA was out of town and had not visited the facility since Resident #4 was admitted. -She and another family member started visiting Resident #4 at the facility a week ago and had been visiting on most days. -The Administrator informed them of some extreme behaviors during the first two weeks of her admission. -Resident #4 was continent of bowel and bladder and was not taking any medications prior to her admission to the facility. -Since the admission to the facility several medications were tried in an effort to manage her behaviors, and she thought Resident #4 started wearing incontinence briefs. -She talked with and texted with the Administrator about Resident #4 on a couple of occasions. -She was not aware the staff used a group chat application to communicate with each other. -She was not aware staff had taken pictures of Resident #4 but thought words could have been used to adequately explain the situation. -Even though Resident #4 had dementia she was still alert enough to understand if she "was being made fun of". -Resident #4 acted embarrassed when the staff started talking about and asking questions about her behaviors. -It "grabbed her attention" when staff told her about Resident #4's behaviors in front of other residents and Resident #4. -On one occasion when she visited Resident #4, she observed staff to ask Resident #4 if she	D 338		

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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
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walked around naked when she lived at home.
-The interaction occurred at the nurses station in front of other residents and the family member.
-The comment seemed to "embarrass" Resident #4.
-She commented back to Resident #4 "they are telling your secrets."
-The interaction made her "uncomfortable" because Resident #4 was "very modest."
-She would prefer it if pictures were not taken, especially pictures that could be explained with words as "pictures would offer no benefit to staff".

Based on observations, interviews, and record reviews it was determined Resident #4 was not interviewable.

Refer to the interview with the Administrator on 01/21/26 at 12:55pm.

Refer to the interview with the Administrator on 01/22/26 at 9:15am.

Refer to the telephone interview with the facility's PCP on 01/23/26 at 8:21am.

Refer to the interview with the Activity Director on 01/23/26 at 9:10am.

2. Review of Resident #5s current FL2 dated 05/21/25 revealed:
-Diagnoses included dementia and depression.
-She was documented as ambulatory and constantly disoriented.

Review of Resident #5's Resident Register revealed she was admitted to the facility on 02/19/24.

Review of Resident #5's care plan dated 02/22/24

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revealed:
-She needed supervision with eating and transferring.
-She needed limited assistance with toileting, ambulation, bathing, dressing and grooming.

Review of Resident #5's record revealed she was admitted to Hospice services on 10/10/25.

Review of a photo of Resident #5 posted in the facility group chat application revealed:
-Resident #5 was seated on a toilet with an adult pull-up and pants pulled down to her knees.
-Resident #5's bare abdomen and left thigh were visible in the photo.
-Resident #5 was holding a piece of feces in her bare left hand.
-Feces was visible in the adult pull-up Resident #5 wore.
-There was a pile of feces on the floor under Resident #5's bedroom shoe clad left foot.
-Feces was in the floor in front of Resident #5.
-Beneath the picture there was a vomit-face emoji.

Interview with a medication aide (MA) on 01/21/26 at 3:23pm revealed:
-She had taken the picture of Resident #5 seated on the toilet holding a piece of feces and posted it to the group chat application.
-She posted the picture because "people do not always believe a message."
-The photo of Resident #5 was "unbelievable" because it was "just not like her at all."
-The photo of Resident #5 went to everybody in the group chat because there were different people working every day.
-It was easier to post the photo in a group chat than to message individually.
-Resident #5 had dementia.

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D 338	Continued From page 15 -Resident #5 was not upset about the photo, but she was more upset that "I caught her." Review of Resident #5's chart notes from 10/25/25 through 01/23/26 revealed there was no documentation she was having any behavior changes or any incident that needed to be reported to the provider. Interview with the Administrator on 01/21/26 at 1:02pm revealed: -She did not recall ever having seen the photo of Resident #5 seated on the toilet holding a piece of feces posted on the group chat. -She did not know what the MA was reporting by posting the photo of Resident #5 seated on the toilet holding a piece of feces. Attempted interview with Resident #5's Power of Attorney on 01/23/26 at 10:11am was unsuccessful. Based on observations, interviews and record reviews it was determined Resident #5 was not interviewable. Refer to the interview with the Administrator on 01/21/26 at 12:55pm. Refer to the interview with the Administrator on 01/22/26 at 9:15am. Refer to the telephone interview with the facility's PCP on 01/23/26 at 8:21am. Refer to the interview with the Activity Director on 01/23/26 at 9:10am. _____ Interview with the Administrator on 01/21/26 at 12:55pm revealed:	D 338		

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-The group chat application was used to communicate "general things the whole building" needed to know.
-The MA group chat included 20 plus employees including MAs, PCAs, the Activity Director, the Maintenance Director, and the Housekeeper.
-Resident medical information was shared in the MA group chat "if it was something out of the norm."
-The photos posted on the MA group chat should not have the residents face visible, but the resident's name would be associated with shared photos.
-Everyone who was a member of the MA group chat was able to see all the posts.
-She was able to see all of the posts to the MA group chat.
-She did not know how long the photos or videos posted to the group chat were available for.
-It was possible to send chat messages to one person or a few people rather than the entire facility chat group.

Interview with the Administrator on 01/22/26 at 9:15am revealed:
-The facility's consent for photography was included in the facility's new admission paperwork.
-The resident or responsible party were asked for permission to use resident photos for identification purposes on the electronic medication administration record.
-The resident or responsible party were asked for permission to use a resident photos for marketing purposes.
-Taking a photo was simpler than words and was a visual of the behavior change.

Telephone interview with the facility's PCP on 01/23/26 at 8:21am revealed:

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D 338	Continued From page 17 -The facility did not share photos or videos from the group chat application to her mobile devices. -She may have seen photos or videos of residents while visiting the facility. -If she had seen photos or videos of residents, it was always on facility devices. Interview with the Activity Director on 01/23/26 at 9:10am revealed: -When people were hired at the facility they were added to the facility group chat application. -Employees were removed from the facility's group chat application when they left employment. -Only current employeees had access to the facility's group chat application. -The group chat application was used as the care staff's "logbook." _____ The facility failed to maintain the privacy, dignity, and respect of two cognitively impaired residents when photos were taken of them when they were not fully dressed and in compromising acts that could cause them embarrassment, suggest wrong doing or damage their reputation and staff made inappropriate comments and found humor in sharing them. This failure was detrimental to the health, safety, and welfare of the residents which constitutes a Type B Violation. _____ The facility provided a plan of protection in accordance with G.S. 131D-34 on 01/22/26 for this violation. CORRECTION DATE FOR THE TYPE B VIOLATION SHALL NOT EXCEED MARCH 09, 2026.	D 338		

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D 420	Continued From page 18	D 420		
D 420	10A NCAC 13F .1104 (b) Accounting For Resident's Personal Funds 10A NCAC 13F .1104 Accounting For Resident's Personal Funds (b) No employee of a facility shall handle the personal funds for a resident, except for the facility administrator or the administrator's designee after having received prior written authorization from the resident or the resident's authorized representative. The facility administrator or their designee shall maintain an accurate account balance and accounting of all funds received, disbursements, and the balance on hand which shall be available upon request to the resident or their authorized representative during the facility's regular business office hours. This Rule is not met as evidenced by: TYPE B VIOLATION Based on interviews and record reviews, the facility failed to maintain an accurate accounting of residents' personal funds, including funds received, disbursements and the balance on hand and have residents' funds available upon request for 3 of 3 sampled residents (#6, #7, #8). The findings are: 1. Review of Resident #6's current FL2 dated 07/30/25 revealed diagnoses included major	D 420		

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depressive disorder and anxiety.

Review of Resident #6's Resident Register revealed he was admitted to the facility on 07/29/25.

Interview with Resident #6 on 01/21/26 at 3:19pm revealed:
-The facility became his payee a couple of months ago.
-He was supposed to receive his personal funds of $90.00 on the 10th of each month.
-He received personal funds of $90.00 in December 2025 but only received $70.00 in January 2026.
-In January 2026 he had to request his funds several times before he was finally given it on 01/15/26.
-He did not know why he received $20.00 less in January 2026.

Review of Resident #6's Statement of Payment Responsibility dated 07/30/25 revealed Resident #6 was listed as the responsible person.

Review of Resident #6's Resident Funds document revealed:
-There was an entry for 11/10/25 for $90.00 which was initialed by Resident #6 and the Administrator.
-There was an entry for 12/10/25 for $90.00 which was initialed by Resident #6 and the Administrator.
-There was an entry for 01/15/26 for $70.00 which was initialed by Resident #6 and the Administrator.

Review of an email from the facility's Accounts Receivable Specialist to the Administrator revealed:

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D 420	Continued From page 20 -Resident #6 received special assistance money in the amount of $482.00 in November 2025, $482.00 in December 2025 and $493.00 in January 2026. -Resident #6 received Supplemental Security Income (SSI) in the amount of $967.00 in November 2025, $870.30 in December 2025, and $894.60 in January 2026. Interview with the Administrator on 01/22/26 at 3:48pm and 01/23/26 at 11:52am revealed: -There were 8 residents in the facility who received special assistance funds. -She assisted 4 of the 8 residents with special assistance to manage their personal funds. -The facility became Resident #6's payee in November 2025. -Resident #6 was one of the residents whom she assisted with personal funds. -She gave Resident #6 a check every month with the full amount of his personal funds. -She gave Resident #6 his personal funds of $90.00 in December 2025. -She thought the personal funds amount was decreased effective 01/01/26 so in January 2026 she gave the resident $70.00. -Resident #6 received his personal funds late in January 2026 because she had to transfer money from the facility's general bank account into the facility's trust account and then write a check so she could give him cash. -Resident #6 was responsible for paying his own pharmacy bill. -Someone from the corporate office handles the financial end of business and she was just responsible for distributing personal funds monthly. Refer to the interview with the Administrator on 01/23/26 at 3:25pm	D 420		

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D 420	Continued From page 21 2. Review of Resident #7's current FL2 dated 11/21/25 revealed diagnoses included vascular dementia, anxiety, and aphasia (impaired speaking due to a stroke). Review of Resident #7's Resident Register revealed she was admitted to the facility on 09/24/24. Review of Resident #7s Resident Funds document revealed: -There was an entry for 12/10/25 for $90.00 which was initialed by Resident #7 and the Administrator. -There was an entry for 01/10/26 for $70.00 which was crossed out and changed to $90.00 and initialed by Resident #7 and the Administrator. -There was "+" next to the Resident initials and a "+ Bank" at the bottom of the page. Review of an email from the facility's Accounts Receivable Specialist to the Administrator revealed: -Resident #7 received special assistance money in the amount of $462.00 in November 2025, $462.00 in December 2025 and $474.00 in January 2026. -Resident #7 received SSI in the amount of $692.00 in November 2025, $987.00 in December 2025 and $729.00 in January 2026. Telephone interview with the facility's contracted pharmacy on 01/23/26 at 2:19pm revealed: -Resident #7 owed the pharmacy $30.68. -A payment of $51.21 was made on the account on 11/06/25. Telephone interview with Resident #7's family	D 420		

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member on 01/23/26 at 2:37pm revealed:
-She was the payee when Resident #8 was admitted to the facility, but she had that transferred to the facility a few months ago.
-She did not know anything about Resident #7's finances and thought another family member provided everything for her.

Interview with Administrator on 01/23/26 at 2:07pm revealed:
-Resident #7 never wanted her personal funds.
-The resident's personal funds stayed in the corporate trust account, and she kept a running account of how much money was in that account that belonged to them.
-The families knew the money was in that trust account.
-She informed the residents monthly about their allotted personal funds and since they did not want the money it was put into the trust account.
-The "+" next the initials denoted the money was left in the bank.

Refer to the interview with the Administrator on 01/23/26 at 3:25pm

3. Review of Resident #8's current FL2 dated 11/21/25 revealed diagnoses included dementia.

Review of Resident #8's Resident Register revealed she was admitted to the facility on 06/12/25.

Review of Resident #8s Resident Funds document revealed:
-There was an entry for 08/20/25 for $90.00 which was initialed by Resident #8 and the Administrator.
-There was an entry for 09/10/25 for $90.00 which was initialed by Resident #8 and the

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Administrator.
-There was an entry for 10/10/25 for $90.00 which was initialed by Resident #8 and the Administrator.
-There was an entry for 11/10/25 for $90.00 which was initialed by Resident #8 and the Administrator.
-There was an entry for 12/10/25 for $90.00 which was initialed by Resident #8 and the Administrator.
-There was an entry for 01/10/26 for $70.00 which was crossed out and changed to $90.00 and initialed by Resident #8 and the Administrator.
-There was "+" next to the Resident initials and a "+ Bank" at the bottom of the page.

Review of an email from the facility's Accounts Receivable Specialist to the Administrator revealed:
-Resident #8 received special assistance money in the amount of $358.00 in November 2025, $358.00 in December 2025 and $366.00 in January 2026.
-Resident #8 received SSI in the amount of $1091.00 in November 2025, $1091.00 in December 2025 and $1122.00 in January 2026.

Telephone interview with the facility's contracted pharmacy on 01/23/26 at 2:19pm and at 4:27pm revealed:
-Resident #8 owed the pharmacy $2.92.
-A payment of $10.59 was last made on the account on 12/10/25.

Telephone interview with Resident #8's family member on 01/23/26 at 2:51pm revealed:
-Resident #8 did not have a Power of Attorney (POA) but needed one.
-The facility was her payee.

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D 420	Continued From page 24 Interview with Resident #8 on 01/23/26 at 1:59pm and 4:20pm revealed: -She thought a family member was her POA. -She did not remember the Administrator telling her she had any money available. -She did not know if she was supposed to get personal funds or how much. -She did not remember signing any papers indicating money was transferred to a trust account. Interview with Administrator on 01/23/26 at 2:07pm revealed: -Resident #8 "never" wanted her personal funds when she was asked if she needed any. -The resident's personal funds went into the corporate trust account, and she kept a running account of how much money was in that account that belonged to them. -The families knew the money was in that trust account. -She informed Resident #8 monthly about her allotted personal funds and since Resident #8 did not want the money it was left in the trust account. Refer to the interview with the Administrator on 01/23/26 at 3:25pm _____ Interview with the Administrator on 01/23/26 at 3:25pm revealed: -The facility did not have a separate resident funds trust account until January 2026. -All deposits received for residents were being deposited into the facility bank account. _____ The facility failed to ensure a record of residents' personal funds allowance were accounted for by recording funds received, disbursements and the	D 420		

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D 420	Continued From page 25 balance on hand for three sampled residents (#6, #7, #8) resulting in residents not having access to their funds upon request. 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 01/23/26 for this violation. CORRECTION DATE FOR THE TYPE B VIOLATION SHALL NOT EXCEED MARCH 09, 2026.	D 420		
D 422	10A NCAC 13F .1104 (d) Accounting For Resident's Personal Funds 10A NCAC 13F .1104 Accounting For Resident's Personal Funds (d) A resident's personal funds shall not be commingled with facility funds. The facility shall not commingle the personal funds of residents in an interest-bearing account. This Rule is not met as evidenced by: TYPE B VIOLATION Based on interviews and record reviews the facility failed to ensure 3 of 3 sampled residents' personal funds were not comingled with facility funds (Residents #6, #7, and #8) in an interest	D 422		

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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
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bearing account.

The findings are:

1. Review of Resident #6's current FL2 dated 07/30/25 revealed diagnoses included major depressive disorder and anxiety.

Review of Resident #6's Resident Register revealed he was admitted to the facility on 07/29/25.

Interview with Resident #6 on 01/21/26 at 3:19pm revealed:
-The facility became his payee a couple of months ago.
-He was supposed to receive his personal funds of $90.00 on the 10th of each month.
-He received personal funds of $90.00 in December 2025 but only received $70.00 in January 2026.
-In January 2026 he had to request his funds several times before he was finally given it on 01/15/26.
-He did not know why he received $20.00 less in January 2026.

Review of an email from the facility's Accounts Receivable Specialist to the Administrator revealed:
-Resident #6 received special assistance money in the amount of $482.00 in November 2025, $482.00 in December 2025 and $493.00 in January 2026.
-Resident #6 received Supplemental Security Income (SSI) in the amount of $967.00 in November 2025, $870.30 in December 2025 and $894.60 in January 2026.

Review of Resident #6's Resident Funds

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	HAL081053	A. BUILDING: _____ B. WING _____	R-C 01/23/2026

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document revealed:
-There was an entry for 11/10/25 for $90.00 which was initialed by Resident #6 and the Administrator.
-There was an entry for 12/10/25 for $90.00 which was initialed by Resident #6 and the Administrator.
-There was an entry for 01/15/26 for $70.00 which was initialed by Resident #6 and the Administrator.
-There was no balance information.

Review of the facility's resident trust funds account bank statement dated 12/31/25 revealed:
-The bank account was a business savings account.
-The beginning balance as of 12/10/25 was $0.00.
-The ending balance as of 12/31/25 was $1,179.60.
-There was one deposit made into the account for Resident #6 on 12/31/25 in the amount of $894.60.
-There was no accrued interest on the account for 12/10/25-12/31/25.

Interview with Administrator on 01/23/26 at 11:52am revealed:
-The facility became Resident #6's payee in November 2025.
-She gave Resident #6 his personal funds of $90.00 in December 2025.
-She thought the personal funds amount was decreased effective 01/01/26 so she gave the resident $70.00 in January 2026.
-Resident #6 received his personal funds on 01/15/26 instead of 01/10/26 because she had to transfer money from the facility's general bank account into the facility's trust account and then write a check so she could give him cash.

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-Someone from the corporate office handled the financial end of business and she was just responsible for distributing personal funds monthly.

Refer to the interview with the Administrator on 01/23/26 at 3:25pm.

Refer to the telephone interview with the facility's Chief Financial Officer on 01/23/26 at 3:55pm.

2. Review of Resident #7's current FL2 dated 11/21/25 revealed diagnoses included vascular dementia, anxiety, and aphasia (impaired speaking due to a stroke).

Review of Resident #7's Resident Register revealed she was admitted to the facility on 09/24/24.

Telephone interview with Resident #7's family member on 01/23/26 at 2:37pm revealed:
-She was the payee when Resident #7 was admitted to the facility, but she had that transferred to the facility a few months ago.
-She did not know anything about Resident #7's finances and thought another family member provided everything for her.

Review of an email from the facility's Accounts Receivable Specialist to the Administrator revealed:
-Resident #7 received special assistance money in the amount of $462.00 in November 2025, $462.00 in December 2025 and $474.00 in January 2026.
-Resident #7 received Supplemental Security Income (SSI) in the amount of $692.00 in November 2025, $987.00 in December 2025 and $729.00 in January 2026.

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D 422	Continued From page 29 Review of the facility's resident trust funds account bank statement dated 12/31/25 revealed: -The bank account was a business savings account. -The beginning balance as of 12/10/25 was $0.00. -The ending balance as of 12/31/25 was $1,179.60. -There was one deposit made into the account for Resident #7 on 12/31/25 in the amount of $285.00. -There was no accrued interest on the account for 12/10/25-12/31/25. Interview with Administrator on 01/23/26 at 2:07pm revealed: -She did not give Resident #7 any cash. -The resident's personal funds went into a corporate trust account, and she kept a running account of how much money was in that account that belonged to them. -The families knew the money was in that trust account. -She informed the residents monthly about their allotted personal funds and since they don't want the money it gets put into the trust account. Refer to the interview with the Administrator on 01/23/26 at 3:25pm. Refer to the telephone interview with the facility's Chief Financial Officer on 01/23/26 at 3:55pm. 3. Review of Resident #8's current FL2 dated 11/21/25 revealed diagnoses included dementia. Review of Resident #8's Resident Register revealed she was admitted to the facility on 06/12/25.	D 422		

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Telephone interview with Resident #8's family member on 01/23/26 at 2:51pm revealed:
-Resident #8 did not have a Power of Attorney (POA) but needed one.
-The facility was her payee.

Review of an email from the facility's Accounts Receivable Specialist to the Administrator revealed:
-Resident #8 received special assistance money in the amount of $358.00 in November 2025, $358.00 in December 2025 and $366.00 in January 2026.
-Resident #8 received Supplemental Security Income (SSI) in the amount of $1091.00 in November 2025, $1091.00 in December 2025 and $1122.00 in January 2026.

Review of the facility's resident trust funds account bank statement dated 12/31/25 revealed:
-The bank account was a business savings account.
-The beginning balance as of 12/10/25 was $0.00.
-The ending balance as of 12/31/25 was $1,179.60.
-There were no deposits made for Resident #8 for 12/10/25-12/31/25.
-There was no accrued interest on the account for 12/10/25-12/31/25.

Interview with Resident #8 on 01/23/26 at 1:59pm and 4:20pm revealed:
-She thought her daughter was her POA.
-She did not remember the Administrator telling her she had any money available.
-She did not know if she was supposed to get personal funds or how much.
-She did not remember signing any papers

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indicating money was transferred to a trust account.

Interview with Administrator on 01/23/26 at 2:07pm revealed:
-She did not give Resident #8 any cash.
-The resident's personal funds go into the corporate trust account, and she kept a running account of how much money was in that account that belonged to them.
-The families knew the money was in that trust account.
-She informed the residents monthly about their allotted personal funds and since they don't want the money it gets put into the trust account.

Refer to the interview with the Administrator on 01/23/26 at 3:25pm.

Refer to the telephone interview with the facility's Chief Financial Officer on 01/23/26 at 3:55pm.

_____

Interview with the Administrator on 01/23/26 at 3:25pm revealed:
-The facility did not have a separate resident funds trust account until January 2026.
-All deposits received for residents were deposited into the facility's bank account.

Telephone interview with the facility's Chief Financial Officer on 01/23/26 at 3:55pm revealed:
-The resident funds bank account was opened in December 2025.
-Before December 2025, the resident funds were deposited into the facility's bank account.
-In December 2025, a reconciliation was performed and any monies related to resident trust accounts was moved over to the resident trust bank account.
-He could not provide the accounting of each

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D 422	Continued From page 32 resident's balance and transactions. -However, he would reach out to the employee in his office that could provide that information. -The resident's financial transaction information would not be available until after 01/26/26. -The resident trust funds bank account was an interest bearing account. -The interest did not show up on the 12/31/25 bank statement, but would be visible on the January 2026 bank statement. -It was his understanding the resident funds were required to be held in an interest bearing account. _____ The facility failed to separate resident personal funds from the facility's bank account and in non-interest bearing bank accounts. 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 01/23/26 for this violation. CORRECTION DATE FOR THE TYPE B VIOLATION SHALL NOT EXCEED MARCH 09, 2026.	D 422		