

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: FCL035029	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED R 01/14/2026
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NAME OF PROVIDER OR SUPPLIER

STREET ADDRESS, CITY, STATE, ZIP CODE

PIONEER HEALTHCARE #2

**113 JUSTICE STREET
LOUISBURG, NC 27549**

(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 an Annual and Follow-up survey on 01/14/26.	C 000	X	
C 254	10A NCAC 13G .0903(c) Licensed Health Professional Support 10A NCAC 13G .0903 Licensed Health Professional Support (c) The facility shall assure that participation by a registered nurse, occupational therapist, respiratory care practitioner, or physical therapist in the on-site review and evaluation of the residents' health status, care plan, and care provided, as required in Paragraph (a) of this Rule, is completed within 30 days after admission or within 30 days from the date a resident develops the need for the task and at least quarterly thereafter, and includes the following: (1) performing a physical assessment of the resident as related to the resident's diagnosis or current condition requiring one or more of the tasks specified in Paragraph (a) of this Rule; (2) evaluating the resident's progress to care being provided; (3) recommending changes in the care of the resident as needed based on the physical assessment and evaluation of the progress of the resident; and (4) documenting the activities in Subparagraphs (1) through (3) of this Paragraph. This Rule is not met as evidenced by: Based on observations, interviews and record reviews, the facility failed to ensure a Licensed Health Professional Support (LHPS) evaluation was completed quarterly for 1 of 1 sampled residents (#3) with LHPS tasks of medication by injection.	C 254		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

STATE FORM

0999

IX1W11

If continuation sheet 1 of 15

Reviewed and acknowledged SW 02/16/26

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C 254	Continued From page 1 The findings are: Review of Resident #3's current FL2 dated 07/07/25 revealed: -Diagnoses included schizophrenia and hyperlipidemia. -Resident #3 was ambulatory. -There was an order for Invega Sustenna (used to treat schizoaffective disorder) 234mg 1 injection monthly. Review of Resident #3's Resident Register revealed an admission date of 09/14/09. Review of Resident #3's resident record revealed: -There was no care plan available for review. -There was no LHPS evaluation available for review. Interview with the Administrator on 01/14/26 at 1:02pm revealed: -She was responsible for completing the LHPS quarterly for Resident #3. -She was not aware there was no LHPS completed for Resident #3 since 04/30/25. Attempted telephone interview with Resident #3's primary care provider (PCP) on 01/14/26 at 12:10pm was unsuccessful.	C 254	The LHPS for the resident #3 has been completed as of 1/30/26 and up to date. The administrator will ensure that the assessment is completed quarterly and documented.		
C 257	10A NCAC 13G .0904(a)(1) Nutrition and Food Service 10A NCAC 13G .0904 Nutrition and Food Service (a) Food Procurement and Safety in Family Care Homes: (1) Food services shall comply with Rules Governing the Sanitation of Residential Care	C 257			

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C 257

Continued From page 2

Facilities set forth in 15A NCAC 18A .1600 which are hereby incorporated by reference, including subsequent amendments, assuring storage, preparation, and serving food under sanitary conditions.

This Rule is not met as evidenced by:
Based on observations, record reviews, and interviews, the facility failed to ensure all food items stored and prepared by the facility were served under sanitary conditions related to expired food and a food container that was not properly labeled.

The findings are:

Observation of the facility's refrigerator on 01/06/26 at 9:16am revealed:
-There was an undated Ziplock bag with three sweet potatoes; one of the potatoes was molded and had turned green.
-There was an undated Ziplock bag with three molded tomatoes.
-There was an undated Ziplock bag with a

C 257

The administrator will ensure that all food stored in the fridge in a storage container or ziploc bag will be dated accordingly. All perishables must be routinely checked and discarded if any signs of decay or molding is noted. Staff has been instructed on proper food storage as of 2/2/26

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C 257	Continued From page 3 Telephone interview with the Environmental Health Specialist (EHS) from the Local Department of Environmental Health on 01/06/26 at 10:46am revealed: -He last visited the facility on 06/18/25. -All opened foods should have been labeled using the month, day, and year to ensure it was discarded within seven days. -Eating moldy foods could cause a foodborne illness. Interview with the Supervisor-in-Charge (SIC) on 01/14/26 at 8:57am revealed: -She was responsible for labeling foods in the refrigerator. -She did not realize the Ziplock bags had not been labeled and dated. -She checked the refrigerator daily for expired foods. -She did not see the expired food in the refrigerator. Telephone interview with the Administrator on 01/14/26 at 1:02pm revealed: -The SIC was responsible for overseeing the kitchen environment. -She was not aware there was undated and expired food in the refrigerator. -She expected the cook to ensure food was properly stored in the refrigerator.	C 257	Administrator will always make sure enough supply of food is in the facility at all times. 3 days worth of perishable foods and 5 days of non perishable foods. food shopping will be done on monthly and as needed on all per non perishable foods and biweekly for the perishables or as needed to ensure adequate supply of food. Staff will be reminded to inform the administrator when food supply start to run low. Shopping was done as 1/15/26, and as of 2/11/26 for non perishables and inbetween for perishables.	
C 259	10A NCAC 13G .0904(a)(3) Nutrition and Food Service 10A NCAC 13G .0904 Nutrition and Food Service (a) Food Procurement and Safety in Family Care Homes: (3) There shall be a three-day supply of perishable food and a five-day supply of	C 259		

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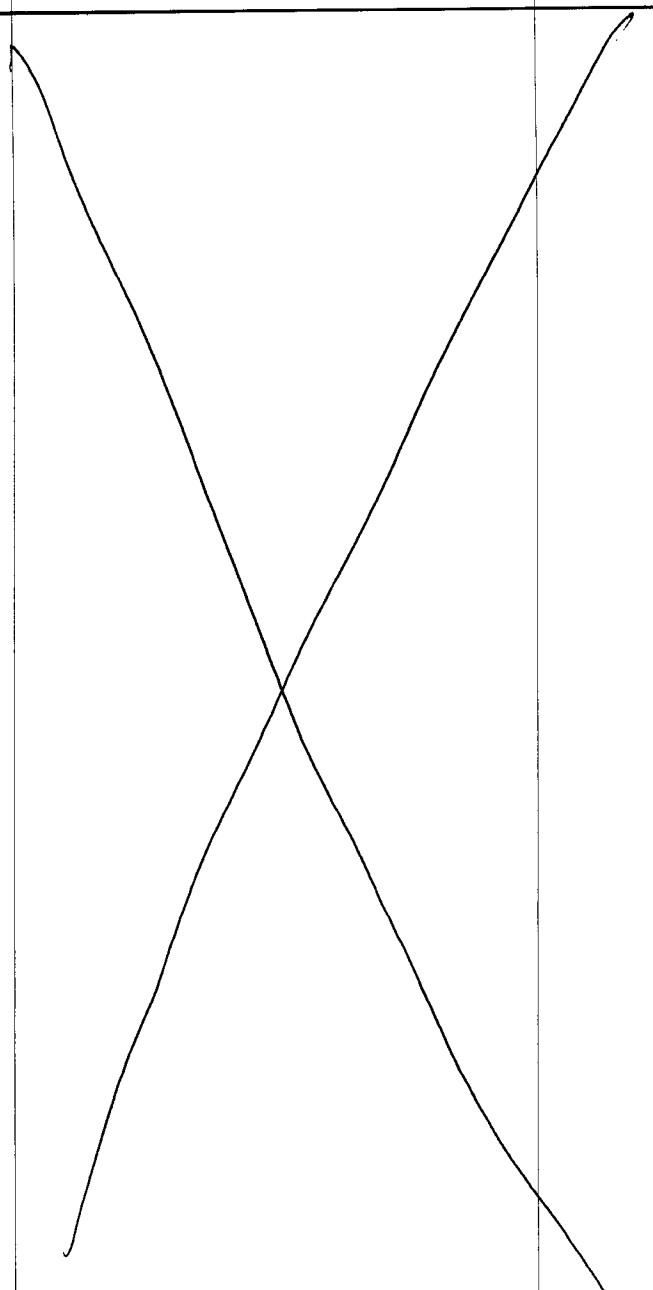
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C 259	Continued From page 4 non-perishable food in the facility based on the menus established in Paragraph (c) of this Rule, for both regular and therapeutic diets. For the purpose of this Rule "perishable food" is food that is likely to spoil or decay if not kept refrigerated at 40 degrees Fahrenheit or below, or frozen at zero degrees Fahrenheit or below and "non-perishable food" is food that can be stored at room temperature and is not likely to spoil or decay within seven days. This Rule is not met as evidenced by: Based on observations, interviews, and record reviews, the facility failed to have a 3-day supply of perishable and a 5-day supply of non-perishable food, based on the census and the menus in the facility, as evidenced by the limited food items stored at the facility. The findings are: Interview with the Supervisor-in-Charge (SIC) on 01/14/26 at 8:03am revealed there were 4 residents residing in the facility. Observation of the refrigerator on 01/14/26 at 8:49am revealed: -There were 16 eggs. -There was a gallon of 2% milk. -There was a jug of water. -There was half of a package of 2.5-pounds of bologna. -There was half of a package of bacon.	C 259		

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C 259	Continued From page 5 Observation of the freezer on 01/14/26 at 8:52am revealed: -There was a bag of French fries. -There was one package of bacon. -There were three gallons of frozen 2% milk. -There were 12 beef burgers. -There was a package of 15 chicken drumsticks. -There were two packages of 2.5-pounds of bologna. -There was a package of 24 hotdogs. Observation of a box on a countertop on 01/14/26 at 8:56am revealed: -There were 9 white potatoes. -There were 3 apples in a bag. Observations of the cabinet in the facility on 01/14/26 at 8:58am revealed: -There was an 18-ounce box of cereal. -There was a 10-pound package of pancakes; the package was almost full. -There was an unopened container of peanut butter. -There were four 7.25-ounce packages of macaroni and cheese. -There was a 16-ounce package of spaghetti. -There was an 8-ounce can of tomato sauce. -There were eight 14.5-ounce cans of green beans. -There were two 14.5-ounce cans of sweet peas. -There was no other non-perishable food in the facility. Review of the facility's breakfast menu for the week of 01/12/26 to 01/18/26 revealed: -There were items on the menu that were not available in the facility. -On Monday, 3/4 cups of dry cereal, 2 pancakes, 2 teaspoons of syrup, 1/2 cup of sliced peaches, 1	C 259			

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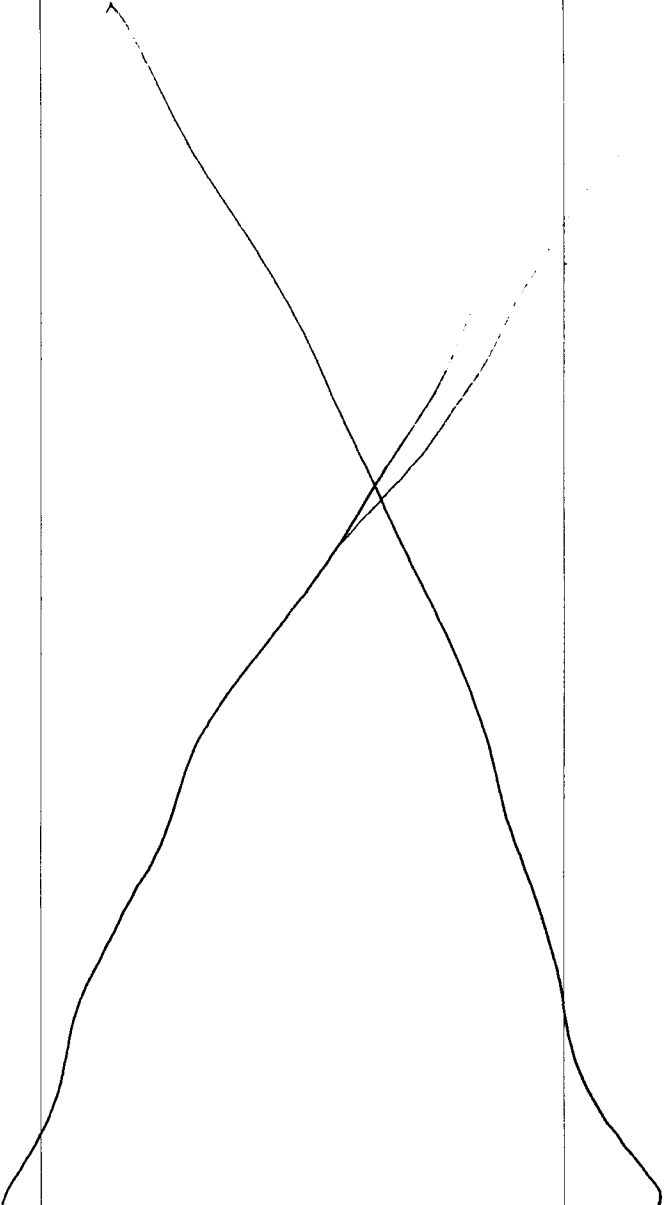
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C 259	Continued From page 6 teaspoon of margarine, 1 cup of 1% milk, 1 cup of orange juice, and 1 cup of coffee were to be served. -On Tuesday, 3/4 cups of oatmeal, 1-ounce scrambled egg, 2 link sausages, 1 teaspoon of margarine, 1 cup of 1% milk, 1 cup of orange juice, and 1 cup of coffee were to be served. -On Wednesday, 1/2 cup of cheese grits, 2 ounces of scrambled eggs, 2 slices of bacon, 1 teaspoon of margarine, 1 cup of 1% milk, 1 cup of orange juice, and 1 cup of coffee were to be served. -On Thursday, 2 ounces of scrambled eggs, 2 ounces of sausage, 1 banana, 1 cup of 1% milk, 1 cup of orange juice, and 1 cup of coffee were to be served. -On Friday, 3/4 cups of dry cereal, 1 sausage patty, 1 biscuit, 2 tablespoons of gravy, 1 cup of 1% milk, 1 cup of orange juice, and 1 cup of coffee were to be served. -On Saturday, 3/4 cup of cream of rice, 2 ounces of scrambled eggs with 1 ounce of cheese, 1 small blueberry muffin, 1 teaspoon of margarine, 1 cup of 1% milk, 1 cup of orange juice, and 1 cup of coffee were to be served. -On Sunday, 3/4 cup of cream of wheat, 2 ounces of scrambled eggs with 1 ounce of cheese, 2 slices of breakfast ham, 1 teaspoon of margarine, 1 cup of 1% milk, 1 cup of orange juice, and 1 cup of coffee were to be served. Review of the facility's lunch menu for the week of 01/12/26 to 01/18/26 revealed: -There were items on the menu that were not available in the facility. On Monday, 1 cup of navy bean soup, 1 2-ounce tuna salad sandwich, lettuce/tomato, 1/2 cup of potato chips, 1 yogurt, 1 cup of iced tea, and 1 cup of water were to be served. -On Tuesday, 2-ounce hot dog on bun, 2	C 259		1

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STATE FORM

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IX1W11

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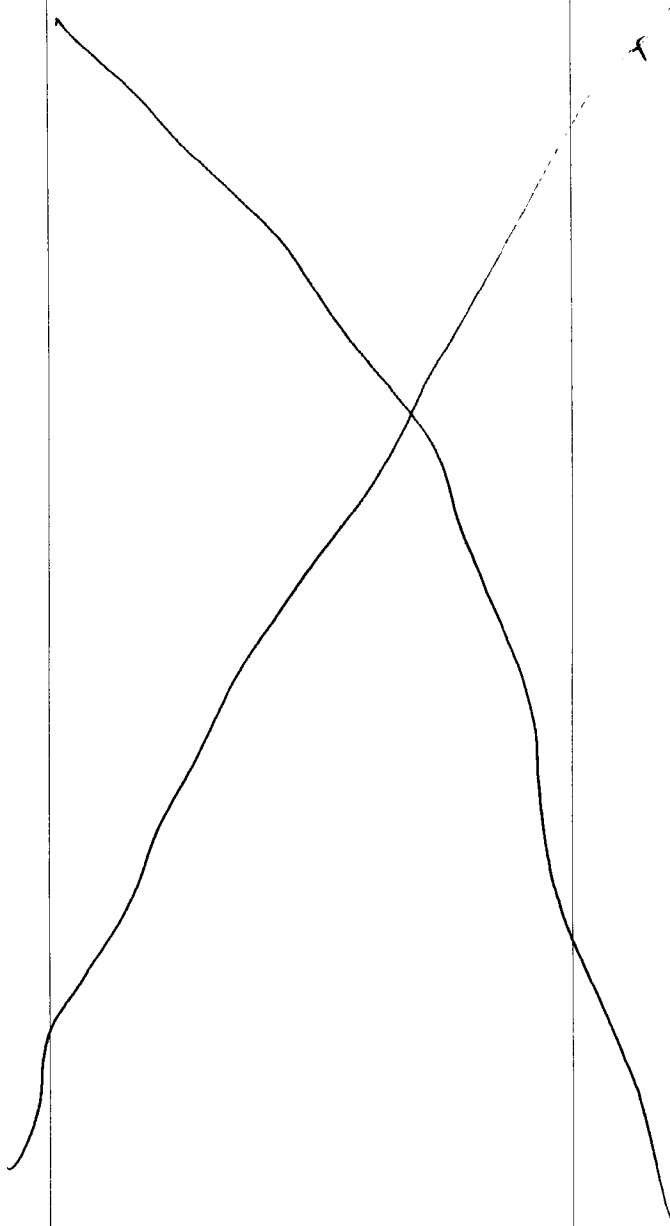
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C 259	Continued From page 7 tablespoons of chili and/or onions, 1 teaspoon of mustard and/or ketchup, ½ cup of chips, ½ cup of sliced peaches, 1 cup of iced tea, and 1 cup of water were to be served. On Wednesday, 1 cup of vegetable soup, 2 ounces of ham with 1 ounce of cheese sandwich, ½ cup of potato salad, 1 piece of fresh fruit, 1 cup of iced tea, and 1 cup of water were to be served. -On Thursday, 1 cup of potato soup, 1 2-ounce egg salad sandwich, ½ cup of pickled beets, ½ cup of fruit cocktail, 1 cup of iced tea, and 1 cup of water were to be served. -On Friday, 3-ounce cheeseburger on bun with 1 ounce of cheese, lettuce/tomato, 1 teaspoon of mustard and/or ketchup, ½ cup of baked French fries, 1 cup of a side salad, 2 teaspoons of light salad dressing, ½ cup of applesauce, 1 cup of iced tea, and 1 cup of water were to be served. -On Saturday, 3-ounce meatballs on a 6-inch sub roll, ½ baked potato wedges, ½ cup of peas, 2x2 slice of marble cake, 1 cup of iced tea, and 1 cup of water were to be served. -On Sunday, 1 cup of tomato soup, 3-ounce turkey burger on roll, lettuce/tomato, ½ cup of coleslaw, 1 banana, 1 cup of iced tea, and 1 cup of water were to be served. Review of the facility's dinner menu for the week of 01/12/26 to 01/18/26 revealed: -There were items on the menu that were not available in the facility. -On Monday, 1/2 cup of spaghetti noodles, ¼ cup of meat sauce with 2 ounces of meat, 1 cup of a side salad, 2 teaspoons of light salad dressing, 1 slice of garlic bread, 2x2 slice of chocolate cake, 1 cup of iced tea, 1 cup of 1% milk, and water were to be served. -On Tuesday, 3 ounces of pot roast, ½ cup of rice, ½ cup of buttered corn, 1 dinner roll, ½ cup of apple cobbler, 1 cup of iced tea, 1 cup of 1%	C 259		

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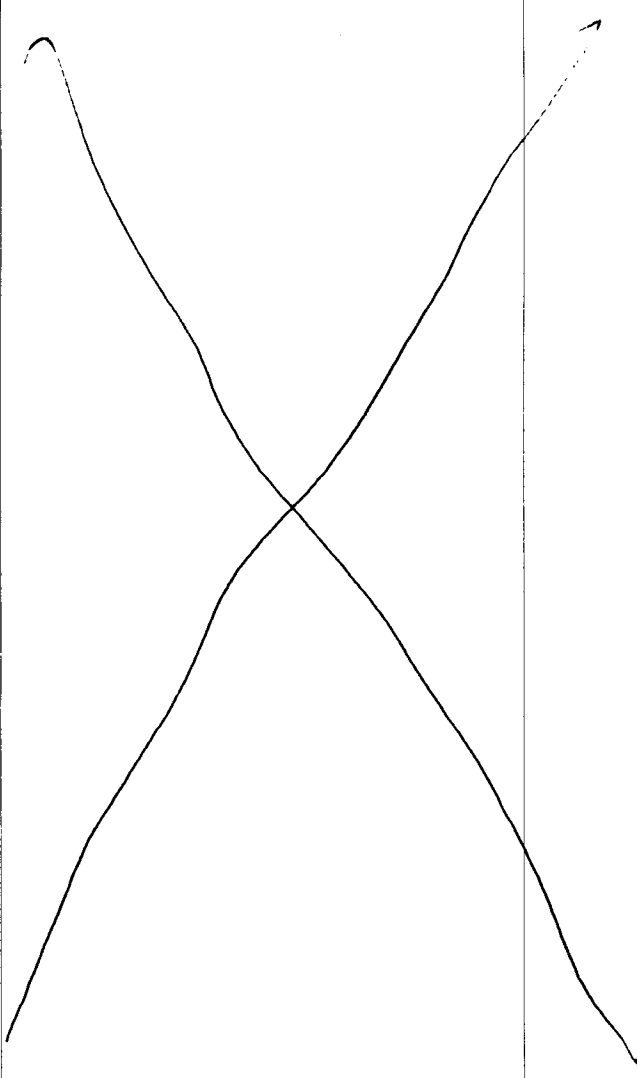
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IX1W11

If continuation sheet 8 of 15

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C 259	Continued From page 8 milk, and water were to be served. -On Wednesday, 3 ounces of baked chicken, ½ cup of stewed tomatoes, ½ cup of broccoli, 1 dinner roll, 1 teaspoon of margarine, 2x2 slice brownie, 1 cup of iced tea, 1 cup of 1% milk, and water were to be served. -On Thursday, 3 ounces of roast pork loin, ½ sweet potato, ½ cups of escalloped apples, 2x2 slice of cornbread, 1 teaspoon of margarine/brown sugar, 1 cup of iced tea, 1 cup of 1% milk, and water were to be served. -On Friday, 3 ounces of Salisbury steak, ½ cup of buttered noodles, 2 tablespoons of brown gravy, ½ cups of mixed vegetables, 1 slice of whole wheat bread, 1 teaspoon of margarine, ½ cup of pineapple tidbits, 1 cup of iced tea, 1 cup of 1% milk, and water were to be served. -On Saturday, ¾ cups of macaroni and cheese, ½ cups of turnip greens, 1 cup of pinto beans, 1 teaspoon of margarine, ½ cup of lemon pudding, 1 cup of iced tea, 1 cup of 1% milk, and water were to be served. -On Sunday, 3-ounce crumb topped fish, 1/2 cup of baked tater tots, ½ cup of steamed carrots, 1 dinner roll, 1 teaspoon of margarine, ½ cup of ice cream, 1 cup of iced tea, 1 cup of 1% milk, and water were to be served. Review of the facility's snack menu for the week of 01/12/26 to 01/18/26 revealed: -There were items on the menu that were not available in the facility. -On Monday, 1/2 cup of grapes and water were to be served. -On Tuesday, 2 ounces of sliced cheese with 6 crackers and water were to be served. -On Wednesday, 1/2 cup of mixed fruit and water were to be served. -On Thursday, 1 cup of yogurt and water were to be served.	C 259			

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C 259	Continued From page 9 -On Friday, 1/2 cup of pudding and water were to be served. -On Saturday, 1/2 peanut butter sandwich on wheat bread and water were to be served. -On Sunday, 1/2 cup of mandarin oranges and water were to be served. Interview with a resident on 01/14/26 at 12:14pm revealed: -He was served cereal and milk for breakfast this morning, 01/14/26. -He was served a turkey, cheese, and lettuce sub with a soda for lunch today, 01/14/26. Interview with the Supervisor-in-Charge (SIC) on 01/14/26 at 8:57am revealed: -The residents had cereal, milk and water for breakfast on 01/14/26. -Three of the residents only ate breakfast and dinner at this facility; they ate lunch at the day program. -She only made lunch for the one resident that did not attend the day program. -She made meals according to what was listed on the menu. -She always had enough food to prepare what was on the menu. -She made a list of foods to purchase and gave it to the Administrator. -She looked at the menu to make her grocery list for the Administrator. -She always had enough food in the facility. -The Administrator purchased food for the month and last purchased food on 12/10/25. -When she was low on eggs, milk, and bread; she called the Administrator to purchase the food. -The Administrator was coming today, 01/14/26, to purchase the items from her list. -She was not aware there was to be a 3-day supply of perishable and a 5-day supply of	C 259		

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C 259	Continued From page 10 non-perishable food at the facility. Telephone interview with the Administrator on 01/14/26 at 11:14am and 1:02pm revealed: -The SIC was responsible for making a list of foods that needed to be purchased. -The SIC used the menu as a reference to complete the grocery list. -She was responsible for purchasing the food items from the list. -She purchased food monthly for the facility and the last purchase was on 12/13/25. -She was going to purchase food for the facility today, 01/14/26. -She purchased perishable foods as needed. -If the facility was out of something, the SIC would notify her. -She was aware there was to be a 3-day supply of perishable and a 5-day supply of non-perishable food at the facility. -The facility never ran out of food; there was always more than enough.	C 259	The administrator has already provided the table knives as of 1/30/26. The staff has been instructed to make it available to the residents at each meal.		
C 261	10A NCAC 13G .0904 (b)(1) Nutrition And Food Service 10A NCAC 13G .0904 Nutrition And Food Service (b) Food Preparation and Service in Family Care Homes: (1) Table service shall include a napkin and non-disposable place setting consisting of a knife, fork, spoon, plate, and beverage containers. This Rule is not met as evidenced by: Based on observation and interviews the facility failed to ensure the table settings at mealtimes included a knife.	C 261			

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C 261	Continued From page 11 The findings are: Observation of the kitchen on 01/14/26 at 8:49am revealed there were no knives for the residents to use. Interview with a resident on 01/14/26 at 12:58pm revealed: -He was never given a knife during mealtimes. -He would use the knife to cut up his food if it was given to him. Interview with the Supervisor-in-Charge (SIC) on 01/14/26 at 8:57am revealed: -She chopped everyone's food so there was no need for a resident to have a knife. -She was never told not to give a knife to a resident but generally she did not "due to safety". -The residents had never done anything inappropriately with a knife. Telephone interview with the Administrator on 01/14/26 at 1:02pm revealed: -For safety reasons no sharp objects were allowed at the facility. -The food was cut up for each resident so there was no need to have a knife at the table. -She was not aware each resident was to have a knife at mealtimes.	C 261			
C 320	10A NCAC 13G .1002 (f) Medication Orders 10A NCAC 13G .1002 Medication Orders (f) The facility shall assure that all current orders for medications or treatments, including standing orders and orders for self-administration, are reviewed and signed by the resident's physician	C 320			

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: FCL035029	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____		(X3) DATE SURVEY COMPLETED R 01/14/2026
NAME OF PROVIDER OR SUPPLIER PIONEER HEALTHCARE #2			STREET ADDRESS, CITY, STATE, ZIP CODE 113 JUSTICE STREET LOUISBURG, NC 27549		
(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 320	Continued From page 12 or prescribing practitioner at least every six months This Rule is not met as evidenced by: Based on interviews and record reviews, the facility failed to ensure all current medication orders were reviewed and signed by the residents' prescribing practitioner for 2 of 2 sampled residents (#2 and #3). The findings are: - Review of resident #2's current FL2 dated 06/26/25 revealed: -Diagnoses included schizophrenia, bipolar disorder, hypothyroidism, and traumatic brain disorder. -There was an order for levothyroxine (used to treat underactive thyroid) 50mcg daily. -There was an order for loratadine (used to treat seasonal allergies) 10mg tablet daily. -There was an order for vitamin D3 (used to treat vitamin D deficiency) 2000 lu capsule daily. -There was an order for caplyta (used to treat schizophrenia) 42mg tablet daily. -There was an order for ondansetron (used to treat nausea) 4mg before breakfast. -There was an order for omeprazole (used to treat gastroesophageal reflux disease) 40mg daily. -There was an order for prazosin (used to treat hypertension) 1mg every night. -There was an order for clozapine (used to treat schizophrenia) 25mg 2 tablets every night. -There was an order for divalproex (used to treat seizures) 250mg every night. -There was an order for trazodone (used to treat insomnia) 100mg every night. -There was an order for gemfibrozil (used to treat high cholesterol) 600mg twice daily.	C 320	The administrator has initiated the 6 months or biannual MAR for every resident in the facility as of 2/9/26. 2 of the residents out of 4, has been signed and initialed by the primary care provider. The remaining 2 residents MAR will be completed by 3/2/26.		

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: FCL035029	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED R 01/14/2026
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NAME OF PROVIDER OR SUPPLIER

STREET ADDRESS, CITY, STATE, ZIP CODE

PIONEER HEALTHCARE #2

**113 JUSTICE STREET
LOUISBURG, NC 27549**

(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 320	Continued From page 13 -There was an order for bupropion (used to treat depression) 100mg twice daily. -There was an order for omega 3 (used to prevent heart disease) 1gm 2 tablets twice daily. -There was an order for clozapine (used to treat schizophrenia) 200mg twice daily. -There was an order for sertraline (used to treat depression) 100mg twice daily. -There was an order for Levocarnitine (used to prevent kidney disease) 330mg three times daily. -There was an order for Abilify (used to treat schizoaffective disorder) 400mg 1 injection monthly. -There was an order for loperamide (used to treat diarrhea) 2mg two tables daily. -There was an order for acetaminophen (used to treat pain) 325mg two tablets twice daily as needed. -There was an order for hemorrhoidal cream (used to treat itching, burning, and swelling) four times daily as needed. -There was an order for naproxen (used to treat arthritis) 500mg twice daily as needed. Review of Resident #2's orders revealed there was no signed six-month review by a prescribing practitioner. Refer to the interview with the Administrator on 01/14/26 at 1:02pm. 2. Review of Resident #3's current FL2 dated 02/28/25 revealed: -Diagnoses included hyperlipidemia and schizoaffective disorder. -There was an order for benzotropine (used to treat tremors) 2mg daily. -There was an order for vitamin D3 (used to treat vitamin D deficiency) 2000 lu capsule daily. -There was an order for famotidine (used to treat	C 320		

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STATE FORM

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If continuation sheet 14 of 15