STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL045125	A. BUILDING: _____ B. WING _____	04/10/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
CAROLINA RESERVE OF HENDERSONVILLE	1820 PISGAH DRIVE HENDERSONVILLE, NC 28739

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
D 000	Initial Comments The Adult Care Licensure Section and the Henderson County Department of Social Services conducted an annual survey and complaint investigation on 04/09/26 - 04/10/26.	D 000		
D 358	10A NCAC 13F .1004 (a) Medication Administration 10A NCAC 13F .1004 Medication Administration (a) An adult care home shall assure that the preparation and administration of medications, prescription and non-prescription, and treatments by staff are in accordance with: (1) orders by a licensed prescribing practitioner which are maintained in the resident's record; and (2) rules in this Section and the facility's policies and procedures. This Rule is not met as evidenced by: Based on observations, interviews and record reviews, the facility failed to administer medications as ordered for 1 of 5 sampled residents, (Resident #3), related to a medication used to treat high blood pressure. The findings are: Review of Resident #3's current FL2 dated 12/19/25 revealed diagnoses included acute respiration failure with hypoxia, chronic obstructive pulmonary disease, hypertension, gastroesophageal reflux disease, atrial fibrillation, and diabetes. Review of physician's orders dated 12/26/2025 revealed an order for metoprolol succinate (used to decrease blood pressure) 50mg twice daily. Review of a subsequent physician's order dated	D 358		

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D 358	Continued From page 1 03/09/2026 revealed metoprolol succinate 50mg, 1 tablet (50mg total) by mouth daily. Review of Resident #3's electronic Medication Administration Record (eMAR) for March 2026 revealed there was documentation the metoprolol succinate 50mg, 1 tablet by mouth twice a day was administered for 31 days twice daily at 8:00am and 8:00pm. Review of Resident #3's eMAR for 04/01/26 - 04/09/26 revealed there was documentation the metoprolol succinate 50mg, 1 tablet by mouth twice a day was administered for 8 days twice daily at 8:00am and 8:00pm. Observation of Resident #3's medications available for administration on 04/10/26 at 9:34am revealed: -There was one bubble pack labeled metoprolol 50mg, take 1 tablet twice daily, and 31 tablets were dispensed on 03/14/26 and 9 remained. -There was a second bubble pack labeled metoprolol 50mg, take 1 tablet twice daily, and 31 tablets were dispensed on 03/14/26 and 10 remained. Telephone interview with a representative at the facility's contracted pharmacy on 04/10/26 at 9:37am revealed the pharmacy did not receive an order for metoprolol succinate 50mg once daily and the metoprolol succinate 50mg twice daily was still an active order. Telephone interview with a Registered Nurse (RN) from Resident #3's cardiology office on 04/10/2026 at 9:57am revealed Resident #3's blood pressure was 95/54 so the cardiologist decreased the medication to bring the blood pressure back up and low blood pressure can	D 358		

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D 358	Continued From page 2 cause the heart rate to decrease as well. Observation of blood pressure reading done by Resident #3's medication aide (MA) on 04/10/2026 at 10:20am was 105/62. Interview with the RCC on 04/10/2026 at 9:56am revealed: -She faxed the current metoprolol order to the pharmacy. -She did not have a fax confirmation. Interview with Administrator on 04/10/2026 at 9:50am revealed the Resident Care Coordinator (RCC) was responsible for sending new orders to the pharmacy and verified the medication change took place	D 358		