

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: FCL054066	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 04/17/2026
NAME OF PROVIDER OR SUPPLIER MILLER'S FAMILY CARE HOME		STREET ADDRESS, CITY, STATE, ZIP CODE 306 E LENOIR STREET KINSTON, NC 28501		
(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 survey on 04/17/26.	C 000		
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 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, interviews, and record reviews, the facility failed to ensure all food items stored by the facility were protected from contamination related to unlabeled, undated, and expired food in the kitchen. The findings are:	C 257		

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

TITLE

(X6) DATE

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C 257	Continued From page 1 Review of the facility's Environmental Health Sanitation report conducted on 10/27/25 revealed: -There were 27 demerits awarded. -There were 3 demerits awarded for floors and carpets clean and in good repair. -There were 2 demerits awarded for illumination of required spaces. -There were 4 demerits awarded for handwashing and bathroom facilities clean and in good repair. -there were 7 demerits awarded for pest control and outdoor premises. -There were 2 demerits for furniture in good repair. -There were 7 demerits for food service utensils and equipment clean and in good repair. -there were 2 demerits awarded for vomitus and diarrheal clean up supplies written plan availability. Observation of the kitchen on 04/17/26 at 10:32am revealed: -There was a side-by-side refrigerator/freezer in the kitchen. -There were was a black plastic bag containing white powder that was not dated or labeled and was unsecured and open to air with the white powder coated on the outside of the bag. -There were three plastic storage containers stacked on top of each other on the top shelf not dated or labeled. -The top container contained a white powder, the second contained sliced vegetables and the bottom contained whole potatoes. -On the second shelf, there was a plastic container of beans with secured lid that was not dated or labeled, a plastic storage bowl with secured lid that was not dated or tabled and a plastic bowl containing a piece of smoked sausage that was not dated or labeled and there	C 257		

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C 257	Continued From page 2 was no covering or lid and was open to air. -There was a plastic storage container that was not dated or labeled and the lid was unsecured and open to air on the third shelf of the refrigerator containing mashed sweet potatoes. -There was a paper plate wrapped in aluminum foil on top of a second plastic storage container with a secured lid on the third shelf; neither were dated or labeled. -The freezer side contained two zip closure storage bags with meat and a zip closure storage bag containing pastry strips that were not dated or labeled. -There were two cans of peach pie filling with best by dates of 08/04/22 and 07/02/21 and a can of crushed pineapple with a best by date of 12/26/23 stored in a cabinet along the back wall of the facility. -There was a second cabinet that contained a box of corn muffin mix with a best by date of 07/18/24, a box of ready to prepare rice mix, with a best by date on 11/16/21, three boxes of breading mix with best buy dates of 06/07/22, 03/30/21 and 07/22/24. Observation of a stand up freezer located in the dining room on 04/17/26 at 10:52am revealed there were 24 bags of meat in zip closure storage bags that were not dated or labeled. Interview with the Supervisor-in-Charge (SIC) on 04/17/26 at 10:55am revealed: -He sent the Administrator a grocery list and the Administrator ordered the groceries which were delivered to the facility by a big box chain grocery store. -He was responsible for the storage of food items when they were delivered and storing leftover food after he cooked. -He was not aware food that was not stored in its	C 257		

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C 257	Continued From page 3 original package needed to be dated and labeled. -He went through the cabinets monthly when the groceries were delivered but he did not use those particular cabinets for storage and did not go through them. -The items in those cabinets were left by a previous employee. -He did not use the items in the cabinet and was not aware the items had expired. Telephone interview with the Administrator on 04/17/26 at 12:46pm revealed: -The SIC was responsible for storage of food when groceries were delivered and after meals were served. -She was not aware the SIC did not know how to properly store food items.	C 257		
C 415	10A NCAC 13G .1201 (a) Resident Records 10A NCAC 13G .1201 Resident Records (a) The following shall be maintained on each resident in an orderly manner in the resident's record in the adult care home and made available for review by representatives of the Division of Health Service Regulation and county departments of social services: (1) FL-2 or MR-2 forms and the patient transfer form or hospital discharge summary, when applicable; (2) Resident Register; (3) receipt for the following as required in Rule .0704 of this Subchapter: (A) contract for services, accommodations and rates; (B) house rules as specified in Rule .0704(a)(2) of this Subchapter; (C) Declaration of Residents' Rights (G.S.	C 415		

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C 415	Continued From page 4 131D-21); (D) the home's grievance procedures; and (E) civil rights statement; (4) resident assessment and care plan; (5) contacts with the resident's physician, physician service or other licensed health professional as required in Rule .0902 of this Subchapter; (6) orders or written treatments or procedures from a physician or other licensed health professional and their implementation; (7) documentation of immunizations against influenza virus and pneumococcal disease according to G.S. 131D-9 or the reason the resident did not receive the immunizations based on this law; and (8) the Adult Care Home Notice of Discharge and Adult Care Home Hearing Request Form if the resident is being or has been discharged. When a resident leaves the facility for a medical evaluation, records necessary for that medical evaluation such as Subparagraphs (1), (4), (5), (6) and (7) above may be sent with the resident. This Rule is not met as evidenced by: Based on interviews and record reviews, the facility failed to ensure that residents' records were available and accessible in the facility for 3 of 3 sampled residents (#1, #2, #3). The findings are: 1. Review of Resident #1's current FL-2 dated 05/19/25 revealed: -Diagnoses included schizoaffective disorder-bipolar type and intellectual disability. -She was ambulatory and there was no	C 415		

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C 415	Continued From page 5 information documented for orientation. Review of Resident #1's Resident Register revealed she was admitted on 06/02/20. Review of Resident #1's current Care Plan dated 05/19/25 revealed: -The resident occasionally had inappropriate and disruptive behaviors. -The resident received mental health services. Review of Resident #1's record revealed there were no mental health provider notes available. Refer to attempted interview with the facility's contracted mental health provider on 04/17/26 at 9:40am. Refer to interview with the Supervisor-in-Charge (SIC) on 04/17/26 at 9:21am. Refer to telephone interview with the Administrator on 04/17/26 at 9:25am. Refer to second telephone interview with the Administrator on 04/17/26 at 12:46pm. 2. Review of Resident #2's current FL-2 dated 09/28/25 revealed: -Diagnoses included small bowel obstruction, bipolar disorder and sinus tachycardia. -She was ambulatory and and intermittently disoriented. Review of Resident #2's Resident Register revealed she was admitted on 08/01/21. Review of Resident #2's current Care Plan dated 07/24/25 revealed: -The resident required reminders to initiate and	C 415		

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C 415	Continued From page 6 complete personal care. -The resident received mental health services. Review of Resident #2's record revealed there were no mental health provider visit notes. Refer to attempted interview with the facility's contracted mental health provider on 04/17/26 at 9:40am. Refer to interview with the Supervisor-in-Charge (SIC) on 04/17/26 at 9:21am. Refer to telephone interview with the Administrator on 04/17/26 at 9:25am. Refer to second telephone interview with the Administrator on 04/17/26 at 12:46pm. 3. Review of Resident #3's current FL-2 dated 02/02/26 revealed: -Diagnoses included schizophrenia, paranoid type. -She was ambulatory and there was no information documented for orientation. Review of Resident #3's Resident Register revealed she was admitted on 10/14/19. Review of Resident #3's current Care Plan dated 02/02/26 revealed: -The resident was resistive to care and required encouragement to adhere to treatment plan. -The resident received mental health services. Review of Resident #3's record revealed there were no mental health provider visit notes. Refer to attempted interview with the facility's contracted mental health provider on 04/17/26 at	C 415		

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C 415	Continued From page 7 9:40am. Refer to interview with the Supervisor-in-Charge (SIC) on 04/17/26 at 9:21am. Refer to telephone interview with the Administrator on 04/17/26 at 9:25am. Refer to second telephone interview with the Administrator on 04/17/26 at 12:46pm. Attempted telephone interview with the facility's contracted mental health provider on 04/17/26 at 9:40am was unsuccessful. Interview with the Supervisor-in-Charge (SIC) on 04/17/26 at 9:21am revealed he had a list of appointment dates and times for residents but did not have access to all resident visit notes because he thought they were confidential. Telephone interview with the Administrator on 04/17/26 at 9:25am revealed: -The health care providers only provided after visit summaries when they were requested. -All residents received mental health services monthly. -There were no mental health visits in the charts and the staff only had access to appointment dates. -The mental health provider's office was closed on 04/17/26 and she would not be able to get the residents' provider contacts from the mental health provider's office. Second telephone interview with the Administrator on 04/17/26 at 12:46pm revealed: -She was aware provider visits needed to be maintained on the the residents' records. -She kept some visit notes "locked up" and staff	C 415		

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C 415	Continued From page 8 did not have access to those because they did not need to know everything that was going on with the residents and mental health notes were personal.	C 415			