

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: FCL081052	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 08/06/2025
NAME OF PROVIDER OR SUPPLIER LISA'S FAMILY CARE HOME # 3		STREET ADDRESS, CITY, STATE, ZIP CODE 149 REID STREET FOREST CITY, NC 28043		
(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 08/06/25.	C 000	We acknowledge that Lisa's FCH#3 did not complete the Registry as expected and did not provide as many activities for our residents as originally planned. To address these issues, we held a meeting with management and staff to identify improvements. As a result, we have appointed a new Activity Director who will be responsible for coordinating and implementing resident programs in the best interests of our residents, as well as overseeing the completion of admission paperwork.	8/25/2025
C 218	10A NCAC 13G .0704 (b) Resident Contract, Information on Facility 10A NCAC 13G .0704 Resident Contract, Information On Facility, and Resident Register (b) A family care home's administrator or supervisor-in-charge and the resident or the resident's responsible person shall complete and sign the Resident Register initial assessment within 72 hours of the resident's admission to the facility in accordance with G.S. 131D-2.15. The facility shall involve the resident in the completion of the Resident Register unless the resident is cognitively unable to participate. The Resident Register shall consist of the following: (1) resident's identification information including the resident's name, date of birth, sex, admission date, medical insurance, family and emergency contacts, advanced directives, and physician's name and address; (2) resident's current care needs including activities of daily living and services, use of assistive aids, orientation status; (3) resident's preferences including personal habits, food preferences and allergies, community involvement, and activity interests; (4) resident's consent and request for assistance including the release of information, personal funds management, personal lockable space, discharge information, and assistance with personal mail; (5) name of the individual identified by the resident who is to receive a copy of the notice of discharge per G.S. 131D-4.8; and (6) resident's consent including a signature	C 218		

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

STATE FORM

Alex Dimovetskiy

TITLE

Administrator

(X5) DATE

8/22/2025

2023

BQSD11

If continuation sheet 1 of 3

AS

Reviewed and Acknowledged 08/25/25

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C 218	<p>Continued From page 1</p> <p>confirming the review and receipt of information contained in the form.</p> <p>The Resident Register is available on the internet website, https://info.ncdhhs.gov/dhsr/acls/pdf/resregister.pdf, at no charge. The facility may use a resident information form other than the Resident Register as long as it contains same information as the Resident Register. Information on the Resident Register shall be kept updated and maintained in the resident's record.</p> <p>This Rule is not met as evidenced by: Based on record reviews and interviews, the facility failed to ensure the Resident Register was completed within 72 hours of admission to the facility for 3 of 3 sampled residents (#1, #2, and #3).</p> <p>The findings are:</p> <p>1. Review of Resident #1's current FL2 dated 05/14/25 revealed diagnoses included neurocognitive disorder, bipolar disorder, diabetes type 2, and schizoaffective disorder.</p> <p>Review of Resident #1's Resident Register revealed: -Resident #1 was admitted to the facility on 09/13/20. -The Resident Register had not been signed or dated by the Administrator or the Supervisor-In-Charge (SIC) or by the Resident or their responsible party.</p> <p>Based on observations, interviews, and record</p>	C 218	<p>Management and SIC convened a meeting to review compliance matters. To ensure adherence to regulations, we developed a resolution aimed at correcting any paperwork discrepancies and streamlining our registration procedures. These improvements will enhance operational efficiency while also supporting the well-being of our residents by ensuring full compliance with state requirements.</p> <p>As upon admission of new residents a SIC did not quite understand all procedure of paperwork and did not signed Registry as he/she was explained. New meeting was hold to reassure that all questions need to be adhere and recorded on a Registry upon amission within 72 hours, recorted and submitted to Administrator.</p>	08/22 /2025

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C 218	<p>Continued From page 2</p> <p>reviews it was determined Resident #1 was not interviewable.</p> <p>Refer to the interview with the SIC on 08/06/25 at 12:45pm.</p> <p>Refer to the interview with the Administrator on 08/06/25 at 12:55pm.</p> <p>2. Review of Resident #2's recent FL2 dated 05/14/25 revealed diagnoses of schizoaffective disorder, type 2 diabetes, hyperlipidemia, gastroesophageal reflux disorder, asthma, and hypertension.</p> <p>Review of Resident #2 Resident Register revealed: -Resident #2 was admitted to the facility on 06/24/24. -The Resident Register had not been signed or dated by the Administrator or the Supervisor-In-Charge (SIC).</p> <p>Based on observations, interviews, and record reviews it was determined Resident #2 was not interviewable.</p> <p>Refer to the interview with the SIC on 08/06/25 at 12:45pm.</p> <p>Refer to the interview with the Administrator on 08/06/25 at 12:55pm.</p> <p>3. Review of Resident #3's recent FL2 dated 05/14/25 revealed diagnosis of undifferentiated schizophrenia (schizophrenia that does not fit into other specific subtypes like paranoid, disorganized, or catatonic).</p> <p>Review of Resident #3's Resident Register</p>	C 218	<p>C218 Ref Res 2 & 3</p> <p>Management and SIC convened a meeting to review compliance matters. To ensure adherence to regulations, we developed a resolution aimed at correcting any paperwork discrepancies and streamlining our registration procedures. These improvements will enhance operational efficiency while also supporting the well-being of our residents by ensuring full compliance with state requirements.</p> <p>As upon admission of new residents a SIC did not quite understand all procedure of paperwork and did not signed Registry as he/she was explained.</p> <p>New meeting was hold to reassure that all questions need to be adhere and recorded on a Registry upon amission within 72 hours, recorted and submitted to Administrator.</p>	8/22/2025

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C 218	<p>Continued From page 3</p> <p>revealed:</p> <ul style="list-style-type: none"> -Resident #3 was admitted to the facility on 07/15/23. -The Resident Register had not been signed or dated by the Administrator or the Supervisor-In-Charge (SIC). <p>Based on observations, interviews, and record reviews it was determined Resident #3 was not interviewable.</p> <p>Refer to the interview with the SIC on 08/06/25 at 12:45pm.</p> <p>Refer to the interview with the Administrator on 08/06/25 at 12:55pm.</p> <p>Interview with the SIC on 08/06/25 at 12:45pm revealed:</p> <ul style="list-style-type: none"> -He did not know the residents' Registers were not signed and dated. -He was responsible for completing Resident Registers when residents were admitted to the facility. <p>Interview with the Administrator on 08/06/25 at 12:55pm revealed:</p> <ul style="list-style-type: none"> -The SIC was responsible for signing and dating the Resident Registers and making sure the Resident or Responsible Party signed them. -He thought it was an oversight. -He was responsible for reviewing all the paperwork and should have noticed that the Resident Registers were not signed or dated. 	C 218	C218 see page #3	8/22/2025
C 288	<p>10A NCAC 13G .0905(a) Activities Program</p> <p>10A NCAC 13G .0905 Activities Program</p> <p>(a) Each family care home shall develop a</p>	C 288		

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C 288	<p>Continued From page 4</p> <p>program of activities designed to promote the residents' active involvement with each other, their families, and the community.</p> <p>This Rule is not met as evidenced by: Based on observation and interviews, the facility failed to develop and implement an activity program that promoted active involvement for residents who resided in the facility.</p> <p>The findings are:</p> <p>Interview with the Supervisor-in-Charge (SIC) revealed there were 5 residents residing in the facility.</p> <p>Observation of the August 2025 activity calendar posted in the staff office on the wall on 08/06/25 revealed:</p> <ul style="list-style-type: none"> -There were 14 hours of activities scheduled for each week. -Activities included church, movies and snacks, arts and crafts, games, anger management and communication/purpose of life. <p>Interview with a resident on 08/06/25 at 8:25am revealed:</p> <ul style="list-style-type: none"> -He had been at the facility for around 5 months. -They did not have any activities to do during the day. -He was bored and wanted things to do. -He watched movies on his own in his free time. <p>Interview with a second resident on 08/06/25 at 8:40am revealed:</p> <ul style="list-style-type: none"> -He had lived at the facility for 2 years. -He was bored because they did not offer any activities during the day. -He would engage in activities if they offered 	C 288	<p>C 288</p> <p>During our meeting on improving activities for residents, the following points were addressed:</p> <p>We recognized that we did not provide as many activities as initially anticipated, and many residents were unsure of what activities were available.</p> <p>Some activities were offered, including group conversations on anger management and life purpose, outings to the store and local restaurants, participation in church services which some residents participated, and recreational options such as TV and newly installed PlayStation games in the dining area (with two controllers provided for group play).</p>	08/22/2025	

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C 288	Continued From page 5 some. -He did his own thing on his computer. Interview with the SIC on 08/06/25 at 8:45am revealed: -It was his responsibility to engage residents in activities. -He had played card games and board games with them in the past. -It had been about 2 weeks since he did anything with the residents. -The residents often refused to engage in group activities. Interview with the Administrator on 08/06/25 at 12:55pm revealed: -Residents liked to do things on their own. -They played video games and watched television a lot. -He expected the SIC to engage residents and follow the scheduled activities. -He did not know activities were not taking place. -When he had heard complaints from residents in the past, they usually would not tell him what they would like to do. -If residents told him what they wanted to do, he would make sure they got things, such as games and video games which he had purchased for them in the past.	C 288	As a result of these discussions, we appointed a new Activity Director to better coordinate and implement programs in the best interests of our residents. An Activities Calendar has been posted in a visible location so all residents can stay informed, and additional games have been provided. Residents are now beginning to understand the concept of structured activities and can see them clearly listed on the calendar.	08/22/ 2025
C 291	10A NCAC 13G .0905 (c) Activities Program 10A NCAC 13G .0905 Activities Program (c) The activity director shall: (1) use information on the residents' interests and capabilities as documented upon admission and updated as needed to arrange for or provide planned individual and group activities for the residents, taking into account the varied interests,	C 291		

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C 291	<p>Continued From page 6</p> <p>capabilities, and possible cultural differences of the residents;</p> <p>(2) prepare a monthly calendar of planned group activities in a format that is legible and shall be posted in a location accessible to residents by the first day of each month, and updated when there are any changes;</p> <p>(3) involve community resources, such as recreational, volunteer, and religious organizations, to enhance the activities available to residents;</p> <p>(4) evaluate and document the overall effectiveness of the activities program at least every six months with input from the residents to determine what have been the most valued activities and to elicit suggestions of ways to enhance the program;</p> <p>(5) encourage residents to participate in activities; and</p> <p>(6) assure there are supplies necessary for planned activities, supervision, and assistance to enable each resident to participate. Aides and other facility staff may be used to assist with activities.</p> <p>This Rule is not met as evidenced by: Based on observations and interviews, the facility failed to post an activity calendar for 5 residents residing at the facility to have the opportunity to view upcoming activity events.</p> <p>The findings are:</p> <p>Observations made on 08/06/25 at 8:45am revealed: -There was an activity calendar for August 2025</p>	C 291	<p>C 291</p> <p>As a result of these meetings, we appointed a new Activity Director to better coordinate and implement programs in the best interests of our residents. In addition, regular meetings with residents will be held to gather their input and suggestions for new activities beyond those already listed on the Activities Calendar.</p> <p>An Activities Calendar has been posted in a visible location so residents can easily stay informed. Additional games have also been provided, and residents are beginning to better understand the concept of structured activities as they see them clearly outlined on the calendar.</p> <p>All activities are now documented in the Activities Calendar and submitted weekly to the Administrator, accompanied by supporting records and photos.</p>	08/22/ 2025

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C 291	<p>Continued From page 7</p> <p>located in the staff office on the wall. -There was no activity calendar posted where the residents could view.</p> <p>Interview with the Supervisor-in-Charge (SIC) on 08/06/25 at 8:45am revealed: -The calendar was in the staff office. -He was not sure why the calendar was not posted for the residents to view.</p> <p>Interview with the Administrator on 08/06/25 at 8:55am revealed: -It was the responsibility of the SIC to complete the monthly activity calendar. -The activity calendar was posted in the staff office. -They did not display the calendar for the residents to see because they often would take it off the wall and it would go missing. -He was aware that residents should be able to view the activity calendar.</p>	C 291	<p>C 291</p> <p>An additional copy of the Activities Calendar has been provided as a backup in case the original is damaged or misplaced</p>	08/22/2025	