

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL020-009	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED R 03/04/2025
NAME OF PROVIDER OR SUPPLIER PLEASANT VALLEY GROUP HOME		STREET ADDRESS, CITY, STATE, ZIP CODE 33 GENTLE DOVE LANE MURPHY, NC 28906		
(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
V 000	INITIAL COMMENTS An annual and follow up survey was completed on 3/4/25. Deficiencies were cited. This facility is licensed for the following service category: 10A NCAC 27G .5600C Supervised Living for Adults with Developmental Disabilities. This facility is licensed for 6 and currently has a census of 5. The survey sample consisted of an audit of 3 current clients.	V 000		
V 114	27G .0207 Emergency Plans and Supplies 10A NCAC 27G .0207 EMERGENCY PLANS AND SUPPLIES (a) Each facility shall develop a written fire plan and a disaster plan and shall make a copy of these plans available to the county emergency services agencies upon request. The plans shall include evacuation procedures and routes. (b) The plans shall be made available to all staff and evacuation procedures and routes shall be posted in the facility. (c) Fire and disaster drills in a 24-hour facility shall be held at least quarterly and shall be repeated for each shift. Drills shall be conducted under conditions that simulate the facility's response to fire emergencies. (d) Each facility shall have a first aid kit accessible for use.	V 114		

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

TITLE

(X6) DATE

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V 114	Continued From page 1 This Rule is not met as evidenced by: Based on record review and interviews, the facility failed to hold fire and disaster drills on each shift at least quarterly. The findings are: Review on 3/3/25 of disaster drills revealed: -There was no documentation of disaster drills having been conducted on 1st or 2nd shifts in the quarter from October-December 2024. Interview on 3/3/25 with Client #1 revealed: -"Go out to the driveway for fire drills. Don't have disaster drills." Interview on 3/3/25 with Client #2 revealed: -"Go outside to end of driveway for fire drills once a month." -"We had a real tornado ...we went to the bathroom ...put a mattress on the floor ...I didn't sleep all night." Interview on 3/3/25 with the Director/Qualified Professional revealed: -The House Manager was responsible for scheduling fire and disaster drills. -Will create a master schedule to make sure drills are completed as required.	V 114		
V 118	27G .0209 (C) Medication Requirements 10A NCAC 27G .0209 MEDICATION REQUIREMENTS (c) Medication administration: (1) Prescription or non-prescription drugs shall only be administered to a client on the written order of a person authorized by law to prescribe drugs. (2) Medications shall be self-administered by clients only when authorized in writing by the	V 118		

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STATE FORM

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V 118	<p>Continued From page 3</p> <p>-Physician ordered medication on 5/29/24 included: -Cetirizine 10 milligrams (mg) (allergies) 1 tablet daily.</p> <p>Review on 3/3/25 of Client #1's MARs for period 12/1/24-2/28/25 revealed: -Cetirizine was not documented as administered on 1/31/25.</p> <p>Review on 3/3/25 of Client #2's record revealed: -Date of Admission: 12/1/93. -Diagnoses: Mild IDD, Depression. -Physician ordered medications included: -Fluticasone 50 micrograms (mcg) (allergies) 2 sprays each nostril daily ordered 7/25/24. -Cetirizine 10mg (allergies) 1 tablet daily ordered 4/12/24. -Atorvastatin 20mg (high cholesterol) 1 tablet daily ordered 8/1/24.</p> <p>Review on 3/3/25 of Client #2's MARs for period 12/1/24-2/28/25 revealed: -Fluticasone was not documented as administered on 1/31/25. -Cetirizine was not documented as administered on 1/31/25. -Atorvastatin was not documented as administered on 1/31/25.</p> <p>Review on 3/3/25 of Client #3's record revealed: -Date of Admission: 8/26/94. -Diagnoses: Moderate IDD, Autism Spectrum Disorder, Auto-immune-Anemia, Type II Diabetes. -Physician ordered medication on 5/29/24 included: -Cetirizine 10mg (allergies) 1 tablet daily ordered 3/1/24. -Metformin 500mg (diabetes) 2 tablets twice</p>	V 118		

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V 118	<p>Continued From page 4</p> <p>daily ordered 12/5/23. -Prednisone 2.5mg (low hemoglobin) 1 tablet daily ordered 1/25/24. -Prednisone 5mg (low hemoglobin) 1 tablet daily ordered 1/25/24.</p> <p>Review on 3/3/25 of Client #3's MARs for period 12/1/24-2/28/25 revealed: -Cetirizine was not documented as administered on 1/31/25. -Metformin was not documented as administered on 1/31/25. -Prednisone 2.5mg was not written on the MAR. -Prednisone 5mg was not written on the MAR. -Prednisone 7.5mg was not documented as administered on 1/31/25.</p> <p>Observation on 3/3/25 of medication for Client #3 revealed: 1 bottle of Prednisone 2.5mg tablets dispensed on 1/25/25 and 1 bottle of Prednisone 5mg tablets dispensed on 1/25/25.</p> <p>Interview on 3/3/25 with Client #1 revealed: -"...take 1 pill every day." -Never missed any medications.</p> <p>Interview on 3/3/25 with Client #2 revealed: -"...take medications but can't pronounce the names." -"Always get meds (medications)."</p> <p>Interview on 3/3/25 with Client #3 revealed: -"...I take Jardiance, prednisone for my blood disorder, metformin, nose drops, ear drops ..."</p> <p>Interview on 3/3/25 with the House Manager (HM) revealed: -Had pulled the January MARs out of the book</p>	V 118		

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V 118	<p>Continued From page 5</p> <p>without completing the month. "It was on a Friday ...it was me ...just didn't pay attention....I'm sure they got their meds."</p> <p>Interview on 3/3/25 with the Director/Qualified Professional revealed:</p> <ul style="list-style-type: none"> -He or the HM were responsible for typing the MARs. -Was not aware he couldn't combine 2 different strengths of the same medication onto 1 line on the MAR. -Immediately corrected the MAR with a separate line for each strength of the prednisone. Would inform all staff of the change on the MAR. <p>Due to the failure to accurately document medication administration, it could not be determined if clients received their medications as ordered by the physician.</p> <p>This deficiency constitutes a recite deficiency and must be corrected within 30 days.</p>	V 118			