

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL033-139	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 05/07/2025
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NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE

BETTER DAYS AHEAD OF ROCKY MOUNT INC

**1108 DELPHIA DRIVE
ROCKY MOUNT, NC 27801**

(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
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V 000 INITIAL COMMENTS

V 000

An annual survey was completed on 5/7/25.
Deficiencies were cited.

This facility is licensed for the following service
category: 10A NCAC 27G .5600C Supervised
Living for Adults with Developmental Disability.

This facility is licensed for 3 and has a current
census of 3. The survey sample consisted of
audits of 3 current clients.

V 118 27G .0209 (C) Medication Requirements

V 118

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
client's physician.

(3) Medications, including injections, shall be
administered only by licensed persons, or by
unlicensed persons trained by a registered nurse,
pharmacist or other legally qualified person and
privileged to prepare and administer medications.

(4) A Medication Administration Record (MAR) of
all drugs administered to each client must be kept
current. Medications administered shall be
recorded immediately after administration. The
MAR is to include the following:

(A) client's name;

(B) name, strength, and quantity of the drug;

(C) instructions for administering the drug;

(D) date and time the drug is administered; and

(E) name or initials of person administering the
drug.

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DHSR-MH Licensure Sect

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

TITLE

(X6) DATE

STATE FORM

8809

Y8EK11

If continuation sheet 1 of 5

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V 118 Continued From page 1

V 118

(5) Client requests for medication changes or checks shall be recorded and kept with the MAR file followed up by appointment or consultation with a physician.

This Rule is not met as evidenced by:
Based on observation, record review, and interview the facility failed to ensure medications were administered as prescribed for 1 of 3 clients (#3). The findings are:

Review on 4/29/25 of client #3's record revealed:

- admitted 5/13/99
- diagnoses: Mild Mental Retardation, Adjustment Disorder with Anxiety, Schizoaffective Disorder, Insomnia
- FL2 signed by doctor dated 10/14/24:
- "Olanzapine 10 milligrams (mg) 2 times daily" (schizoaffective disorder)

Review on 4/29/25 of client #3's MARs revealed:

- Olanzapine 10mg Take 1 tablet by mouth twice daily
- documented as administered twice daily every day for the months of February, March, and April 2025

Observation on 4/29/25 at approximately 3:45pm of client #3's medications revealed:

- blister pack with white oval shaped tablets
- tablets had markings of 7.5 on one side and 0165 on the other
- 6 pills missing from blister pack
- pharmacy label: Olanzapine 7.5 mg Take one

Medication Administration . Areas covered were how medications are Administered, the company policy on checking medication received against physician orders, correct storage of medications, proper way to document medications, disposing of expired and /or discontinued medication and how to handle any medications discrepancies and/or medication errors. Group Home Manager , Qualified Professional and Administrative Assistant will monitor monthly

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V 118	Continued From page 2 tablet by mouth twice daily Interview on 4/29/25 the Director of Administration reported: - the pharmacy dispensed the incorrect dose - staff was supposed to check the doses on the medications when they arrived at the facility - she would talk with the staff about double-checking all the medications when they arrived	V 118	On 5/28/2025 all staff were retrained in Medication Administration . Areas covered were how medications are Administer, the company policy on checking medication re- ceived against physician orders, correct stor- age of medications, proper way to document medications, disposing of expired and /or discontinued medication and how to handle any medications discrepancies and/or medi- cation errors. Group Home Manager , Quali- fied Professional and Administrative Assis- tant will monitor monthly		
V 736	27G .0303(c) Facility and Grounds Maintenance 10A NCAC 27G .0303 LOCATION AND EXTERIOR REQUIREMENTS (c) Each facility and its grounds shall be maintained in a safe, clean, attractive and orderly manner and shall be kept free from offensive odor. This Rule is not met as evidenced by: Based on observation and interview, the facility was not maintained in a safe, clean, attractive and orderly manner and free from offensive odor. The findings are: Observation on 4/29/25 at approximately 11am revealed: Client #1's bedroom: - 2 out 4 light bulbs were missing from the light fixture on ceiling - multiple empty potato chip bags were on the floor throughout the room - dirty clothes were on the dresser, floor, and chair - 2 empty soda cans, a black mug with a brown substance, a clear glass with a clear liquid, and additional empty potato chip bags were on the	V 736	On 5-1-2025 all light bulbs were replaced. Staff will encourage and assist all clients with cleaning their rooms. All linens and clothes will be washed at least once a week and as needed. Air vents were cleaned and filters changed. The Old door bell panel on the wall was removed. Group Home Manager and Qualified Professional will monitor monthly		

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V 736	<p>Continued From page 3</p> <p>nightstand</p> <p>Client #2's bedroom:</p> <ul style="list-style-type: none"> - 2 out of 4 light bulbs were not working in the light fixture on the ceiling - had a urine smell <p>Client #3's bedroom:</p> <ul style="list-style-type: none"> - 3 out of 4 light bulbs were missing from the light fixture on the ceiling fan <p>Client bathroom:</p> <ul style="list-style-type: none"> - 1 out of 3 lights bulbs were not working on the light fixture above the sink <p>Kitchen:</p> <ul style="list-style-type: none"> - there were two long circular cracks in the storage door <p>Hallway:</p> <ul style="list-style-type: none"> - the air filter vent was covered with dark gray dusty residue - there was an old doorbell panel on the wall without a cover with inside wires exposed <p>Interview on 4/29/25 staff #1 reported:</p> <ul style="list-style-type: none"> - client #1 didn't like to clean his room and encouragement didn't always work - laundry was done weekly for each client - if the clients' clothes needed washed more often, she washed sooner - she put baking soda on client #2's bed to help with the odor <p>Interview on 5/2/25 the Qualified Professional reported:</p> <ul style="list-style-type: none"> - visited the facility at least once a month - the House Manager reported to him each week about any needs - was responsible for ensuring facility was 		V 736	<p>On 5-1-2025 all light bulbs were re-placed. Staff will encourage and assist all clients with cleaning their rooms. All linens and clothes will be washed at least once a week and as needed. Air vents were cleaned and filters changed. The Old door bell panel on the wall was removed. Group Home Manager and Qualified Professional will monitor monthly</p>	

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V 736 Continued From page 4

V 736

maintained

- maintenance repairs could be daily depending on clients' behaviors
- would ensure all issues were addressed immediately

Interview on 4/29/25 the Director of Administration reported:

- client #1 never wanted to clean his room
- client #1 knocked a hole in the door to the kitchen storage about a week ago
- he destroyed things when he got mad
- would ensure staff washed soiled clothes and sheets immediately

On 5-1-2025 all light bulbs were replaced. Staff will encourage and assist all clients with cleaning their rooms. All linens and clothes will be washed at least once a week and as needed. Air vents were cleaned and filters changed. The Old door bell panel on the wall was removed. Group Home Manager and Qualified Professional will monitor monthly