

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL044-072	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 06/05/2025
NAME OF PROVIDER OR SUPPLIER GRASTY GABLES		STREET ADDRESS, CITY, STATE, ZIP CODE 131 WALNUT ROAD CLYDE, NC 28721		
(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 survey was completed on 6/5/25. Deficiencies were cited. This facility is licensed for the following service category: 10A NCAC 27G .5600F Supervised Living for Alternative Family Living. This facility is licensed for 2 and currently has a census of 1. The survey sample consisted of an audit of 1 current client.	V 000		
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 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.	V 118	Correction: AFL provider will communicate all client's physician's orders with QP who will put them into a MAR and send the MAR to the AFL provider who will review it for accuracy and use it to document all medication administration. The AFL provider will be trained on this process by July 1, 2025. Prevention: The AFL provider will send any update from the client's physician to the QP who will update the MAR and send it to the AFL provider. The QP will monitor the MAR monthly for accuracy and discuss/document any discrepancies on the MAR. Monitoring: The MAR will be monitored for accuracy and completion by the QP at the monthly inspections.	7/1/2025

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

TITLE

(X6) DATE

STATE FORM

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If continuation sheet 1 of 11

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DHSR-MH Licensure Sect

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V 118	Continued From page 1 (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 record reviews, interviews and observation, the facility failed to ensure medications were administered on the written order of a physician and failed to keep the MAR current affecting 1 of 1 client (#1). Review on 6/3/25 of Client #1's record revealed: -Date of admission: 4/29/18. -Diagnoses: Bipolar I Disorder, Mild Intellectual Developmental Disability, Autistic Disorder, Panic Disorder, Anxiety Disorder, Obstructive Sleep Apnea Syndrome, Iron Deficiency Anemia, Anemia, Vitamin D Deficiency, Neuropathy due to Vitamin B12 deficiency. -Physician's order dated 1/2/25 included: -Cyanocobalamin (Vitamin B12) 1000 micrograms (mcg) (neuropathy due to B12 deficiency)- inject 1 milliliter (ml) intramuscularly every month. -Ergocalciferol (Vitamin D2) 50,000 units (Vitamin D deficiency) - 1 capsule once a week. -There was no physician's order for cholecalciferol (Vitamin D3) 50mcg. -A self-administer order was dated 11/18/21. Review on 6/3/25 of MARs for 4/1/25-6/3/25 for Client #1 revealed: -"Initials of AFL (alternative family living) caregiver	V 118		

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V 118	Continued From page 2 indicate verification of self administration of medication by [Client #1]: to be verified by sight or prompt." -Vitamin B12 was documented as administered 4/15/25, 5/15/25. (2 doses) -Vitamin D2 was documented as administered 4/7/25, 4/14/25, 4/21/25, 4/28/25, 5/4/25, 5/11/25, 5/18/25, 5/25/25. (8 doses) -Vitamin D3 50mcg - "take 1 cap 6 days a week" and was documented as administered 4/1/25-6/3/25. (64 doses) Review on 6/3/25 of medical report of 1/2/25 visit with prescribing physician revealed: -"patient comes in today for continued treatment and assessment of esophageal reflux, neuropathy, irritable bowel syndrome, obstructive sleep apnea intolerant of CPAP (continuous positive airway pressure) and obesity ...We recommend following his iron deficiency and blood count because of iron deficiency but declined labs again today ...He also declined colonoscopypatient declined having his weight performed today ..." Observation on 6/3/25 at approximately 10:30am of Client #1's medications and interview with AFL Provider revealed: -Over the counter (OTC) bottle of Vitamin D3 50mcg with expiration date of 05/2024. -Pharmacy bottle of Vitamin D2 50,000units dispensed on 9/26/24 with 3 pills in bottle. -Baggie from refrigerator with cyanocobalamin (vitamin B12) dispensed on 10/24/24 and 3 small syringes with caps in place. Client #1 refused after two requests to talk with the surveyor. Interview on 6/3/25 with the pharmacist providing	V 118		

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V 118	Continued From page 3 Client #1's medications revealed: -Did not have an order for Vitamin D3 50 mcg. "He (client #1) should not be taking Vitamin D3 daily along with the Vitamin D2 weekly." -The Vitamin B12 vial was last dispensed 10/24/24. "One vial per injection per month." -Vitamin D2 capsules for weekly dose were last dispensed 9/26/24. " ...only 3 doses were dispensed." Interview on 6/4/25 with prescribing physician's nurse revealed: -"Doctor's note dated 6/4/25 ...patient has significant Vitamin D deficiency ...recommend OTC Vitamin D ...(client #1) was trained at some point to give himself injection but that nurse is no longer here ...both Vitamin D and B12 help with weak bones, neuropathy, anemia and dementia ...once his Vitamin D is in normal range he can come off the injection." -She could not determine by looking in the record that both OTC Vitamin D3 daily and Vitamin D2 weekly were ordered, only seeing the order for the weekly dose. -Last labs taken in Sept 2023 due to refusals. Continued interview on 6/5/25 with prescribing physician's nurse revealed: -Regarding getting the Vitamin D3 daily and Vitamin D2 weekly, the doctor said 'he (Client #1) should be good for a while, we just need to monitor.' Interview on 6/3/25 and 6/4/25 with the AFL Provider revealed: -"[The qualified professional (QP)] came out every month ...looked in the frig, looked at paperwork (medication administration records), checked water pressure ..." -"I watch him (client #1) get 3 pills out in the	V 118		

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V 118	Continued From page 4 morning and 2 at night." "...this morning at 7:30 or 8:00, he had 3 pills in his hand. I watched him put his hand to his mouth and I thought he took them ...he may have thrown them in the trash, I don't know ..." "He used to sign his own initials (on the MAR) but he just stopped about a year ago so I do it now." -When observing Client #1 give himself the injection, "I make sure he wipes off his belly with alcohol and keeps it straight ...goes in slow then wipes off with alcohol again then gives me the syringe and I put in my (sharps) container in my bathroom" -It was years ago. the nurse at the doctor's office taught him how to inject himself. -Client #1 saw the doctor every 6 months. "He gets blood work done then sees the doctor the next week. He doesn't refuse blood work." Interview on 6/4/25 with the QP revealed: -Recently (5/30/25) separated from employment with Licensee. "Did a lot of virtual appointments with [AFL provider]. [AFL provider] had health issues and it was difficult to schedule." -She completed the monitoring checklist over the phone virtually. -She compared the bottles of medications with the MAR. -She asked about changes with physicians, medications or any appointments. "[AFL provider] said 'yes' she had orders for all the meds" Interview on 6/3/25 with the Chief Operations Officer revealed: "Some of our AFLs, type out their own MARs, but we will from now on." "There is now a lock box in the refrigerator."	V 118		

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V 118	Continued From page 5 -He could not find the QP notes to verify that medications in the facility had been monitored. Due to the failure to accurately document medication administration, it could not be determined if clients received their medications as ordered by the physician.	V 118		
V 119	27G .0209 (D) Medication Requirements 10A NCAC 27G .0209 MEDICATION REQUIREMENTS (d) Medication disposal: (1) All prescription and non-prescription medication shall be disposed of in a manner that guards against diversion or accidental ingestion. (2) Non-controlled substances shall be disposed of by incineration, flushing into septic or sewer system, or by transfer to a local pharmacy for destruction. A record of the medication disposal shall be maintained by the program. Documentation shall specify the client's name, medication name, strength, quantity, disposal date and method, the signature of the person disposing of medication, and the person witnessing destruction. (3) Controlled substances shall be disposed of in accordance with the North Carolina Controlled Substances Act, G.S. 90, Article 5, including any subsequent amendments. (4) Upon discharge of a patient or resident, the remainder of his or her drug supply shall be disposed of promptly unless it is reasonably expected that the patient or resident shall return to the facility and in such case, the remaining drug supply shall not be held for more than 30 calendar days after the date of discharge.	V 119	Correction: The AFL provider will check all the client's medications for expiration and dispose of any out of date medications by July 1, 2025. Prevention: The AFL provider will check all client's medications for expiration when dispensing medications. Monitoring: The AFL provider will note the disposal date of any prescription medications that have expired on the MAR that concurs with the date of expiration. The MAR will be monitored for accuracy and completion by the QP at the monthly inspections.	7/1/2025

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V 119	Continued From page 6 This Rule is not met as evidenced by: Based on interviews and observation the facility failed to dispose of medications in a manner that guarded against diversion or accidental ingestion affecting 1 of 1 client (#1). The findings are: Observation on 6/3/25 at approximately 10:30am of Client #1's medications revealed: -Over the counter (OTC) bottle of Vitamin D3 50mcg with expiration date of 05/2024. -OTC bottle of Zyrtec 10mg with expiration date of 12/2024. Client #1 refused after two requests to talk with the surveyor. Interview on 6/5/25 with the prescribing physician's nurse revealed: -Any side effects from taking expired Vitamin D would not be harmful but not give him the full potential of a full dose. Interview on 6/3/25 with the Alternative Family Living (AFL) provider revealed: -"[The qualified professional (QP)] came out every month ...looked in the frig, looked at paperwork (medication administration records), checked water pressure ..." -Client #1 administered his own medications and was responsible for getting refills when necessary. -Was not aware the medication had expired. -Immediately reordered the OTC medication along with prescription refills.	V 119		

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V 119	Continued From page 7 Interview on 6/3/25 with the Chief Operations Officer revealed: -The QPs were required to complete a monthly AFL monitoring checklist which included checking "medication in date." -The assigned QP left employment on 5/30/25 and the checklist documentation could not be located.	V 119		
V 120	27G .0209 (E) Medication Requirements 10A NCAC 27G .0209 MEDICATION REQUIREMENTS (e) Medication Storage: (1) All medication shall be stored: (A) in a securely locked cabinet in a clean, well-lighted, ventilated room between 59 degrees and 86 degrees Fahrenheit; (B) in a refrigerator, if required, between 36 degrees and 46 degrees Fahrenheit. If the refrigerator is used for food items, medications shall be kept in a separate, locked compartment or container; (C) separately for each client; (D) separately for external and internal use; (E) in a secure manner if approved by a physician for a client to self-medicate. (2) Each facility that maintains stocks of controlled substances shall be currently registered under the North Carolina Controlled Substances Act, G.S. 90, Article 5, including any subsequent amendments. This Rule is not met as evidenced by: Based on observation and interviews, the facility	V 120	Correction: The AFL provider will use a lockbox for client's medications stored in the refrigerator by July 1, 2025. Prevention: The AFL provider will use a lockbox for client's medications that need to be stored in the refrigerator. Monitoring: The QP will monitor the use of the lockbox in the refrigerator for any of the client's medications that require refrigeration during the monthly inspections.	7/1/2025

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V 120	Continued From page 8 failed to store medications securely affecting 1 of 1 client (#1). The findings are: Observation on 6/3/25 at approximately 11am as the Alternative Family Living (AFL) provider retrieved an unsecured baggie from the refrigerator. The gallon size baggie revealed a pharmacy labeled bottle of cyanocobalamin (vitamin B12) dispensed on 10/24/24 and 3 small syringes with caps in place. Inside the bottle was a small vial with manufacturer's label of cyanocobalamin. The large baggie had something brown and sticky on the outside and both sides of the baggie. -Physician's order dated 1/2/25 included: Cyanocobalamin (Vitamin B12) 1000 micrograms- inject 1 milliliter intramuscular every month. Client #1 refused to talk with the surveyor after two requests. Interview on 6/3/25 with the pharmacist providing Client #1's medications revealed: -The Vitamin B12 vial was last dispensed 10/24/24. "One vial per injection per month" was dispensed and required refrigeration. Interview on 6/3/25 with the AFL provider revealed: -Was not aware the refrigerated medication also needed to be in a lock boxNo one ever told her that. -One syringe came with the bottle every month. Interview on 6/5/25 with the Chief Operations Officer revealed: -He had personally taken a lock box to the facility on 6/4/25 for the refrigerated medication.	V 120		

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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 record reviews, interviews and observation, the facility failed to maintain the facility in a safe manner. The findings are: Observation on 6/3/25 at approximately 10:15am revealed 2 very large black dogs tethered outside of the facility. Both dogs barked and jumped as this surveyor approached the facility. After entering the facility, there was a small white dog in a kennel in the office area beside the kitchen. A small greyish cat walked by this surveyor while sitting in office area of the home. Review on 6/4/25 of vaccination certificates revealed: -Dog #1 -great dane, 93 pounds -rabies vaccine dated 7/20/21 next vaccination due by 7/20/22. -Dog #2 - miniature poodle, 3 pounds -rabies vaccine dated 4/25/24 next vaccination due by 4/25/25. -There was no vaccination certificate for Dog #3 (great dane). -There was no vaccination certificate for the cat. Review on 6/4/25 of state and county ordinances revealed: -"Pursuant to G.S. 130A-185, every owner of a domestic dog, cat or ferret in North Carolina is required to have their animal currently vaccinated	V 736	Correction: The AFL provider will update the vaccination status of all the animals in the household as per G.S. 130A-185 including scheduling vaccinations for any of the animals in the household to bring their vaccination status current by July 15, 2025. Prevention: The AFL provider will maintain current vaccination status on all present and future animals in the household including the vaccination certificate. Monitoring: The QP will review all vaccination certificates as needed to ensure they are current and advise the AFL provider if an animals vaccination status is coming due.	7/15/2025

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V 736	Continued From page 10 against rabies by four months of age and maintain the animal's current rabies vaccination status throughout the animal's entire lifetime. The owner should retain the original copy of the rabies vaccination certificate, provided by the legally authorized vaccinator as evidence of the animal's current vaccination status. There are no legal waivers or exemptions, rabies vaccinations are required by law for domestic dogs, cats and ferrets in North Carolina." Interview on 6/3/25 with the Alternative Family Living (AFL) Provider revealed: -The cat was 18 years old. -All the animals had all their shots but the paperwork was probably at the Licensee's office. Interview on 6/4/25 with the Chief Operations Officer revealed: -Had received the most recent rabies certificates from the vet and instructed the AFL provider to have the dogs vaccinated as soon as possible. -Was not aware there was also a cat at the facility.	V 736		