

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 07/15/2025
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 34G091		(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED 07/15/2025	
NAME OF PROVIDER OR SUPPLIER LIFE, INC LAVENHAM GROUP HOME				STREET ADDRESS, CITY, STATE, ZIP CODE 3700 LAVENHAM ROAD NEW BERN, NC 28560			
(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) COMPLETION DATE
W 382	<p>DRUG STORAGE AND RECORDKEEPING CFR(s): 483.460(l)(2)</p> <p>The facility must keep all drugs and biologicals locked except when being prepared for administration. This STANDARD is not met as evidenced by: Based on observations and interviews, the facility failed to ensure medications remained locked except when being prepared for administration. The finding is:</p> <p>During medication administration in the home on 7/14/25 at 5:48pm, the Qualified Intellectual Disabilities Professional (QIDP) left the medication administration area in the dining room to retrieve items in the foyer medication storage area. Further observations revealed client #2 was sitting at the dining table with her medications out on the table.</p> <p>During the morning medication administration in the home on 7/15/25 at the 7:25am, Staff C left the administration area to retrieve extra medications from the foyer medication storage area on two separate occasions. Further observations revealed client #2 was sitting at the table with her medications left out.</p> <p>Interview on 7/15/25 with Staff B revealed she is aware she is not to leave medications unattended.</p> <p>Interview on 7/15/25 with the QIDP revealed there is never a time when medications should be left unattended.</p> <p>Interview on 7/15/25 with the facility nurse revealed those administering medications should not leave the immediate area or be where they</p>			W 382			

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

TITLE

(X6) DATE

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

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W 382	Continued From page 1 cannot observe medications that are left unlocked.	W 382			
W 460	<p>FOOD AND NUTRITION SERVICES CFR(s): 483.480(a)(1)</p> <p>Each client must receive a nourishing, well-balanced diet including modified and specially-prescribed diets.</p> <p>This STANDARD is not met as evidenced by: Based on observations, record review, and interviews, the facility failed to ensure 2 of 4 audit clients (#2 and #5) received their specially prescribed diet as indicated. The findings are:</p> <p>A. Observations in the home on 7/14/25 at 6:00pm revealed client #2 serving herself a large portion of pasta with meat sauce, covering 3/4 of her dinner plate and equaling two to three serving sizes. The Qualified Intellectual Disabilities Professional (QIDP) verbally noted that client #2 had too much pasta, and Staff B went to ensure client #2 passed the serving dish without retrieving more. However, client #2 was not directed to remove any of the pasta from her dish and consumed the entire amount.</p> <p>Additional observations in the home on 7/15/25 revealed client #2 had two servings of starches for breakfast. She had a whole blueberry muffin and a serving of Raisin Bran cereal.</p> <p>Review on 7/15/25 of client #2's nutritional evaluation dated 9/10/24 revealed she has had significant weight gain and is prescribed a regular, sugar-free diet. She should have only one starch serving per meal to assist with weight</p>	W 460			

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W 460	<p>Continued From page 2</p> <p>reduction, with single servings of food items. She may have additional servings of non-starchy vegetables.</p> <p>Review on 7/15/25 of the home's dietary posting in the kitchen revealed client #2 should have single servings, one starch serving, and no sugar.</p> <p>Interview on 7/15/25 with Staff B revealed client #2 should have single servings and only one starch serving per meal.</p> <p>Interview on 7/15/25 with the QIDP revealed client #2 should have single servings and only one starch serving per meal.</p> <p>B. Observations in the home on 7/14/25 at 6:00pm revealed client #5 was served and consumed a chopped, raw salad to include lettuce, cucumbers, tomatoes, and cheese. She did not exhibit any issues with eating her salad.</p> <p>Review on 7/14/25 of client #5's Individual Program Plan (IPP), dated 2/25/25, revealed she receives a prescribed regular diet with single portions and no added salt. Raw fruits and vegetables should be avoided.</p> <p>Review on 7/15/25 of client #5's nutritional evaluation, dated 5/26/25, revealed she receives a regular diet with single portions, no added salt, and raw fruits and vegetables should be avoided.</p> <p>Review on 7/15/25 of client #5's occupational therapy (OT) evaluation, dated 9/8/24, revealed she should avoid raw fruits and vegetables due to poor dentition and inability to fully process.</p> <p>Interview on 7/15/25 with Staff B revealed client</p>	W 460			

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W 460	Continued From page 3 #5 should not receive raw fruits and vegetables. Interview on 7/15/25 with the QIDP revealed a substitution should be offered for raw fruits and vegetables for client #5.	W 460			