

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL091-108	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 08/12/2025
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NAME OF PROVIDER OR SUPPLIER

STREET ADDRESS, CITY, STATE, ZIP CODE

ALPHA RESIDENTIAL SERVICES-MEGAN

**105 MEGAN LANE
HENDERSON, NC 27537**

(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 8/12/25. Deficiencies This facility is licensed for the following service category: This facility is licensed for the following service category: 10A NCAC 27G .5600A Supervised Living for Adults with Mental Illness. This facility is licensed for 5 and has a current census of 4. The survey sample consisted of audits of 3 current clients.	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	V 118	V 118 Staff will continue to administer all medication as prescribed by the doctor's order to reduce the risk of medication error in the home. Monitoring will take place monthly by the QP while reviewing the MAR and reporting the outcome to the Administrator.	8/12/25

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

TITLE

(X6) DATE

STATE FORM

6899

058K11

If continuation sheet 1 of 8

RECEIVED BY
MHL & C 8-25-25

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V 118	<p>Continued From page 1</p> <p>drug. (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.</p> <p>This Rule is not met as evidenced by: Based on record review and interview the facility failed to keep 1 of 3 audited clients (#1) MARs current. The findings are:</p> <p>Review on 8/12/25 of client #1's record revealed:</p> <ul style="list-style-type: none"> - admitted 1/31/19 - diagnoses: Bipolar, Depression, Paranoid Schizophrenia & Attention Deficit Hyperactivity Disorder - physician's orders dated: - 6/10/25 - Estradiol .5mg (milligrams) everyday (estrogen hormone)) - Progesterone 100mg bedtime (8pm) (steroid) - Vyvanse 70mg morning (8am) (ADHD) - Nicotine 21mg bedtime - Aripiprazole 10mg bedtime (antipsychotic) - Fluticasone 50mcg 2 puffs twice day (8am) (8pm) (inflammatory conditions) <p>Review on 8/12/25 of client #1's June 2025 & August 2025 MAR revealed:</p> <ul style="list-style-type: none"> - June 2025 MAR - Estradiol was not documented as administered from 6/1/25 - 6/12/25 - Progesterone was not documented as administered from 6/1/25 - 6/11/25 - August 2025 MAR 	V 118		

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V 118	Continued From page 2 - the Progesterone was initialed at 8am with no documentation as administered from 8/10/25 - 8/11/25 - Vyvanse was not documented as administered 8/11/25 - Nicotine was not documented as administered 8/9/25 - 8/11/25 - Aripiprazole was not documented as administered 8/11/25 - Fluticasone was not documented as administered at 8am (8/6/25 - 8/11/25) & 8pm (8/7/25 - 8/11/25) During interview on 8/12/25 the House Manager (HM) reported: - been at the facility for one week while out the other (HM) was out of the country - the clients received their medications daily - it was hard to see the dates on the pharmacy's MARs & she didn't initial the MARs During interview on 8/12/25 the General Manager/Qualified Professional reported: - had not reviewed the August 2025 MARs for medication errors - did not notice any other medication errors - he planned to speak with the HMs to address the medication errors	V 118		
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:	V 736		

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V 736	<p>Continued From page 3</p> <p>Based on observation and interview the facility was not maintained in a clean, attractive and orderly manner. The findings are:</p> <p>Observation on 8/12/25 at 11:11am of the facility revealed:</p> <ul style="list-style-type: none"> - kitchen dining room: - Linear hole in wall, the length of a pencil - Oval size dent in the wall - kitchen: - island stove missing 4 stove burners - rear outdoor sunroom: siding peeled from around the outside of the sunroom - a hole the size of a quarter in the hallway near the bathroom - client #1's bedroom & bathroom: - carpet: was pink with large white stains in different places - bathroom: after the second flush, the water rose in toilet without proper disposal - client #3's bedroom: - broken 6 drawer dresser with clothes that hung out of it <p>During interview on 8/12/25 the General Manager/Qualified Professional (GM/QP) reported:</p> <ul style="list-style-type: none"> - visited the facility 2 - 3 week - walked through the facility at least twice a month - the Licensee's husband planned to replace client #3's bedroom dresser - he called the plumber about client #1's bathroom toilet last week - client #1 spilled Clorox on her carpet - will remove the stove without the burners <p>During interview on 8/12/25 the Licensee reported:</p> <ul style="list-style-type: none"> - the GM/QP supposed to do environmental 	V 736	<p>V 736 Maintenance/staff will replace, repair and clean the identified areas in the home according to the state regulations. Monitoring will take place monthly by the QP by using the Environmental Assessment Form and reporting the outcome to the Administrator.</p>	9/12/25

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V 736	Continued From page 4 checks & notify maintenance	V 736		
V 752	27G .0304(b)(4) Hot Water Temperatures 10A NCAC 27G .0304 FACILITY DESIGN AND EQUIPMENT (b) Safety: Each facility shall be designed, constructed and equipped in a manner that ensures the physical safety of clients, staff and visitors. (4) In areas of the facility where clients are exposed to hot water, the temperature of the water shall be maintained between 100-116 degrees Fahrenheit. This Rule is not met as evidenced by: Based on observation, review and interview the facility failed to ensure water temperatures were maintained between 100-116 degrees Fahrenheit (F). The findings are: Review on 8/12/25 of the facility's fire and disaster drill book revealed: - month of June 2025 & July 2025 there were documented water temperatures between 114 - 115 degrees Fahrenheit (F) Observation on 8/12/25 at 11:11am of the facility's water temperatures revealed: - the kitchen sink was 120 degrees F - client #1's bathroom temperature 120 degrees F - bathroom in the hallway was 120 degrees F During interview on 8/12/5 client #2 reported: - no issues with water & able to adjust water temperatures	V 752	V 752 Staff will measure water temperature daily to ensure that it meet state standards and prevent the risk of injury to client and other. QP will monitor/coordinate water temperature checks with staff and report to the Administrator the outcome.	8/12/25

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V 752	Continued From page 5 During interview on 8/12/25 client #3 reported: - had no issues with water & able to adjust water temperatures During interview on 8/12/25 client #1 reported: - she liked the water "hot" - it "sterilized" the dishes and liked to "bathe" in hot water During interview on 8/12/25 the House Manager reported: - she been at the facility a week - checked the water temperatures "with her fingers three times a week" - wanted to make sure the water temperature was not too hot that "it will burn them" - does not write the water temperatures down During interview on 8/12/25 the General Manager/Qualified Professional reported: - was not able to locate the water thermometer - he viewed the fire & disaster log book for the water temperatures - would call maintenance to adjust water temperatures	V 752			
V 774	27G .0304(d)(7) Minimum Furnishings 10A NCAC 27G .0304 FACILITY DESIGN AND EQUIPMENT (d) Indoor space requirements: Facilities licensed prior to October 1, 1988 shall satisfy the minimum square footage requirements in effect at that time. Unless otherwise provided in these Rules, residential facilities licensed after October 1, 1988 shall meet the following indoor space requirements: (7) Minimum furnishings for client bedrooms shall include a separate bed, bedding, pillow, bedside	V 774			

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V 774	<p>Continued From page 6</p> <p>table, and storage for personal belongings for each client.</p> <p>This Rule is not met as evidenced by: Based on observation and interview the facility failed to ensure minimum furnishings for a client's bedroom included a separate bed, bedding, pillow, bedside table and storage for personal belongings. The findings are:</p> <p>Observation on 8/12/25 at 11:57am of client #2's bedroom revealed the following:</p> <ul style="list-style-type: none"> - 1 bed & a recliner - a table near the bed that consisted of a: sewing machine, cup of pencils & other miscellaneous items - items that lined the wall: - boxes of artificial fall colored flowers, Christmas ornaments & books - 3 drawer container with miscellaneous items in each drawer - a comforter and luggage set <p>During interview on 8/12/25 client #2 reported:</p> <ul style="list-style-type: none"> - been at the facility 4 or 5 years - had shared a room with 2 different people - 1 went to a nursing home & the other left due to behaviors - she did not sew, the items in her room were considered "junk journaling" <p>During interview on 8/12/25 the General Manager/Qualified Professional reported:</p> <ul style="list-style-type: none"> - been years since client #2 had a roommate - the previous clients' bed and furniture were "hailed away" 	V 774	<p>V 744</p> <p>Maintenance/Staff will replace all required furnishing for the resident in the home to ensure minimum requirements. Monitoring will take place monthly by the QP by using the Environmental Assessment form and reporting the outcome to the Administrator.</p>	9/12/25

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V 774	Continued From page 7 During interview on 8/12/25 the Licensee reported: - was at the facility last month - could not recall if 2 beds were in client #2's bedroom - would replace the bed & furniture in the bedroom	V 774			