

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL093-066</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING: _____	(X3) DATE SURVEY COMPLETED  <b>R</b> <b>08/26/2025</b>
NAME OF PROVIDER OR SUPPLIER  <b>ALIEAH'S PLACE</b>		STREET ADDRESS, CITY, STATE, ZIP CODE <b>119 BYNUM'S PLACE</b> <b>NORLINA, NC 27563</b>		
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V 000	<p><b>INITIAL COMMENTS</b></p> <p>An annual, complaint and follow up survey was completed on 8/26/25. The complaint was unsubstantiated (intake #NC00232449). Deficiencies were cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .5600C Supervised Living for Adults with Developmental Disability.</p> <p>This facility is licensed for 6 and has a current census of 5. The survey sample consisted of audits of 3 current clients.</p>	V 000		
V 118	<p><b>27G .0209 (C) Medication Requirements</b></p> <p><b>10A NCAC 27G .0209 MEDICATION REQUIREMENTS</b></p> <p>(c) Medication administration:</p> <p>(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.</p> <p>(2) Medications shall be self-administered by clients only when authorized in writing by the client's physician.</p> <p>(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.</p> <p>(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:</p> <p>(A) client's name;</p> <p>(B) name, strength, and quantity of the drug;</p> <p>(C) instructions for administering the drug;</p> <p>(D) date and time the drug is administered; and</p>	V 118		

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

TITLE

(X6) DATE

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V 118	<p>Continued From page 1</p> <p>(E) name or initials of person administering the drug.</p> <p>(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 administer medications on the written order of a physician and failed to keep the MARs current for 2 of 3 clients (#2 and #3). The findings are:</p> <p>A. Review on 8/21/25 of client #2's record revealed:</p> <ul style="list-style-type: none"> <li>- admission date: 8/15/23</li> <li>- diagnoses: Autistic Disorder, Major Depressive Disorder, Oppositional Defiant Disorder (ODD)</li> <li>- physicians' orders for: <ul style="list-style-type: none"> <li>- fluoxetine 20 milligrams dated 9/24/24 (mg) take 1 capsule by mouth (po) every morning (depression)</li> <li>- asenapine 2.5 mg dated 7/23/25 take 1 tablet po at bedtime (mania)</li> <li>- omeprazole 40 mg dated 7/29/25 take 1 capsule po twice a day (acid reflux)</li> </ul> </li> </ul> <p>Review on 8/21/25 of client #2's MARs from 6/1/25 - 8/21/25 revealed:</p> <ul style="list-style-type: none"> <li>- fluoxetine had a "5" where staff initials should have been from 8/10/25-8/13/25</li> <li>- asenapine had a "5" where staff initials</li> </ul>	V 118			

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V 118	<p>Continued From page 2</p> <p>should have been on 7/17/25 and 7/19/25-7/23/25 and a blank space on 8/17/25</p> <ul style="list-style-type: none"> <li>- omeprazole had a "5" where staff initials should have been at 7:00 am 7/27/25-7/29/25 and 5:00 pm 7/25/25-7/26/25 and a blank space at 8:00 am on 8/1/25</li> <li>- the legend at the bottom of the MARs indicated that "5" meant "medication not available"</li> <li>- a handwritten note on 8/10/25 "out of his fluoxetine meds (medication) has been called in"</li> </ul> <p>B. Review on 8/21/25 of client #3's record revealed:</p> <ul style="list-style-type: none"> <li>- admission date: 12/10/24</li> <li>- diagnoses: Autism, Attention Deficient Hyperactivity Disorder (ADHD), Apraxia, ODD</li> <li>- physicians' orders for: <ul style="list-style-type: none"> <li>- montelukast 10 mg dated 6/11/25 take 1 tablet po daily (allergies)</li> <li>- guanfacine 1 mg dated 6/10/25 take 1 tablet every night at bedtime (ADHD)</li> <li>- polyethylene glycol dated 12/23/24 take 8 ounces with water once daily (constipation)</li> <li>- oxcarbazepine 300 mg dated 6/10/25 take 1 tablet po twice daily (mood)</li> </ul> </li> </ul> <p>Reviews on 8/21/25 and 8/25/25 of client #3's MARs from 6/1/25-8/21/25 revealed:</p> <ul style="list-style-type: none"> <li>- montelukast had a "D" where staff initials should have been on 6/4/25-6/6/25 and 6/8/25-6/11/25</li> <li>- polyethylene glycol had a "D" where staff initials should have been on 6/1/25-6/6/26 and 6/8/25-6/10/25 and a blank space on 8/19/25</li> <li>- the legend at the top of the MAR indicated that "D" meant "drug not given"</li> <li>- handwritten notes on 6/4/25, 6/5/25, 6/10/25, 6/11/25 for montelukast that said "out of med" and "did not take" with staff #1's initials</li> </ul>	V 118		

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V 118	<p>Continued From page 3</p> <ul style="list-style-type: none"> <li>- blank spaces on 8/19/25 for guanfacine and polyethylene glycol</li> </ul> <p>Attempted interview on 8/21/25 with client #2 was unsuccessful because client refused to answer questions regarding medication</p> <p>Interview on 8/21/25 client #3 reported:</p> <ul style="list-style-type: none"> <li>- he took on time medication daily</li> <li>- no issues with taking medication</li> </ul> <p>Interview on 8/25/25 staff #1 reported:</p> <ul style="list-style-type: none"> <li>- no issues with medication at the facility</li> <li>- did not remember anyone that was unable to get medication due to medication not being at the facility</li> <li>- medication was administered on time to each client daily</li> </ul> <p>Interview on 8/22/25 staff #2 reported:</p> <ul style="list-style-type: none"> <li>- there were no issues at the facility with client medication</li> <li>- no client had ever refused to take medication</li> <li>- "I'm not sure if anyone has ever been out of meds. I can't answer that "</li> </ul> <p>Interview on 8/21/25 the Program Manager reported:</p> <ul style="list-style-type: none"> <li>- the facility had a nurse that was responsible for medication refills</li> <li>- "Between house management and myself, we've been staying on top of medications"</li> <li>- the House Manager called him or the Facility Director/Registered Nurse (FD/RN) when a client only had 5 pills remaining</li> <li>- he or the FD/RN would start working on getting it refilled</li> <li>- the facility pharmacy would not process a refill if there were more than 5 pills remaining</li> <li>- some of the clients had refills that doctors</li> </ul>	V 118		

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V 118	<p>Continued From page 4</p> <p>would not fill until they saw them for an appointment</p> <p>Interview on 8/21/25 the FD/RN reported:</p> <ul style="list-style-type: none"> <li>- the facility went through a pharmacy transition in June 2025</li> <li>- the previous pharmacy used by the facility closed and all of the client orders did not transfer to the new pharmacy</li> <li>- "A lot of scripts (prescriptions) didn't transfer and a lot we are trying to get from the physicians and we've been through a huge thing with that, trying to get through the transfer"</li> <li>- for many of the orders that did not transfer, the physicians have required an appointment for a new order</li> <li>- she had been in constant communication with the pharmacy and providers to notify them of medications that were needing to be refilled or medications that the facility was out of</li> <li>- the blank places on the MARs are staff errors but clients #2 and #3 received their medication on those dates</li> <li>- have a newly staffed part-time nurse that had been training for the past 2-3 weeks</li> <li>- the part-time nurse will visit the facility once a week and check client medication and do a medication audit</li> <li>- she will check expiration dates, pick up medication and take it to the facility, check the MARs for accurate completion</li> <li>- "I'm a nurse, but I'm more administrative and I just can't govern the way I'm supposed to with all the things I have to do"</li> </ul> <p>This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.</p>	V 118		

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V 364	Continued From page 5	V 364			
V 364	<p>G.S. 122C- 62 Additional Rights in 24 Hour Facilities</p> <p>§ 122C-62. Additional Rights in 24-Hour Facilities.</p> <p>(a) In addition to the rights enumerated in G.S. 122C-51 through G.S. 122C-61, each adult client who is receiving treatment or habilitation in a 24-hour facility keeps the right to:</p> <p>(1) Send and receive sealed mail and have access to writing material, postage, and staff assistance when necessary;</p> <p>(2) Contact and consult with, at his own expense and at no cost to the facility, legal counsel, private physicians, and private mental health, developmental disabilities, or substance abuse professionals of his choice; and</p> <p>(3) Contact and consult with a client advocate if there is a client advocate.</p> <p>The rights specified in this subsection may not be restricted by the facility and each adult client may exercise these rights at all reasonable times.</p> <p>(b) Except as provided in subsections (e) and (h) of this section, each adult client who is receiving treatment or habilitation in a 24-hour facility at all times keeps the right to:</p> <p>(1) Make and receive confidential telephone calls. All long distance calls shall be paid for by the client at the time of making the call or made collect to the receiving party;</p> <p>(2) Receive visitors between the hours of 8:00 a.m. and 9:00 p.m. for a period of at least six hours daily, two hours of which shall be after 6:00 p.m.; however visiting shall not take precedence over therapies;</p> <p>(3) Communicate and meet under appropriate supervision with individuals of his own choice upon the consent of the individuals;</p> <p>(4) Make visits outside the custody of the facility</p>	V 364			

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V 364	Continued From page 6  unless: a. Commitment proceedings were initiated as the result of the client's being charged with a violent crime, including a crime involving an assault with a deadly weapon, and the respondent was found not guilty by reason of insanity or incapable of proceeding; b. The client was voluntarily admitted or committed to the facility while under order of commitment to a correctional facility of the Division of Adult Correction of the Department of Public Safety; or c. The client is being held to determine capacity to proceed pursuant to G.S. 15A-1002; A court order may expressly authorize visits otherwise prohibited by the existence of the conditions prescribed by this subdivision; (5) Be out of doors daily and have access to facilities and equipment for physical exercise several times a week; (6) Except as prohibited by law, keep and use personal clothing and possessions, unless the client is being held to determine capacity to proceed pursuant to G.S. 15A-1002; (7) Participate in religious worship; (8) Keep and spend a reasonable sum of his own money; (9) Retain a driver's license, unless otherwise prohibited by Chapter 20 of the General Statutes; and (10) Have access to individual storage space for his private use. (c) In addition to the rights enumerated in G.S. 122C-51 through G.S. 122C-57 and G.S. 122C-59 through G.S. 122C-61, each minor client who is receiving treatment or habilitation in a 24-hour facility has the right to have access to proper adult supervision and guidance. In recognition of the minor's status as a developing	V 364		

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V 364	Continued From page 7  individual, the minor shall be provided opportunities to enable him to mature physically, emotionally, intellectually, socially, and vocationally. In view of the physical, emotional, and intellectual immaturity of the minor, the 24-hour facility shall provide appropriate structure, supervision and control consistent with the rights given to the minor pursuant to this Part. The facility shall also, where practical, make reasonable efforts to ensure that each minor client receives treatment apart and separate from adult clients unless the treatment needs of the minor client dictate otherwise. Each minor client who is receiving treatment or habilitation from a 24-hour facility has the right to: (1) Communicate and consult with his parents or guardian or the agency or individual having legal custody of him; (2) Contact and consult with, at his own expense or that of his legally responsible person and at no cost to the facility, legal counsel, private physicians, private mental health, developmental disabilities, or substance abuse professionals, of his or his legally responsible person's choice; and (3) Contact and consult with a client advocate, if there is a client advocate. The rights specified in this subsection may not be restricted by the facility and each minor client may exercise these rights at all reasonable times. (d) Except as provided in subsections (e) and (h) of this section, each minor client who is receiving treatment or habilitation in a 24-hour facility has the right to: (1) Make and receive telephone calls. All long distance calls shall be paid for by the client at the time of making the call or made collect to the receiving party; (2) Send and receive mail and have access to writing materials, postage, and staff assistance	V 364		



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V 364	Continued From page 8  when necessary; (3) Under appropriate supervision, receive visitors between the hours of 8:00 a.m. and 9:00 p.m. for a period of at least six hours daily, two hours of which shall be after 6:00 p.m.; however visiting shall not take precedence over school or therapies; (4) Receive special education and vocational training in accordance with federal and State law; (5) Be out of doors daily and participate in play, recreation, and physical exercise on a regular basis in accordance with his needs; (6) Except as prohibited by law, keep and use personal clothing and possessions under appropriate supervision, unless the client is being held to determine capacity to proceed pursuant to G.S. 15A-1002; (7) Participate in religious worship; (8) Have access to individual storage space for the safekeeping of personal belongings; (9) Have access to and spend a reasonable sum of his own money; and (10) Retain a driver's license, unless otherwise prohibited by Chapter 20 of the General Statutes. (e) No right enumerated in subsections (b) or (d) of this section may be limited or restricted except by the qualified professional responsible for the formulation of the client's treatment or habilitation plan. A written statement shall be placed in the client's record that indicates the detailed reason for the restriction. The restriction shall be reasonable and related to the client's treatment or habilitation needs. A restriction is effective for a period not to exceed 30 days. An evaluation of each restriction shall be conducted by the qualified professional at least every seven days, at which time the restriction may be removed. Each evaluation of a restriction shall be documented in the client's record. Restrictions on	V 364		

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V 364	<p>Continued From page 9</p> <p>rights may be renewed only by a written statement entered by the qualified professional in the client's record that states the reason for the renewal of the restriction. In the case of an adult client who has not been adjudicated incompetent, in each instance of an initial restriction or renewal of a restriction of rights, an individual designated by the client shall, upon the consent of the client, be notified of the restriction and of the reason for it. In the case of a minor client or an incompetent adult client, the legally responsible person shall be notified of each instance of an initial restriction or renewal of a restriction of rights and of the reason for it. Notification of the designated individual or legally responsible person shall be documented in writing in the client's record.</p> <p>This Rule is not met as evidenced by: Based on observation, record review and interview, the facility failed to review the restriction of access to personal property as required for 1 of 5 clients (#4). The findings are:</p> <p>Review on 2/9/24 of client #5's record revealed:</p> <ul style="list-style-type: none"> <li>- Admitted 10/25/2022</li> <li>- Diagnoses of: Autism, Moderate IDD, and ADHD</li> <li>- A treatment plan that included a history of property destruction, including clothes and toys</li> <li>- No documentation showing client #4's rights restriction was reviewed every 7 days</li> </ul> <p>Attempted interview on 2/13/24 with client #4 was unsuccessful because client #4 was nonverbal</p>	V 364		

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V 364	<p>Continued From page 10</p> <p>Observation on 8/21/24 at approximately 10:52 am revealed</p> <ul style="list-style-type: none"> <li>- a door latch on client #4's bedroom closet door and an unlocked padlock hanging from the latch</li> <li>- lock had to be unhooked from the closet door latch for closet door to be opened</li> </ul> <p>Interview on 8/25/25 staff #1 reported:</p> <ul style="list-style-type: none"> <li>- client #4 did not understand the difference between the padlock being locked or unlocked</li> <li>- "We don't actually lock it, but we keep the latch on to restrict him a little bit"</li> <li>- client #4 would go into the closet and "tear stuff out" without limited access</li> </ul> <p>Interview on 8/22/25 staff #2 reported:</p> <ul style="list-style-type: none"> <li>- Regarding client #4 bedroom closet door, "I don't lock it (the padlock) and I've never seen it locked but I have seen it up there and I've had to unlock it"</li> </ul> <p>Interview on 8/21/25 the Program Manager reported:</p> <ul style="list-style-type: none"> <li>- the padlock was still being utilized on the bedroom closet door for client #4 "to keep him from going inside and tearing up his clothes"</li> <li>- did not realize restricting client #4's access was an issue</li> <li>- "Maybe that's why they didn't close the lock back this morning"</li> </ul> <p>Interview on 8/21/25 the Facility Director/Registered Nurse reported:</p> <ul style="list-style-type: none"> <li>- client #4 would pull the strings on his clothes</li> <li>- the facility was no longer locking client #4's bedroom closet door</li> <li>- the facility just needed to remove the entire latch</li> <li>- was surprised that there was still a padlock</li> </ul>	V 364		

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NAME OF PROVIDER OR SUPPLIER  <b>ALIEAH'S PLACE</b>		STREET ADDRESS, CITY, STATE, ZIP CODE <b>119 BYNUM'S PLACE</b> <b>NORLINA, NC 27563</b>		
(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 364	Continued From page 11  on the latch of the door  Interview on 8/26/25 the Facility Director/Registered Nurse reported: - it was very expensive to continue to replace clothes that client #4 tore up - she would develop a consistent plan with his treatment team to address the behavior moving forward  This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.	V 364		
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 and interview the facility failed to ensure the temperature of the hot water was maintained between 100-116 degrees Fahrenheit. The findings are:  Observation on 8/21/25 at approximately 10:52 am of the facility's hot water temperatures revealed: - kitchen sink was 126 degrees Fahrenheit - client #5's bathroom sink and bathtub were 127 degrees Fahrenheit	V 752		

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V 752	<p>Continued From page 12</p> <ul style="list-style-type: none"> <li>- hallway bathroom sink and bathtub were 120 degrees Fahrenheit</li> </ul> <p>Attempted interview on 8/21/25 with client #1 was unsuccessful because client was non-verbal</p> <p>Attempted interview on 8/21/25 with client #2 about the water temperature at the facility was unsuccessful because client refused to answer questions about water temperatures</p> <p>Interview on 8/21/25 client #3 reported:</p> <ul style="list-style-type: none"> <li>- water temperature at the facility was "good"</li> <li>- "Just right for me"</li> <li>- if the water temperature was too hot, he could adjust it on own or have someone assist him</li> </ul> <p>Interview on 8/25/25 staff #1 reported:</p> <ul style="list-style-type: none"> <li>- water temperature at the facility had not been an issue for any client</li> <li>- he assisted clients #4 and #5 with bathing and had not felt like it was too hot</li> <li>- clients that were able to bathe themselves were able to adjust the water to a comfortable temperature</li> </ul> <p>Interview on 8/22/25 staff #2 reported:</p> <ul style="list-style-type: none"> <li>- water temperature had never been an issue at the facility</li> <li>- he adjusted the water temperature for client #4 before he began bathing</li> <li>- all other clients were able to adjust it on their own and bathe themselves</li> </ul> <p>Interview on 8/21/25 the Program Manager reported:</p> <ul style="list-style-type: none"> <li>- he checked the water temperatures every month</li> <li>- water temperatures at the facility usually were</li> </ul>	V 752		

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V 752	Continued From page 13  around 116 degrees Fahrenheit - he used a water gauge to check the temperatures, but he did not have it with him - for temperature adjustments, he called facility maintenance and someone came to the facility to adjust it quickly - "Will have someone come in and adjust it today"  Interview on 8/26/25 the Facility Director/Registered Nurse reported: - she was not aware that the water temperatures at the facility were above 116 - the Program Manager did not notify her of that - she was going to check that the water temperatures had been adjusted to the correct temperature range	V 752		