

PRINTED: 09/03/2025
FORM APPROVED

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL058-004	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 08/28/2025
NAME OF PROVIDER OR SUPPLIER MARTIN ENTERPRISES, ARC GROUP HOME		STREET ADDRESS, CITY, STATE, ZIP CODE 310 NORTH HAINES STREET WILLIAMSTON, NC 27892	
(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)
V 000	INITIAL COMMENTS An annual survey was completed on 8/28/25. 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 6 and has a current census of 6. The survey sample consisted of audits of 3 current clients.	V 000	
V 108	27G .0202 (F-I) Personnel Requirements 10A NCAC 27G .0202 PERSONNEL REQUIREMENTS (f) Continuing education shall be documented. (g) Employee training programs shall be provided and, at a minimum, shall consist of the following: (1) general organizational orientation; (2) training on client rights and confidentiality as delineated in 10A NCAC 27C, 27D, 27E, 27F and 10A NCAC 26B; (3) training to meet the mh/dd/sa needs of the client as specified in the treatment/habilitation plan; and (4) training in infectious diseases and bloodborne pathogens. (h) Except as permitted under 10a NCAC 27G .5602(b) of this Subchapter, at least one staff member shall be available in the facility at all times when a client is present. That staff member shall be trained in basic first aid including seizure management, currently trained to provide cardiopulmonary resuscitation and trained in the Heimlich maneuver or other first aid techniques such as those provided by Red Cross, the American Heart Association or their equivalence for relieving airway obstruction.	V 108	

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

TITLE

(X6) DATE

STATE FORM

6899

KRIM11

If continuation sheet 1 of 5

RECEIVED BY
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9/12/25

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V 108	Continued From page 1 (i) The governing body shall develop and implement policies and procedures for identifying, reporting, investigating and controlling infectious and communicable diseases of personnel and clients. This Rule is not met as evidenced by: Based on record review and interview, the facility failed to ensure that 3 of 3 audited staff (#1, #2, and the Residential Services Manager) received training to meet the mh/dd/sa needs of the clients. The findings are: Review on 8/28/25 staff #1's record revealed: - Hired: 9/12/18 - Title: Program Assistant - no documentation of mh/dd/sa trainings that included Intellectual Developmental Disability (IDD) Review on 8/28/25 staff #2's record revealed: - Hired: 4/24/08 - Title: Program Assistant - no documentation of mh/dd/sa trainings that included IDD Review on 8/28/25 the Residential Services Manager's revealed: - Hired: 12/1/07 - no documentation of mh/dd/sa trainings that included IDD Interview on 8/28/25 the Residential Services Manager reported: - they didn't do a specific IDD training	V 108	V108-27G.0202 (F1) Personnel Requirement All program Assistant Staff have presently registered to receive (IDD) Intellectual Developmental Disability Training, scheduled for Wednesday, September 17, 2025. Staff will receive a certificate for this training and training updates yearly. Certificates will be filed in staff personnel folders and listed on training log. Residential Services Manager and Personnel Staff will review to ensure this training is done and filed during scheduled times.	9/8/25

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V 108	Continued From page 2 - staff did yearly goals and some staff stated that they wanted to learn about IDD	V 108			
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. (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.	V 118			

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V 118	Continued From page 3 This Rule is not met as evidenced by: Based on record review and interview, the facility failed to ensure that the MAR was kept current affecting 1 of 3 audited clients (#3). The findings are: Review on 8/27/25 client #3's record revealed: - admitted: 4/1/90 - diagnoses: Mental Retardation (Intellectual Disability), Anxiety, Allergic Rhinitis, and Psychosis - physician order dated 7/24/25 revealed: - metronidazole/Flagyl 500 milligram (mg) tablet (tab), 1 tab 2 times daily for 7 days (infection) - cephalexin/Keflex 500mg capsule, 1 capsule 2 times daily for 10 days (infection) - physician order dated 8/7/25 revealed: - fonaladol/Haloperidol 5mg tab, 1 tab every morning (mood) Review on 8/27/25 of client #3's MAR revealed: - three medications handwritten, Generic fokelex 500mg (cephalexin) and Generic foklagyl 500mg (metronidazole) that were both started and initialed on the 25th - 31st, and Generic fonaldol 5mg tab that was started on the 7th - no name, month/year or date for the MAR Interview on 8/27/25 staff #1 reported: - Haloperidol for client #3 was started in August 2025 and should not have been on the same MAR as the antibiotics that were finished in July 2025 - she was responsible for overseeing the new hires when they wrote the new prescriptions for client #3 on the MARs	V 118	V118 10A NCAC-27G 0209 Medication Requirements As noted in Residential Staffing meeting, consumer MAR'S will be reviewed daily by both staff on shift as well as reviewed weekly in staffing meeting with Residential Manager. Staff will ensure that Express Care Pharmacy will continue to do regular drug reviews and staff will notate any issues found. Management will oversee new hire training now with demonstrations on MAR documentation to ensure New Hires are better trained. These rules are in effect immediately.	9/8/25

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V 118	Continued From page 4 - she did not go back and look at the MAR - the other MAR was full and the new hire got the new one out and started writing on that one although the antibiotics that were already listed were started and finished in July 2025 - there should have been a new MAR started for the August 2025 medication for client #3 - the Residential Services Manager also checked over the MARs - confirmed July 2025 and August 2025 medications were on the same MAR without demographic information on it Interview on 8/27/25 staff #2 reported: - both of client #3's antibiotics were started 7/24/25 for 7 days - the new hires wrote the new medications for client #3 on the MAR Interview on 8/28/25 the Residential Services Manager reported: - she periodically checked over MARs when she visited the facility - she must have "missed that one" - a new MAR should have been started for the new month with the new medication	V 118	