

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL076-046	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 09/19/2025
NAME OF PROVIDER OR SUPPLIER HOPE HOUSE		STREET ADDRESS, CITY, STATE, ZIP CODE 836 JOYCE STREET ASHEBORO, NC 27203		
(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 September 19, 2025. A deficiency was 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 3. 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 drug.	V 118		

Division of Health Service Regulation

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

TITLE

(X6) DATE

Division of Health Service Regulation

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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 and interviews, the facility failed to keep the MAR current affecting three of three audited clients (#1, #2 and #3). The findings are: Reviews on 9/18/25 and 9/19/25 of client #1's record revealed: -Admission date of 5/31/23. -Diagnoses of Moderate Intellectual Disability, Schizoaffective Disorder-bipolar type, Autism, Post Traumatic Stress Disorder, Speech Disorder and Attention Disorder Hyperactivity Disorder. -Physician's order dated 7/2/25 for Benztropine 0.5 milligrams (mg) (Involuntary movements), one tablet daily and Trazodone 50 mg (Depression), one tablet at bedtime. -Physician's order dated 3/20/25 for Refresh Gel Optive 10 millileters (ml) (Dry Eyes), one drop twice daily. Review on 9/18/25 of client #1's July 2025 MAR revealed: No staff initials to indicate the medication was administered for the following: -Benztropine 0.5 mg, Trazodone 50 mg and Refresh Gel Optive 10 ml eye drops on 7/13.	V 118		

Division of Health Service Regulation

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V 118	Continued From page 2 Reviews on 9/18/25 and 9/19/25 of client #2's record revealed: -Admission date of 9/14/98. -Diagnoses of Mild Intellectual Disability, Generalized Anxiety Disorder (GAD) and Hypothyroidism. -Physician's order dated 8/6/25 for Chlorthalidone 25 mg (High Blood Pressure), one tablet daily. -Physician's order dated 7/23/25 for Artificial Tears 1-0.2-0.2% (Dry eyes), instill one drop in each eye two times daily - Buspirone 30 mg (GAD), one tablet in the morning and at bedtime - Children's chew multivitamin (Vitamin Deficiency), chew and swallow daily - Levothyroxine 25 micrograms (mcg) (Hypothyroidism), one tablet daily - Loratadine 10 mg (Allergies), one tablet daily - Metoprolol Tartrate 50 mg (Blood Pressure), one tablet twice daily - Olmesartan Medoxomil 40 mg (High Blood Pressure), one tablet twice daily - Pantoprazole 40 mg (Acid Reducer), one tablet daily - PreserVision chew 250 mg-90 mg-40 mg (Age Related Macular Degeneration), one chew twice daily - Vascepa 1 gram (gm) (High Triglycerides), 2 capsules twice daily - Check blood pressure twice daily - Fluticasone 50 mcg (Allergies), instill 2 sprays into each nostril daily -Physician's order dated 7/22/25 for Carbamazepine 200 mg (Bipolar Disorder), 2 tablets in the morning and at bedtime, one tablet at 4pm. Review on 9/18/25 of the MARs for client #2 revealed:	V 118		

Division of Health Service Regulation

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V 118	Continued From page 3 August 2025- No staff initials to indicate the medication was administered for the following: -Chlorthalidone 25 mg on 8/9, 8/10 and 8/24 am doses. -Artificial Tears 1-0.2-0.2% on 8/9, 8/10, 8/24 and 8/25 am doses. -Buspirone 30 mg on 8/9, 8/10 and 8/24 am doses. -Children's chew multivitamin on 8/9, 8/10 and 8/24 am doses. -Levothyroxine 25 mcg on 8/9, 8/10 and 8/24 am doses. -Loratadine 10 mg on 8/9, 8/10 and 8/24 am doses. -Metoprolol Tartrate 50 mg on 8/7, 8/9, 8/10, 8/24 and 8/30 am doses. -Olmesartan Medoxomil 40 mg on 8/9, 8/10 and 8/24 am doses. -Pantoprazole 40 mg on 8/9, 8/10 and 8/24 am doses. -PreserVision chew 250 mg-90 mg-40 mg on 8/9, 8/10 and 8/24 am doses. -Vascepa 1 gm on 8/9, 8/10 and 8/24 am doses. -Check blood pressure on 8/9, 8/10, 8/24 and 8/30 am checks. -Fluticasone 50 mcg on 8/9, 8/10 and 8/24 am doses. July 2025- No staff initials to indicate the medication was administered for the following: -Carbamazepine 200 mg on 7/22. Reviews on 9/18/25 and 9/19/25 of client #3's record revealed: -Admission date of 8/1/25. -Diagnoses of Autistic Disorder, Traumatic Brain Injury, Obsessive Compulsive Disorder and GAD.	V 118		

Division of Health Service Regulation

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V 118	Continued From page 4 -Physician's order dated 8/14/25 for Omeprazole 20 mg (Gastroesophageal Reflux Disease), one capsule daily. Review on 9/18/25 of client #3's September 2025 MAR revealed: No staff initials to indicate the medication was administered for the following: -Omeprazole 20 mg on 9/1 thru 9/17. Interview on 9/19/25 with client #3 revealed: -She was familiar with the medication she took daily. - "I take Omeprazole for my reflux issues." - "I take that medication daily." - "There were no issues with my medication." Interview on 9/19/25 with the Registered Nurse revealed: -The Residential Manager's were responsible for putting orders into the medication administration online system. - "If a staff didn't see the Omeprazole listed on [client #3's] September 2025, they should have said something to me or a Manager." Interviews on 9/18/25 and 9/19/25 with the Residential Manager revealed: -The clients get their prescribed medications daily. - "Staff just didn't document that [client #1] was given medication on her MARs." -Client #1 was not out of the facility on those days. -Client #2 was on a home visit during the times staff that document her MAR. -The Omeprazole for client #3 was filled by the pharmacy in August 2025. -Staff administered the Omeprazole to client #3.	V 118		

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V 118	Continued From page 5 - "We had several staff work at this facility and staff possibly didn't realize the Omeprazole was not listed on the MAR." - The Residential Managers were responsible for putting medication orders into the system for the medication administration record. - Staff never brought it to her attention that Omeprazole was not listed on the September MAR for client #3. - She confirmed the MARs were not kept current for clients #1, #2 and #3. Interview on 9/18/25 with the Residential Team Leader #1 revealed: - Client #2's MARs had blank boxes because she was away from the facility. - "I didn't realize they were still blank." - "I thought I went back in and put Leave of Absence (LOA) on those days." - "I made the corrections, but the system erased those days." - She confirmed the MARs were not kept current for clients #1, #2 and #3.	V 118		