

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL020-006</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING: _____	(X3) DATE SURVEY COMPLETED  <b>R</b> <b>03/10/2026</b>
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NAME OF PROVIDER OR SUPPLIER  <b>PLEASANT HILL GROUP HOME</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>82 BOYD STREET</b> <b>ANDREWS, NC 28901</b>
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(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
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V 000 INITIAL COMMENTS

An annual and follow up survey was completed on March 10, 2026. 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 6. 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

**RECEIVED**  
**MAR 23 2026**  
**DHSR-MH Licensure Sect**

Division of Health Service Regulation  
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

*Josh Casner*

TITLE

*Executive Director*

(X6) DATE

*3-16-26*

Division of Health Service Regulation

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V 118	<p>Continued From page 1</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 reviews and interviews, the facility failed to ensure the MAR was kept current affecting 1 of 3 clients (Client #1). The findings are:</p> <p>Review on 3/10/26 of Client #1's record revealed: -Date of Admission: 7/8/96. -Diagnoses: Mild Intellectual Developmental Disability, Anxiety Disorder, Primary Insomnia, Mixed Hyperlipidemia. -Physician's order dated 11/17/25: Loratadine 10mg (milligram); Take one tablet by mouth every day for allergies.</p> <p>Review on 3/10/26 of Client #1's MARs dated January 1 to February 28, 2026 revealed: -Loratadine 10mg tablet: Take one tablet by mouth every day for allergies, PRN. -Not initialed as administered.</p> <p>Interview on 3/10/26 with Client #1 revealed: -She took "a whole bunch" of medications. -The Executive Director and the House Manager administered her medications.</p> <p>Interview on 3/10/26 with the House Manager revealed: -The Executive Director was currently out of the</p>	V 118		
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V 118 Continued From page 2

country and unavailable.  
 -"For some reason it (Loratadine prescription) got changed...When [the Executive Director] went through this (the MARs and physician's orders), he found it."  
 -"It got miscommunicated (the order change from PRN to scheduled)."  
 -"At one point, it (Loratadine) was a PRN...got changed back from a PRN. We (staff) thought it was still a PRN...It (the change) was overlooked and missed."  
 -The Executive Director reviewed the MARs and physician's orders monthly.

This deficiency has been cited 4 times since the original cite on August 25, 2022 and must be corrected within 30 days.

V 118

We will continue to monitor monthly all MAR scripts and adjust the MAR when meds change from daily to PRN or vice-versa, and reflect these on the MAR when needed. The Administrators will review monthly checking for mistakes, and the Home manager will keep the MAR up to date.

3-16-26