STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	FCL033006	A. BUILDING: _____ B. WING _____	05/08/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
YOUR LOVING FAMILY CARE HOME I	730 MARIGOLD STREET ROCKY MOUNT, NC 27801

(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
C 000	Initial Comments The Adult Care Licensure Section conducted an annual survey on 05/08/25.	C 000		
C 249	10A NCAC 13G .0902(c)(3)(4) Health Care 10A NCAC 13G .0902 Health Care (c) The facility shall assure documentation of the following in the resident's record: (3) written procedures, treatments or orders from a physician or other licensed health professional; and (4) implementation of procedures, treatments or orders specified in Subparagraph (c)(3) of this Rule. This Rule is not met as evidenced by: Based on record reviews and interviews, the facility failed to ensure the implementation of physician's orders for 1 of 3 sampled residents (#3) with orders for blood pressure checks once weekly. The findings are: Review of Resident #3's current FL2 dated 10/22/24 revealed diagnoses included dementia, insomnia, schizophrenia, gastroesophageal reflux disease, benign prostatic hyperplasia and chronic obstructive pulmonary disease. -There was an order to complete blood pressure (BP) checks weekly. Review of Resident #3's Resident Register dated 08/07/17 revealed: Resident #1 was admitted to the home on 08/07/17. Review of Resident #3's vital sign log for March 2025 revealed:	C 249		

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C 249	Continued From page 1 -There was documentation of one completed BP check, the reading was 124/70. -There was no specific date documented when the BP check was completed. Review of Resident #3's vital sign log for April 2025 revealed: -There was documentation of one completed BP check, the reading was 132/70. -There was no specific date documented when the BP check was completed. Review of Resident #3's vital sign log for May 2025 revealed: -There was documentation of one completed BP check, the reading was 126/70. -There was no specific date documented when the BP check was completed. Interview with Resident #3 on 05/08/25 at 1:53pm revealed: -He had his BP checked once a month by the staff. -His BP was "pretty much on point" and he had no issues with his BP. Telephone interview with Resident #3's Primary Care Physician's (PCP) Nurse on 05/08/25 at 3:14pm revealed: -Resident #3 had an order to has his BP checked weekly. -The PCP could not properly monitor Resident #3's BP if it was being checked monthly. -Resident #3's BP was to be checked once weekly in order to monitor any signs of elevation or low BP. Interview with the Administrator on 05/08/25 at 12:00pm revealed: -There was not a weekly BP log for Resident #3.	C 249		

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C 249	Continued From page 2 -Resident #3's BP was taken once monthly and documented on his vital sign log. -The staff who took Resident #3 to the doctor were to review all new orders. -She had reviewed the new orders but missed the weekly BP was an oversight.	C 249		
C 320	10A NCAC 13G .1002 (f) Medication Orders 10A NCAC 13G .1002 Medication Orders (f) The facility shall assure that all current orders for medications or treatments, including standing orders and orders for self-administration, are reviewed and signed by the resident's physician or prescribing practitioner at least every six months This Rule is not met as evidenced by: Based on interviews and record reviews, the facility failed to ensure the physician reviewed and signed the residents' physicians' orders every six months for orders 3 of 3 sampled residents (#1, #2 and #3). The findings are: Review of Resident #1's current FL2 dated 10/04/24 revealed diagnoses included mental retardation, dementia, loss of vision in eye, unspecified mental disorder, hypertension, and heart disease without heart failure not concurrent. Resident #1's record revealed there were no documentation of signed physician orders since the FL2 was signed on 10/04/24. Telephone interview with Resident #1's Primary Care Provider's (PCP) nurse on 05/08/25 at	C 320		

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C 320	Continued From page 3 4:40pm revealed: -Resident #1 was last seen by the PCP on 04/10/25. -There were no signed physician orders on record for Resident #1. -There were only individual medication orders for new, changed or discontinued medication for Resident #1. Refer to the interview with the Administrator on 05/08/25 at 1:42pm. 2. Review of Resident #2's current FL2 dated 05/30/24 revealed diagnoses included dementia without behavioral disturbance, hypertension without heart failure, major depression, in complete remission, coronary artery disease, moderate present asthma, with complication, and hyperglycemia, and long term use of anticoagulants. Resident #2's record revealed there were no documentation of signed physician orders since the FL2 was signed on 05/30/24. Telephone interview with Resident #2's Primary Care Provider's (PCP) nurse on 05/08/25 at 3:14pm revealed: -Resident #2 was last seen by the PCP on 03/13/25. -The facility had not submitted any physician orders to be reviewed and signed for Resident #2. Refer to the interview with the Administrator on 05/08/25 at 1:42pm. 3. Review of Resident #3's current FL2 dated 10/22/24 revealed diagnoses included dementia, insomnia, schizophrenia, gastroesophageal reflux	C 320		

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C 320	Continued From page 4 disease, benign prostatic hyperplasia and chronic obstructive pulmonary disease. Resident #3's record revealed there were no documentation of signed physician orders since the FL2 was signed on 10/22/24. Telephone interview with Resident #3's Primary Care Provider's (PCP) nurse on 05/08/25 at 4:40pm revealed: -Resident #3 was last seen by the PCP on 02/10/25 . -The facility had not submitted any physician orders to be reviewed and signed for Resident #3. Refer to the interview with the Administrator on 05/08/25 at 1:42pm. _____ Interview with the Administrative on 05/08/25 at 1:42pm revealed: -The physician orders were no longer submitted to be signed by the Primary Care Provider (PCP). -The facility stopped getting the orders reviewed and signed because the pharmacy provided a copy of the physician orders. -The Supervisor in Charge was the person responsible for getting the physician orders reviewed and signed by the PCP. -The Administrator completed chart audits every 4 months, the last audit was completed in January 2025.	C 320		