| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER | (X2) MULTIPLE CONSTRUCTION | (X3) DATE SURVEY COMPLETED |
|---|---|---|---|
| | FCL017009 | A. BUILDING: _____ B. WING _____ | 02/11/2026 |

| NAME OF PROVIDER OR SUPPLIER | STREET ADDRESS, CITY, STATE, ZIP CODE |
|---|---|
| TERRY CARE HOME | 2446 CHERRY GROVE ROAD YANCEYVILLE, NC 27379 |

| (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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| C 000 | Initial Comments<br><br>The Adult Care Licensure Section conducted an annual survey on 02/11/26. | C 000 | | |
| C 074 | 10A NCAC 13G .0315 (a)(1) Housekeeping and Furnishings<br><br>10A NCAC 13G .0315 Housekeeping And Furnishings<br><br>(a) A family care home shall:<br>(1) have walls, ceilings, and floors or floor coverings that are clean, safe, and functional; Notwithstanding the requirements of Rule .0301 of this Section, this Rule shall apply to new and existing facilities.<br><br>This Rule is not met as evidenced by:<br>Based on observations and interviews, the facility failed to ensure the floors were kept clean and in good repair in the resident bedrooms, dining room, bathrooms, and halls.<br><br>The findings are:<br><br>Review of the most recent sanitation report revealed:<br>-The inspection report was dated 10/01/25.<br>-There was documentation of zero demerits.<br><br>Observation of a resident's room on 02/11/26 at 8:30am revealed the floor was dirty and in need of sweeping and mopping.<br><br>Observation of a bathroom on 02/11/26 at 8:32am revealed:<br>-There was a stain next to the toilet and in front of the sink.<br>-There was a build up of dirt and grime around | C 074 | The staff will clean/sweep and mop floors daily and as needed. Staff is given until 10:00 AM to have floors and bathrooms swept & mopped on a daily bases. Admin/manager will check cleaning on a weekly bases. | 3/31/26 |



LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE: [signature] | TITLE: Owner | (X6) DATE: 3/20/2026



Reviewed and Acknowledged 03/23/26 Janet Thornburg

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| C 074 | Continued From page 1<br>the base of the toilet and in the corners of the bathroom.<br>-The floors were dirty and in need of sweeping and mopping.<br><br>Observation of the dining room on 02/11/26 at 8:33am revealed the floors were dirty and in need of sweeping and mopping.<br><br>Observation of a second resident's room on 02/11/26 at 8:33am revealed:<br>-The floor was dirty and in need of sweeping and mopping.<br>-There were areas of the tile that had been damaged and in need of repair.<br><br>Observation of a second bathroom on 02/11/26 at 8:34am revealed:<br>-There was a build up of dirt and grime around the base of the toilet, beside the toilet and around the plunger holder, and in the corners of the bathroom.<br>-The floor was dirty and in need of sweeping and mopping.<br><br>Interview with a resident on 02/11/26 at 8:30am revealed:<br>-The MA did not sweep or mop his bedroom floor.<br>-He swept the bedroom floor when it was slept.<br>-He did not know the last time his bedroom floor had been swept or mopped.<br><br>Interview with the medication aide (MA) on 02/11/26 at 12:10pm revealed:<br>-She swept and mopped the floors every night.<br>-She had not noticed the dirt and grime in the corners of the bathrooms.<br>-The dirt and grime around the base of the toilets were stained and she could not get it clean. | C 074 | | |

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| C 074 | Continued From page 2<br>Interview with the Administrator on 02/11/26 at 12:25 revealed:<br>-The MA should sweep and mop daily.<br>-She had spoken with the MA about cleaning the floors and baseboards about a week ago.<br>-She expected the floors to be cleaned and well maintained. | C 074 | | |
| C 257 | 10A NCAC 13G .0904(a)(1) Nutrition and Food Service<br><br>10A NCAC 13G .0904 Nutrition and Food Service<br>(a) Food Procurement and Safety in Family Care Homes:<br>(1) Food services shall comply with Rules Governing the Sanitation of Residential Care Facilities set forth in 15A NCAC 18A .1600 which are hereby incorporated by reference, including subsequent amendments, assuring storage, preparation, and serving food under sanitary conditions.<br><br>This Rule is not met as evidenced by:<br>Based on observations and interviews, the facility failed to ensure the kitchen was clean and free from contamination, including leftover food in the refrigerator that was not sealed, labeled, or dated | C 257 | Labels and containers were provided to staff. All foods were dated labeled. Kitchen was cleaned. Adm/manage will do checks on a weekly bases. 3/31/26 | |

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| C 257 | Continued From page 3<br>when opened.<br><br>The findings are:<br><br>Observation of the refrigerator on 02/11/26 at 8:38am revealed:<br>-There was an opened container of pimento cheese that was almost empty and that was not date when it opened.<br>-There was an opened jar of jelly that was almost empty and that was not dated when it opened.<br>-There were four opened jars of salad dressing, three were almost empty, two of the bottles were soiled and needed wiping down and there were no open dates documented on either of the four bottles.<br>-There was a zip lock bag that contained two opened bags of, one was brown granulated and the other was a white granulated substance; neither bag had a documented opened date.<br>-There was an opened bag of fish fry batter sealed in a zip loc bag that did not have an opened dated documented on the bag.<br>-There were two 12 ounce container that read pimento spread on the top of the container each contained a brown substance.<br>-There was an ziploc bag that contained an opened bag of frozen biscuits, that did not have an opened date documented on the bag.<br>-There was an unsealed ziploc bag that contained an opened bag of sweet potatoes fries and an opened bag of ocra, neither bag was dated with a opened date.<br>-There was a opened bag that contained one corndog that was not dated.<br><br>Observation of the Freezer on 02/11/26 at 8:40am revealed:<br>-There was a zip locked bag that contained an opened bag of mixed vegetables that did not | C 257 | | |

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| C 257 | Continued From page 4<br><br>have a date.<br>-There were two clear containers that were ½ full of a brown substance, that was not labeled or dated.<br><br>Interview with the medication aide (MA) on 02/11/26 at 12:10pm revealed:<br>-She cleaned the refrigerator once a week and when needed.<br>-She was not aware that containers that had a best used by date needed to have an opened date on the container when it was originally opened.<br>-She forgot to date and label the other containers and bags when they were opened.<br>-She did not realize some of the zip locked bags were not sealed that contained opened bags.<br><br>Interview with the Administrator on 02/11/26 at 12:25 revealed:<br>-The MA should ensure that opened food is dated when opened.<br>-That food placed in containers that the food is labeled and dated.<br>-She expected the items in the refrigerator to be clean, dated, labeled and sealed. | C 257 | | |
| C 342 | 10A NCAC 13G .1004(j) Medication Administration<br><br>10A NCAC 13G .1004 Medication Administration<br>(j) The resident's medication administration record (MAR) shall be accurate and include the following:<br>(1) resident's name;<br>(2) name of the medication or treatment order;<br>(3) strength and dosage or quantity of medication administered;<br>(4) instructions for administering the medication | C 342 | PRN medications will be monitored by Admin/manager on a weekly basis to verify staff is signing for prn medications. 3/31/26 | |

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| C 342 | Continued From page 5<br>or treatment;<br>(5) reason or justification for the administration of medications or treatments as needed (PRN) and documenting the resulting effect on the resident;<br>(6) date and time of administration;<br>(7) documentation of any omission of medications or treatments and the reason for the omission, including refusals; and<br>(8) name or initials of the person administering the medication or treatment. If initials are used, a signature equivalent to those initials is to be documented and maintained with the medication administration record (MAR).<br><br>This Rule is not met as evidenced by:<br>Based on observations, interviews, and record reviews, the facility failed to ensure the medication administration record (MAR) was accurate for 1 of 3 residents (#1) related to a medication used for insomnia.<br><br>The findings are:<br><br>Review of Resident #1's current FL-2 dated 01/12/26 revealed:<br>-Diagnoses included major neurocognitive disorders, schizophrenia, asthma, and chronic obstructive pulmonary disease (COPD).<br>-There was an order for trazodone 50mg (used to treat insomnia) 1 tablet at bedtime as needed for (PRN) sleep.<br><br>Review of Resident #1's January 2026 medication administration record (MAR) from 01/12/26 to 01/31/26 revealed:<br>-There was an entry for trazodone 50mg at bedtime PRN sleep.<br>-There was documentation trazodone was administered 7 of 10 opportunities from 02/01/26 | C 342 | | |

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| C 342 | Continued From page 6<br>to 02/10/26.<br><br>Review of Resident #1's February 2026 MAR from 02/01/26 to 02/10/26 revealed:<br>-There was an entry for trazodone 50mg at bedtime PRN sleep.<br>-There was documentation trazodone was administered was administered 9 of 20 opportunities from 01/12/26 to 01/31/26.<br><br>Observations of Resident #1's medication on hand on 02/11/26 at 11:06am revealed:<br>-There was an empty medication bottle with a prescription label that read, take one tablet at bedtime as needed for sleep.<br>-The local hospital pharmacy dispensed 30 trazodone 50mg on 01/12/26.<br><br>Interview with Resident #1 on 02/11/26 at 11:45am revealed:<br>-He took medication to help him sleep at night.<br>-He did not think he took the medication every night, but he may have.<br><br>Interview with the medication aide (MA) on 02/11/26 at 12:10pm revealed:<br>-Resident #1 was admitted to the facility from the hospital and the hospital sent the medications with him.<br>-There was a bottle of trazodone 50mg tablets that she thought contained 30 tablets.<br>-She did not count the tablets when Resident #1 was admitted to the facility.<br>-She administered trazodone to Resident #1 most nights.<br>-She thought she documented on the MAR each night she administered trazodone to Resident #1.<br><br>Interview with the Administrator on 02/11/26 at 12:25 revealed: | C 342 | | |

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| C 342 | Continued From page 7<br>-All PRN medications should be documented on the MAR when administered.<br>-She expected all PRN medications to be documented on the MAR when administered.<br><br>Attempted telephone interview with the local hospital pharmacy on 02/11/26 at 11:30am was unsuccessful.<br><br>Attempted telephone interview with Resident #1's Primary Care Provider (PCP) on 02/11/26 at 11:48am was unsuccessful. | C 342 | | |