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	FCL092206	A. BUILDING: _____ B. WING _____	R 08/05/2026

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NOVELTY HEALTHCARE SERVICES	1101 LOXLEY PLACE RALEIGH, NC 27610

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{C 000}	Initial Comments The Adult Care Licensure Section conducted a follow-up survey from 08/04/26 to 08/05/26 with an exit conference via telephone on 08/05/26.	{C 000}		
{C 206}	10A NCAC 13G .0702 (e) Tuberculosis Test and Medical Examination 10A NCAC 13G .0702 Tuberculosis Test And Medical Examination and Immunizations (e) The result of the medical examination required in Paragraph (b) of this Rule shall be documented on the North Carolina Medicaid Adult Care Home FL-2 form which is available at no cost on the Department's Medicaid website at https://medicaid.ncdhhs.gov/media/6549/open. The Adult Care Home FL-2 shall be signed and dated by the physician or physician extender completing the medical examination. The medical examination shall include the following: (1) resident's identification information, including the resident's name, date of birth, sex, admission date, county and Medicaid number, current facility and address, physician's name and address, a relative's name and address, current level of care, and recommended level of care; (2) resident's admitting diagnoses, including primary and secondary diagnoses and dates of onset; (3) resident's current medical information, including orientation, behaviors, personal care assistance needs, frequency of physician visits, ambulatory status, functional limitations, information related to activities and social needs, neurological status including orders for therapeutic diets; (4) special care factors, including physician orders for blood pressure, diabetic urine testing, physical therapy, range of motion exercises, a bowel and bladder program, a restorative feeding	{C 206}		

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{C 206}	Continued From page 1 program, speech therapy, and restraints; (5) resident's medications, including the name, strength, dosage, frequency and route of administration of each medication; (6) results of x-rays or laboratory tests determined by the physician or physician extender to be necessary information related to the resident's care needs; and (7) additional information as determined by the physician or physician extender to be necessary for the care of the resident. This Rule is not met as evidenced by: Based on interviews and record reviews, the facility failed to ensure 3 of 3 sampled residents (#1, #2, #3) had their results of their medical examination completed on the FL-2 form as evidence by missing documentation for their nutritional status. The findings are: 1. Review of Resident #1's current FL-2 dated 09/18/25 revealed: -Diagnoses included history of cerebral vascular accident, hypertension, hyperlipidemia, hemiparesis, and coronary artery disease. -The diet section was blank. Review of Resident #1's record revealed there was no documentation of the resident's diet order.	{C 206}		

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{C 206}	Continued From page 2 Refer to interview with the Supervisor-in-Charge (SIC) on 08/04/26 at 11:47am. Refer to interview with the Administrator on 08/04/26 at 11:52am. 2. Review of Resident #2's current FL-2 dated 04/13/26 revealed: -Diagnoses included chronic leg pain, hypercholesterolemia, anxiety disorder, unspecified insomnia, venous stasis and history of cognitive behavioral changes. -The diet section was blank. Review of Resident #2's record revealed there was no documentation of the resident's diet order. Refer to interview with the Supervisor-in-Charge (SIC) on 08/04/26 at 11:47am. Refer to interview with the Administrator on 08/04/26 at 11:52am. 3. Review of Resident #3's current FL-2 dated 04/07/26 revealed: -Diagnoses included schizophrenia paranoid, hypertension, type 1 diabetes, narcissistic personality disorder, hyperlipidemia, and autism spectrum disorder. -The diet section was blank. Review of Resident #3's record revealed there was no documentation of the resident's diet order. Interview with the Supervisor-in-Charge (SIC) on 08/04/26 at 11:47am revealed Resident #3 was supposed to receive less sugar than the other residents because it was on the FL-2.	{C 206}		

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{C 206}	Continued From page 3 Refer to interview with the Supervisor-in-Charge (SIC) on 08/04/26 at 11:47am. Refer to interview with the Administrator on 08/04/26 at 11:52am. _____ Interview with the Supervisor-in-Charge (SIC) on 08/04/26 at 11:47am revealed: -The diet orders were not on the FL-2. -All the residents in the facility were on regular diets. Interview with the Administrator on 08/04/26 at 11:52am revealed: -She was responsible for ensuring diet orders were completed on the FL-2. -She planned to get diet orders for the residents in the facility today.	{C 206}		
C 315	10A NCAC 13G .1002(a) Medication Orders 10A NCAC 13G .1002 Medication Orders (a) A family care home shall ensure contact with the resident's physician or prescribing practitioner for verification or clarification of orders for medications and treatments: (1) if orders for admission or readmission of the resident are not dated and signed within 24 hours of admission or readmission to the facility; (2) if orders are not clear or complete; or (3) if multiple admission forms are received upon admission or readmission and orders on the forms are not the same. The facility shall ensure that this verification or clarification is documented in the resident's record.	C 315		

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C 315	Continued From page 4 This Rule is not met as evidenced by: Based on record review and interviews, the facility failed to obtain a clarification order for a sliding scale insulin for 1 of 3 sampled residents (#3). The findings are: Review of Resident #3's current FL-2 dated 04/07/26 revealed: -Diagnoses included schizophrenia paranoid, hypertension, type 1 diabetes, narcissistic personality disorder, hyperlipidemia, and autism spectrum disorder. -There was an order for insulin Lispro inject 10 units three times per day with sliding scale. (Lispro is used to treat diabetes. A sliding scale insulin was a method used to check hypoglycemia or hyperglycemia for diabetic patients). Review of Resident #3's unsigned endocrinology after visit summary dated 02/13/26 revealed there were insulin instructions for high blood sugars, if blood sugars are 201- 250 add 2 units, 251- 300 add 4 units, 301- 350 add 6 units (drink plenty of water), greater than 351 add 8 units. Review of Resident #3's record on 08/04/26 revealed there was no documentation of a signed order for the sliding scale instructions. Review of Resident #3's blood glucose measurement results revealed: -July 2026 there were numbers documented in the comments section. -August 2026 there were numbers documented in the comments section. Interview with the Supervisor-in-Charge (SIC) on	C 315		

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C 315	Continued From page 5 08/04/26 at 11:30am revealed: -He used an after-visit summary from Resident #3's endocrinologist's office to determine the amount of insulin he administered for the sliding scale. -He and the Administrator were responsible for reviewing after-visit summaries and obtaining clarification. -He thought the endocrinologist's office sent the sliding scale insulin order to the pharmacy. -The number in the comments section of the blood glucose measurement results indicated the amount of insulin that was administered for the sliding scale. Interview with the Administrator on 08/04/26 at 11:52am revealed she was aware she should have clarified the sliding scale insulin instructions with the provider. Interview with the facility's contracted pharmacist on 08/04/26 at 9:57am revealed they did not have an order on file for Resident #3's sliding scale instructions. Interview with a representative from Resident #3's primary care provider's (PCP) office on 08/05/26 at 9:33am revealed: -He was a Registered Nurse. -Resident #3's PCP expected the endocrinologist's office to handle any issues or concerns with clarifying orders. Based on observations, interviews, and record reviews it was determined Resident #3 was not interviewable.	C 315		
C 342	10A NCAC 13G .1004(j) Medication Administration	C 342		

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C 342	Continued From page 6 10A NCAC 13G .1004 Medication Administration (j) The resident's medication administration record (MAR) shall be accurate and include the following: (1) resident's name; (2) name of the medication or treatment order; (3) strength and dosage or quantity of medication administered; (4) instructions for administering the medication or treatment; (5) reason or justification for the administration of medications or treatments as needed (PRN) and documenting the resulting effect on the resident; (6) date and time of administration; (7) documentation of any omission of medications or treatments and the reason for the omission, including refusals; and (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). This Rule is not met as evidenced by: Based on observations, interviews, and record reviews, the facility failed to ensure the medication administration records were accurate for 1 of 3 sampled residents (#3) as evidence by not including the instructions for administering a sliding scale insulin. The findings are: Review of Resident #3's current FL-2 dated 04/07/26 revealed: -Diagnoses included schizophrenia paranoid, hypertension, type 1 diabetes, narcissistic personality disorder, hyperlipidemia, and autism	C 342		

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C 342	Continued From page 7	C 342		

spectrum disorder.
-There was an order for insulin Lispro inject 10 units three times per day with sliding scale. (Lispro is used to treat diabetes. A sliding scale insulin was a method used to check hypoglycemia or hyperglycemia for diabetic patients).

Review of Resident #3's record on 08/04/26 revealed there was no documentation of a signed order for sliding scale instructions.

Review of Resident #3's April 2026 medication administration record (MAR) revealed there was not an entry for the sliding scale insulin.

Review of Resident #3's May 2026 medication administration record (MAR) revealed there was not an entry for the sliding scale insulin.

Review of Resident #3's June 2026 medication administration record (MAR) revealed there was not an entry for the sliding scale insulin.

Review of Resident #3's July 2026 medication administration record (MAR) revealed there was not an entry for the sliding scale insulin.

Review of Resident #3's blood glucose measurement results revealed:
-July 2026 there were numbers documented in the comments section.
-August 2026 there were numbers documented in the comments section.

Interview with the Supervisor-in-Charge (SIC) on 08/04/26 at 11:30am revealed:
-The number in the comments section of Resident #3's blood glucose measurement results indicated the amount of insulin that was

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C 342	Continued From page 8 administered for the sliding scale. -He used an after-visit summary from Resident #3's endocrinologist's office to determine the amount of insulin he administered for the sliding scale. -He thought the after-visit summary was an order for the sliding scale. -Once the pharmacy received an order, they put the orders on the MAR. -He thought the pharmacy could not put Resident #3's sliding scale insulin instructions on the MAR. Interview with the Administrator on 08/04/26 at 11:52am and 08/05/26 at 2:00pm revealed: -She was responsible for following up with the pharmacy to see if changes to orders were put on the MAR. -The facility documented the sliding scale insulin on the blood glucose measurement results form because it looked better and the MAR had small spaces. -She knew the sliding scale insulin for Resident #3 was not on the MAR. -The facility utilized the blood glucose measurement results form because she knew the sliding scale insulin instructions should have been on Resident #3's medication administration record (MAR).	C 342		