

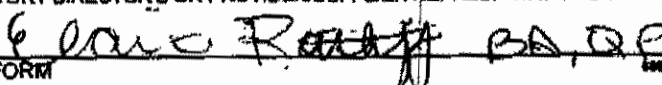
Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL032-389	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED R 05/08/2024
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NAME OF PROVIDER OR SUPPLIER DESTINY HOME, INC	STREET ADDRESS, CITY, STATE, ZIP CODE 630 RIPPLING STREAM ROAD DURHAM, NC 27704
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(X4) ID	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL FACTORY 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	<p>INITIAL COMMENTS</p> <p>An annual and follow up survey was completed on May 8, 2024. Deficiencies were cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .5600A Supervised Living for Adults with Mental Illness.</p> <p>The facility is licensed for 6 and currently has a census of 6. The survey sample consisted of audits of 3 current clients.</p>	V 000		
V 107	<p>27G .0202 (A-E) Personnel Requirements</p> <p>10A NCAC 27G .0202 PERSONNEL REQUIREMENTS</p> <p>(a) All facilities shall have a written job description for the director and each staff position which:</p> <ul style="list-style-type: none"> (1) specifies the minimum level of education, competency, work experience and other qualifications for the position; (2) specifies the duties and responsibilities of the position; (3) is signed by the staff member and the supervisor; and (4) is retained in the staff member's file. <p>(b) All facilities shall ensure that the director, each staff member or any other person who provides care or services to clients on behalf of the facility:</p> <ul style="list-style-type: none"> (1) is at least 18 years of age; (2) is able to read, write, understand and follow directions; (3) meets the minimum level of education, competency, work experience, skills and other qualifications for the position; and (4) has no substantiated findings of abuse or neglect listed on the North Carolina Health Care Personnel Registry. 	V 107	<p>V 107 Personnel Requirements</p> <p>The administrator requested proof of the employee's education immediately following the survey. The staff person has made the request for the document to the school he attended. As of 5/8/24, all job descriptions have been reviewed with staff, signed and added to the their personnel files. Going forward the administrator will ensure that prospective employees provide the required/necessary information prior to the offer of employment. Additionally, during the quarterly QA meetings, employee files will be reviewed, to ensure there is proof of education, signed job descriptions and other required documents in each employee's personnel file.</p>	

Division of Health Service Regulation LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE 	TITLE	(X6) DATE 5/13/24
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V 107	<p>Continued From page 1</p> <p>(c) All facilities or services shall require that all applicants for employment disclose any criminal conviction. The impact of this information on a decision regarding employment shall be based upon the offense in relationship to the job for which the applicant is applying.</p> <p>(d) Staff of a facility or a service shall be currently licensed, registered or certified in accordance with applicable state laws for the services provided.</p> <p>(e) A file shall be maintained for each individual employed indicating the training, experience and other qualifications for the position, including verification of licensure, registration or certification.</p> <p>This Rule is not met as evidenced by: Based on record reviews and interview, the facility failed to have complete personnel records affecting two of three audited staff (#1 and #2). The findings are:</p> <p>Review on 5/8/24 of the facility's personnel records revealed the following:</p> <p>Staff #1: -Date of hire 4/1/24 -Hired as a Habilitation Technician -No job description -No educational verification</p> <p>Staff #2:</p>	V 107		
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V 107	<p>Continued From page 2</p> <ul style="list-style-type: none"> -Date of hire 3/24/22 -Hired as a Habilitation Technician -No job description <p>Interview on 5/8/24 with the Chief Executive Officer revealed:</p> <ul style="list-style-type: none"> -She was responsible for the personnel records. -She had no explanation as to why the required documents were not in the personnel records. -She confirmed she failed to complete personnel records for staff #1 and staff #2. <p>This deficiency has been cited 3 time(s) since the original cite on 5/27/21 and must be corrected within 30 days.</p>	V 107		
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V 108	<p>27G .0202 (F-I) Personnel Requirements</p> <p>10A NCAC 27G .0202 PERSONNEL REQUIREMENTS</p> <p>(f) Continuing education shall be documented.</p> <p>(g) Employee training programs shall be provided and, at a minimum, shall consist of the following:</p> <ol style="list-style-type: none"> (1) general organizational orientation; (2) training on client rights and confidentiality as delineated in 10A NCAC 27C, 27D, 27E, 27F and 10A NCAC 26B; (3) training to meet the mh/dd/sa needs of the client as specified in the treatment/habilitation plan; and (4) training in infectious diseases and bloodborne pathogens. <p>(h) Except as permitted under 10a NCAC 27G .5602(b) of this Subchapter, at least one staff member shall be available in the facility at all times when a client is present. That staff member shall be trained in basic first aid including seizure management, currently trained</p>	V 108	<p>V 108 Personnel Requirements</p> <p>As of 5/13/24, the QP has completed the following trainings: Client Rights, Confidentiality, Documentation, Mental Health diagnoses (SPMI), Special Populations, PCP/Goals and Treatment Planning, Coping Skills, Cultural Competence, Preventing & Reporting Abuse Neglect and Exploitation, Problem Solving, Incident Reporting, Barriers to Effective Communication, Problem Solving & Conflict Resolution will be completed by the QP by 6/30/24. All other trainings will be completed by the appropriate discipline by 7/5/24.</p>	
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V 108	<p>Continued From page 3</p> <p>to provide cardiopulmonary resuscitation and trained in the Heimlich maneuver or other first aid techniques such as those provided by Red Cross, the American Heart Association or their equivalence for relieving airway obstruction.</p> <p>(i) The governing body shall develop and implement policies and procedures for identifying, reporting, investigating and controlling infectious and communicable diseases of personnel and clients.</p> <p>This Rule is not met as evidenced by: Based on record reviews and interviews, the facility failed to ensure one of three audited staff (#1) had training to meet the needs of the clients. The findings are:</p> <p>Review on 5/6/24 of client #1's record revealed: -Admission date of 3/14/08 -Diagnoses of Depression Disorder and Seizure Disorder</p> <p>Review on 5/6/24 of client #2's record revealed: -Admission date of 5/6/19 -Diagnosis of Schizoffective Disorder-Bipolar Type</p> <p>Review on 5/6/24 of client #3's record revealed: -Admission date of 8/1/17 -Diagnosis of Schizophrenia</p> <p>Review on 5/8/24 of a personnel record for staff #1 revealed: -Date of hire 4/1/24 -Hired as a Habilitation Technician</p>	V 108		
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V 108	<p>Continued From page 4</p> <p>-No documentation of training to meet the needs of the clients</p> <p>Interview on 5/8/24 with the Qualified Professional revealed: -She started doing training with staff #1, however there was an incident and she could not continue the training. -She never got around to doing the client specific training with staff #1. -She confirmed staff #1 had no documentation of training to meet the needs of the clients.</p> <p>Interview on 5/8/24 with the Chief Executive Officer revealed: -She was responsible for the personnel records. -She had no explanation as to why the required training was not completed for staff #1. -She confirmed staff #1 had no documentation of training to meet the needs of the clients.</p>	V 108		
V 133	<p>G.S. 122C-80 Criminal History Record Check</p> <p>G.S. §122C-80 CRIMINAL HISTORY RECORD CHECK REQUIRED FOR CERTAIN APPLICANTS FOR EMPLOYMENT.</p> <p>(a) Definition. - As used in this section, the term "provider" applies to an area authority/county program and any provider of mental health, developmental disability, and substance abuse services that is licensable under Article 2 of this Chapter.</p> <p>(b) Requirement. - An offer of employment by a provider licensed under this Chapter to an applicant to fill a position that does not require the applicant to have an occupational license is conditioned on consent to a State and national criminal history record check of the applicant. If the applicant has been a resident of this State for</p>	V 133	<p>V 133- Criminal Background Checks</p> <p>Effective immediately, the administrator will complete the nationwide check for staff #1. Going forward all potential employees will undergo a criminal background check within 5 days of making a conditional offer of employment. For those who haven't resided in the state for at least 5 years, the administrator will complete a nationwide background check. A review of personnel files will be completed during the quarterly QA review.</p>	

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V 133	Continued From page 5 less than five years, then the offer of employment is conditioned on consent to a State and national criminal history record check of the applicant. The national criminal history record check shall include a check of the applicant's fingerprints. If the applicant has been a resident of this State for five years or more, then the offer is conditioned on consent to a State criminal history record check of the applicant. A provider shall not employ an applicant who refuses to consent to a criminal history record check required by this section. Except as otherwise provided in this subsection, within five business days of making the conditional offer of employment, a provider shall submit a request to the Department of Justice under G.S. 114-19.10 to conduct a criminal history record check required by this section or shall submit a request to a private entity to conduct a State criminal history record check required by this section. Notwithstanding G.S. 114-19.10, the Department of Justice shall return the results of national criminal history record checks for employment positions not covered by Public Law 105-277 to the Department of Health and Human Services, Criminal Records Check Unit. Within five business days of receipt of the national criminal history of the person, the Department of Health and Human Services, Criminal Records Check Unit, shall notify the provider as to whether the information received may affect the employability of the applicant. In no case shall the results of the national criminal history record check be shared with the provider. Providers shall make available upon request verification that a criminal history check has been completed on any staff covered by this section. A county that has adopted an appropriate local ordinance and has access to the Division of Criminal Information data bank	V 133			

Division of Health Service Regulation

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V 133	Continued From page 6 may conduct on behalf of a provider a State criminal history record check required by this section without the provider having to submit a request to the Department of Justice. In such a case, the county shall commence with the State criminal history record check required by this section within five business days of the conditional offer of employment by the provider. All criminal history information received by the provider is confidential and may not be disclosed, except to the applicant as provided in subsection (c) of this section. For purposes of this subsection, the term "private entity" means a business regularly engaged in conducting criminal history record checks utilizing public records obtained from a State agency. (c) Action. - If an applicant's criminal history record check reveals one or more convictions of a relevant offense, the provider shall consider all of the following factors in determining whether to hire the applicant: (1) The level and seriousness of the crime. (2) The date of the crime. (3) The age of the person at the time of the conviction. (4) The circumstances surrounding the commission of the crime, if known. (5) The nexus between the criminal conduct of the person and the job duties of the position to be filled. (6) The prison, jail, probation, parole, rehabilitation, and employment records of the person since the date the crime was committed. (7) The subsequent commission by the person of a relevant offense. The fact of conviction of a relevant offense alone shall not be a bar to employment; however, the listed factors shall be considered by the provider. If the provider disqualifies an applicant after	V 133			

Division of Health Service Regulation

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V 133	<p>Continued From page 7</p> <p>consideration of the relevant factors, then the provider may disclose information contained in the criminal history record check that is relevant to the disqualification, but may not provide a copy of the criminal history record check to the applicant.</p> <p>(d) Limited Immunity. - A provider and an officer or employee of a provider that, in good faith, complies with this section shall be immune from civil liability for:</p> <p>(1) The failure of the provider to employ an individual on the basis of information provided in the criminal history record check of the individual.</p> <p>(2) Failure to check an employee's history of criminal offenses if the employee's criminal history record check is requested and received in compliance with this section.</p> <p>(e) Relevant Offense. - As used in this section, "relevant offense" means a county, state, or federal criminal history of conviction or pending indictment of a crime, whether a misdemeanor or felony, that bears upon an individual's fitness to have responsibility for the safety and well-being of persons needing mental health, developmental disabilities, or substance abuse services. These crimes include the criminal offenses set forth in any of the following Articles of Chapter 14 of the General Statutes: Article 5, Counterfeiting and Issuing Monetary Substitutes; Article 5A, Endangering Executive and Legislative Officers; Article 6, Homicide; Article 7A, Rape and Other Sex Offenses; Article 8, Assaults; Article 10, Kidnapping and Abduction; Article 13, Malicious Injury or Damage by Use of Explosive or Incendiary Device or Material; Article 14, Burglary and Other Housebreakings; Article 15, Arson and Other Burnings; Article 16, Larceny; Article 17, Robbery; Article 18, Embezzlement; Article 19, False Pretenses and Cheats; Article 19A,</p>	V 133		
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V 133	<p>Continued From page 8</p> <p>Obtaining Property or Services by False or Fraudulent Use of Credit Device or Other Means; Article 19B, Financial Transaction Card Crime Act; Article 20, Frauds; Article 21, Forgery; Article 26, Offenses Against Public Morality and Decency; Article 26A, Adult Establishments; Article 27, Prostitution; Article 28, Perjury; Article 29, Bribery; Article 31, Misconduct in Public Office; Article 35, Offenses Against the Public Peace; Article 36A, Riots and Civil Disorders; Article 39, Protection of Minors; Article 40, Protection of the Family; Article 59, Public Intoxication; and Article 60, Computer-Related Crime. These crimes also include possession or sale of drugs in violation of the North Carolina Controlled Substances Act, Article 5 of Chapter 90 of the General Statutes, and alcohol-related offenses such as sale to underage persons in violation of G.S. 18B-302 or driving while impaired in violation of G.S. 20-138.1 through G.S. 20-138.5.</p> <p>(f) Penalty for Furnishing False Information. - Any applicant for employment who willfully furnishes, supplies, or otherwise gives false information on an employment application that is the basis for a criminal history record check under this section shall be guilty of a Class A1 misdemeanor.</p> <p>(g) Conditional Employment. - A provider may employ an applicant conditionally prior to obtaining the results of a criminal history record check regarding the applicant if both of the following requirements are met:</p> <p>(1) The provider shall not employ an applicant prior to obtaining the applicant's consent for criminal history record check as required in subsection (b) of this section or the completed fingerprint cards as required in G.S. 114-19.10.</p> <p>(2) The provider shall submit the request for a criminal history record check not later than five</p>	V 133		
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V 133	Continued From page 10 national criminal history record check was requested within five business days of making the conditional offer of employment for staff #1.	V 133		
V 290	27G .5602 Supervised Living - Staff 10A NCAC 27G .5602 STAFF (a) Staff-client ratios above the minimum numbers specified in Paragraphs (b), (c) and (d) of this Rule shall be determined by the facility to enable staff to respond to individualized client needs. (b) A minimum of one staff member shall be present at all times when any adult client is on the premises, except when the client's treatment or habilitation plan documents that the client is capable of remaining in the home or community without supervision. The plan shall be reviewed as needed but not less than annually to ensure the client continues to be capable of remaining in the home or community without supervision for specified periods of time. (c) Staff shall be present in a facility in the following client-staff ratios when more than one child or adolescent client is present: (1) children or adolescents with substance abuse disorders shall be served with a minimum of one staff present for every five or fewer minor clients present. However, only one staff need be present during sleeping hours if specified by the emergency back-up procedures determined by the governing body; or (2) children or adolescents with developmental disabilities shall be served with one staff present for every one to three clients present and two staff present for every four or more clients present. However, only one staff need be present during sleeping hours if specified by the emergency back-up procedures	V 290	V 290 Supervised Living The QP completed the assessment on client #3 at the time the consistent non-adherence to the agreement was reported. The client's unsupervised time was removed and he continues to disregard the approved time. A notice of discharge was served to the client on 5/1/24. He is scheduled for discharge from the group home on 5/31/24.	

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V 290	<p>Continued From page 11</p> <p>determined by the governing body.</p> <p>(d) In facilities which serve clients whose primary diagnosis is substance abuse dependency:</p> <p>(1) at least one staff member who is on duty shall be trained in alcohol and other drug withdrawal symptoms and symptoms of secondary complications to alcohol and other drug addiction; and</p> <p>(2) the services of a certified substance abuse counselor shall be available on an as-needed basis for each client.</p> <p>This Rule is not met as evidenced by: Based on observations, record review and interviews, the facility failed to assess the continued capability for one of three clients (#3) to be unsupervised in the community. The findings are:</p> <p>Observation on 5/6/24 between 11:00 AM to 3:15 PM revealed: -Client #3 left the facility and had not returned prior to surveyor's departure.</p> <p>Observation on 5/8/24 between 9:00 AM to 12:30 PM revealed: -Client #3 was not present at the facility and had not returned prior to surveyor's departure.</p> <p>Review on 5/6/24 of client #3's record revealed: -Admission date of 8/1/17 -Diagnosis of Schizophrenia -Unsupervised Time Assessment dated 8/2/22- Client #3 was approved to go out into the community for up to 6 hours per day. -Updated unsupervised time assessment dated</p>	V 290		
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V 290	<p>Continued From page 12</p> <p>5/5/24-Client #3 was approved to go out into the community for up to 6 hours per day. Due to a recent injury of unknown nature, his time is being suspended. He is not approved for unsupervised time in the community or the home.</p> <p>Attempts to interview client #3 on 5/6/24 and 5/8/24 revealed: -Client #3 left the facility and never returned prior to surveyor's departure on 5/6/24. -Client #3 was not present when surveyor arrived and never returned prior to surveyor's departure on 5/8/24.</p> <p>Interview on 5/6/24 with staff #1 revealed: -He had been working at the facility for a little over a month. -Since working at the facility client #3 had been leaving the facility unsupervised every day. -Client #3 left around 9:00 am and did not come back until 4:00 pm or 5:00 pm. -"Sometimes" client #3 came back as late as 7:00 pm or 8:00 pm.</p> <p>Interview on 5/8/24 with the Qualified Professional revealed: -Client #3's unsupervised time in the community was just suspended on 5/5/24. -Client #3 was still leaving the facility even though he was not supposed to be in the community unsupervised. -They talked to him about the unsupervised time and staying out more than six hours each day. -She acknowledged the facility failed to assess the capability for client #3 to be unsupervised in the community prior to 5/5/24.</p> <p>Interview on 5/6/24 with the Chief Executive Officer revealed: -Client #3 was staying out in the community for</p>	V 290		
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Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL032-389	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED R 05/08/2024
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NAME OF PROVIDER OR SUPPLIER DESTINY HOME, INC	STREET ADDRESS, CITY, STATE, ZIP CODE 630 RIPPLING STREAM ROAD DURHAM, NC 27704
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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 290	Continued From page 13 longer than 6 hours daily. -She was told client #3 was working in the area. -Client #3 would not say where he was working. -She acknowledged the facility failed to assess the capability for client #3 to be unsupervised in the community prior to 5/5/24.	V 290		
V 736	27G .0303(c) Facility and Grounds Maintenance 10A NCAC 27G .0303 LOCATION AND EXTERIOR REQUIREMENTS (c) Each facility and its grounds shall be maintained in a safe, clean, attractive and orderly manner and shall be kept free from offensive odor. This Rule is not met as evidenced by: Based on observation and interviews, the facility and grounds were not maintained in a safe, clean, attractive and orderly manner. The findings are: Observation on 5/6/24 at approximately 11:40 AM revealed: -Kitchen area: Countertop near sink was buckled and cracked. Window curtain was faded and stained. Gray electric tape was along edges of countertop. Approximately 12 burn marks on countertop near refrigerator. Rug on floor was torn and stained. -Dining room area-White caulking substance on wall approximately 2 feet long and 6 inches wide. The dining room table was unlevelled. One of the dining room chairs was unlevelled. -Living Room-Walls had grease stains, cracked and peeling paint. The love seat and two accent chairs were stained. There were metal pieces sticking out from both windows. -Clients #3 and #5's bedroom-Top of ceiling had	V 736	V 736 Facility & Grounds Maintenance The facility administrator and QP inspected and inventoried all areas in need of repair, replacement or painting. The facility administrator has agreed to hire a contractor to address all the areas cited in the SOD. The administrator has been made aware that these things have to be repaired, replaced, etc.. Additionally, the house should be maintained in a safe, clean and orderly manner at all times. The administrator is aware that the work must be completed within 30 days (as of 6/6/24).	

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL032-389	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED R 05/08/2024
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NAME OF PROVIDER OR SUPPLIER DESTINY HOME, INC	STREET ADDRESS, CITY, STATE, ZIP CODE 630 RIPPLING STREAM ROAD DURHAM, NC 27704
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V 736	<p>Continued From page 14</p> <p>approximately 40 black pin sized markings. Wall area near ceiling had approximately 100 black pin sized markings. There were grease stains on the walls. Caulking substance on wall in three separate areas. Outside portion of window had a crack approximately 48 inches long.</p> <p>-Bathroom in hallway-Bath tub had soap scum stains. Door jamb had peeling paint.</p> <p>-Client #2's bedroom-Two dresser drawers were off track. Walls had black stains. Door to bedroom was stained.</p> <p>-Clients #4 and #6's bedroom-A metal piece was sticking out from the window. Bedroom door had scuff marks, brownish and grayish stains</p> <p>-Bathroom in clients #4 and #6's bedroom-One of the window blinds slats was broken on the end. The sink bowl had soap scum. The walls had fading paint and white and dark stains. Floor of shower had black and orange stains. Area around outside of shower had peeling paint.</p> <p>-Client #1's bedroom-Black scuff marks and approximately 10 pieces of tape debris on walls. The light cover had gray electric tape over it.</p> <p>-Front yard area-There were 5 aluminum soft drink cans, approximately 10 pieces of paper and approximately 6 cigarette butts on the ground. Two plastic cups on the front porch.</p> <p>-Door leading to backyard area had peeling paint.</p> <p>-Backyard area-Five twin sized mattresses near tree line. Eight stones and a plastic bag on the ground. A rusted metal chair, a wooden chair and 2 plastic chairs.</p> <p>-Patio area-A mop, 2 plastic buckets and 3 plastic bins. There were 2 wooden pallets and wooden bed frame underneath the patio area.</p> <p>Interview on 5/6/24 with staff #1 confirmed: -The facility and grounds were not maintained in a safe, clean, attractive and orderly manner.</p>	V 736		
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Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL032-389	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED R 05/08/2024
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V 736	<p>Continued From page 15</p> <p>Interview on 5/6/24 with the Chief Executive Officer revealed:</p> <ul style="list-style-type: none"> -They were "trying to get this house together for a while." -She talked to clients about cleaning the facility and most of them will not do it. -Client #1 was the only client who would help clean the facility. -She confirmed the facility and grounds were not maintained in a safe, clean, attractive and orderly manner. <p>This deficiency has been cited 3 time(s) since the original cite on 5/27/21 and must be corrected within 30 days.</p>	V 736		
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