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DESTINY FAMILY CARE HOME #5	1486 DR MARTIN LUTHER KING JR BLVD WARRENTON, NC 27589

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V 000	INITIAL COMMENTS An annual and follow-up survey was completed on April 11, 2025. Deficiencies were cited. This facility is licensed for the following service category: 10A NCAC 27G. 5600A. Supervised Living for Adults with Mental Illness This facility is licensed for 6 and currently has a census of 6. The survey sample consisted of audits of 3 current clients.	V 000		
V 112	27G .0205 (C-D) Assessment/Treatment/Habilitation Plan 10A NCAC 27G .0205 ASSESSMENT AND TREATMENT/HABILITATION OR SERVICE PLAN (c) The plan shall be developed based on the assessment, and in partnership with the client or legally responsible person or both, within 30 days of admission for clients who are expected to receive services beyond 30 days. (d) The plan shall include: (1) client outcome(s) that are anticipated to be achieved by provision of the service and a projected date of achievement; (2) strategies; (3) staff responsible; (4) a schedule for review of the plan at least annually in consultation with the client or legally responsible person or both; (5) basis for evaluation or assessment of outcome achievement; and (6) written consent or agreement by the client or responsible party, or a written statement by the provider stating why such consent could not be obtained.	V 112		

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V 112	Continued From page 1 This Rule is not met as evidenced by: Based on record review and interview, the facility failed to ensure one of three audited clients (#1) treatment plan was developed in partnership with the legally responsible person. The findings are: Review on 4/10/25 of Client #1's record revealed: -Admission date of 2/9/25. -Diagnoses of Schizoaffective Disorder; Depressive Disorder, Not Otherwise Specified; Diabetes Type II; Hypertension. -Treatment plan dated 2/28/25 was without the guardian's signature. Interview on 4/11/25 with the Qualified Professional revealed: -She was the new contract QP for the facility. -She started working for the facility March 2025. -She did not develop client #1's current treatment plan. -She would be responsible to ensure the clients legally responsible person signed off on the treatment plans.	V 112		
V 113	27G .0206 Client Records 10A NCAC 27G .0206 CLIENT RECORDS (a) A client record shall be maintained for each individual admitted to the facility, which shall contain, but need not be limited to: (1) an identification face sheet which includes:	V 113		

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V 113	Continued From page 2 (A) name (last, first, middle, maiden); (B) client record number; (C) date of birth; (D) race, gender and marital status; (E) admission date; (F) discharge date; (2) documentation of mental illness, developmental disabilities or substance abuse diagnosis coded according to DSM IV; (3) documentation of the screening and assessment; (4) treatment/habilitation or service plan; (5) emergency information for each client which shall include the name, address and telephone number of the person to be contacted in case of sudden illness or accident and the name, address and telephone number of the client's preferred physician; (6) a signed statement from the client or legally responsible person granting permission to seek emergency care from a hospital or physician; (7) documentation of services provided; (8) documentation of progress toward outcomes; (9) if applicable: (A) documentation of physical disorders diagnosis according to International Classification of Diseases (ICD-9-CM); (B) medication orders; (C) orders and copies of lab tests; and (D) documentation of medication and administration errors and adverse drug reactions. (b) Each facility shall ensure that information relative to AIDS or related conditions is disclosed only in accordance with the communicable disease laws as specified in G.S. 130A-143.	V 113		

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V 113	Continued From page 3 This Rule is not met as evidenced by: Based on record review and interview, the facility failed to have a signed consent to seek emergency treatment from a hospital or physician for one of three audited clients (#1). The findings are: Review on 4/10/25 of Client #1's record revealed: -Admission date of 2/9/25. -Diagnoses of Schizoaffective Disorder; Depressive Disorder, Not Otherwise Specified; Diabetes Type II; Hypertension. -There was no signed consent granting permission to seek emergency care from the guardian. Interview on 4/11/25 with the Qualified Professional revealed: -She was the new contract QP for the facility. -She started working for the facility March 2025. -Client #1's consent package should be implemented during the admission process. -She would meet with client #1's guardian to sign consent granting permission to seek emergency care.	V 113		
V 114	27G .0207 Emergency Plans and Supplies 10A NCAC 27G .0207 EMERGENCY PLANS AND SUPPLIES (a) Each facility shall develop a written fire plan and a disaster plan and shall make a copy of these plans available to the county emergency services agencies upon request. The plans shall include evacuation procedures and routes.	V 114		

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V 114	Continued From page 4 (b) The plans shall be made available to all staff and evacuation procedures and routes shall be posted in the facility. (c) Fire and disaster drills in a 24-hour facility shall be held at least quarterly and shall be repeated for each shift. Drills shall be conducted under conditions that simulate the facility's response to fire emergencies. (d) Each facility shall have a first aid kit accessible for use. This Rule is not met as evidenced by: Based on record review and interview, the facility failed to conduct fire and disaster drills on each shift at least quarterly. The findings are: Review on 4/10/25 of the facility's fire and disaster drills record revealed: -There was no fire drills conducted on first shift since 9/2024. -There was no disaster drills conducted on first since 9/2024. -Fire and disaster drills were not conducted on each shift at least quarterly. Interview on 4/11/25 with the Qualified Professional revealed: -She was the new contract QP for the facility. -She started working for the facility March 2025. -During visits to the facility she and the administrator would check to ensure drills were being conducted at least quarterly on each shift.	V 114		

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V 118	Continued From page 5	V 118		
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. (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.	V 118		

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V 118	Continued From page 6 This Rule is not met as evidenced by: Based on record review and interviews, the facility failed to ensure one of three clients (#3) had an order to self-administer authorized in writing by the physician. The findings are: Review on 4/10/25 of Client #3's record revealed: -Admission date of 7/7/22. -Diagnoses of Schizoaffective Disorder; Hyperlipidemia; Diabetes Type II DM; Neuropathy. Review on 4/10/25 of Client #3's physicians order dated 2/6/25 revealed: -True Metrix Glucose Test Strip 50 - Check blood sugar once daily. -There was no physician order to self-administer blood sugar checks in the record. Interview on 4/10/25 with Staff #1 revealed: -Client #3 was checking his blood sugar before he started working at the facility on 12/2024. -Client #3 checked his blood sugar every morning. -He supervised client #3 checking his blood sugar and documented on the medication administration record. Interview on 4/11/25 with the Qualified Professional revealed: -She started working for the facility March 2025. -She was the new contract QP for the facility. -She was not aware client #3 did not have an order to self-administer his blood sugar checks. -She would schedule client #3 an appointment with his physician to obtain a written order to self-administer his blood sugar checks.	V 118		

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V 736	Continued From page 7	V 736		
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 is not maintained in a safe, clean and attractive manner. The findings are: Observation on 4/10/25 at 1:00 p.m. of the facility revealed: Shared bedroom for client #2 and client #3 revealed: -There were two blind window slats broken. -There was a hole about three inches wide on the side of client #3's bed. -The bedroom doorknob was loose and hanging off the door. -Large pieces of the bedroom wood door was peeling and hanging from the door. Shared bedroom for client #4 and client #5 revealed: -There were three blind window slats broken. -There was a hole in the tile floor about 20 inches wide and 20 inches long exposing the floor underneath. -The closet doorknob was loose and hanging off the door. -There were brown dirt stains on the closet and bedroom door. -The bathroom in the hallway had brown rust stains around the bathtub and baseboard. -The wood on kitchen back door next to the stove was peeling and the cabinets below the sink paint were peeling.	V 736		

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V 736	Continued From page 8 Interview on 4/11/25 with the Qualified Professional revealed: -They would see what the landlord could fix. -The administrator would contact her maintenance service to inspect and repair the items listed.	V 736		