

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 05/22/2025
NAME OF PROVIDER OR SUPPLIER DESTINY HOME, INC		STREET ADDRESS, CITY, STATE, ZIP CODE 630 RIPPLING STREAM ROAD DURHAM, NC 27704		
(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
V 000	INITIAL COMMENTS An annual, complaint and follow up survey was completed on May 22, 2025. The complaint was unsubstantiated (intake #NC00230608). 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 5. The survey sample consisted of audits of 3 current clients.	V 000		
V 107	27G .0202 (A-E) Personnel Requirements 10A NCAC 27G .0202 PERSONNEL REQUIREMENTS (a) All facilities shall have a written job description for the director and each staff position which: (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. (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: (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	V 107		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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V 107	<p>Continued From page 1</p> <p>neglect listed on the North Carolina Health Care Personnel Registry.</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 review and interview, the facility failed to have a complete personnel record affecting one of three audited staff (#2). The findings are:</p> <p>Review on 5/20/25 of the personnel record for staff #2 revealed: -Hire date of 8/5/21. -She was hired as a Habilitation Technician. -No documentation of educational verification.</p> <p>Interview on 5/20/25 with the Director revealed: -She was responsible for personnel records.</p>	V 107		

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V 107	Continued From page 2 -She looked and could not locate verification of education for staff #2. -She acknowledged that she did not have educational documentation for staff #2. This deficiency has been cited 4 times since the original cite on 5/27/21 and must be corrected within 30 days.	V 107		
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 interview, the facility and its grounds were not maintained in a clean, safe, and attractive manner. The findings are: Observation on 5/20/25 at approximately 11:00 a.m. of the Kitchen area revealed: -Window curtain above sink was faded and stained. Observation on 5/20/25 at 11:05 a.m. of the Dining Room area revealed: -A love seat and two accent chairs were stained with dark circular marks. -A strip of metal, approximately 24" long x 2" wide, sticking out from a window. Observation on 5/20/25 at 11:10 a.m. of Bathroom #1 (in hallway) revealed: -Black soap scum stains in the bathtub.	V 736		

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V 736	<p>Continued From page 3</p> <p>Observation on 5/20/25 at 11:15 a.m. of Bedroom #1 revealed: -One dresser drawer off track. -Black stains of various sizes on wall.</p> <p>Observation on 5/20/25 at 11:20 a.m. of Bedroom #2 revealed: -Two strips of metal, approximately 24" long x 2" wide, sticking out from a window.</p> <p>Observation on 5/20/25 at 11:25 a.m. of Bathroom #2 revealed: -One blind window slat broken at the end. -Black soap scum in bowl of sink. -A full size mattress laid on top of a foldable table. -Black stains on floor of shower.</p> <p>Observation on 5/20/25 at 11:27 p.m. of the Backyard area revealed: -7 1/2 cinder blocks on the ground. -Toilet stool in box sat against back of facility.</p> <p>Observation on 5/20/25 at 11:28 p.m. of the Deck area revealed: -2 wooden pallets underneath the patio deck. Interview on 5/20/25 with the Qualified Professional revealed: -She and the Director were aware of the previous cites and the director corrected most of them. -She would conduct a walk through with the director and address the areas of concern. -She confirmed the facility, and grounds were not maintained in a safe, clean, attractive and orderly manner.</p> <p>This deficiency has been cited 4 times since the original cite on 5/27/21 and must be corrected within 30 days.</p>	V 736			