

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL032-370	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 11/05/2025
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NAME OF PROVIDER OR SUPPLIER D H D GROUP HOME	STREET ADDRESS, CITY, STATE, ZIP CODE 1509 OAK FOREST DR HILLSBOROUGH, NC 27278
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V 000	<p>INITIAL COMMENTS</p> <p>An annual and complaint survey was completed on November 5, 2025. The complaint was unsubstantiated (intake #NC00234052). 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>This facility is licensed for 6 and has a current 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 	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 two audited paraprofessional staff (#2). The findings are:</p> <p>Review on 11/5/25 of the personnel record for staff #2 revealed: -Date of hire was 10/20/25. -He was hired as a Habilitation Technician. -No documentation of educational verification.</p> <p>Interview on 11/5/25 with the Qualified Professional revealed:</p>	V 107		

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V 107	Continued From page 2 -"I didn't think about asking [staff #1] to provide a copy of his education verification." -"It's my fault it was not in his personnel record." -She confirmed the facility failed to have a complete personnel record for staff #1.	V 107		
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	<p>Continued From page 3</p> <p>This Rule is not met as evidenced by: Based on record reviews and interview, the facility failed to obtain a written consent by a responsible party for a client's treatment plan affecting two of three audited clients (#2 and #3). The findings are:</p> <p>Reviews on 10/28/25 and 10/29/25 of client #2's record revealed: -Date of admission was 6/15/15. -Diagnoses was Major Depressive Disorder, Agoraphobia with Panic Disorder, Obsessive Compulsive Disorder and Intellectual Disability-Unspecified. -Person Centered Plan (PCP) dated 5/1/25 had no written consent or agreement by client #2's responsible party.</p> <p>Reviews on 10/28/25 and 10/29/25 of client #3's record revealed: -Date of admission was 10/8/12. -Diagnoses was Schizoaffective Disorder-bipolar type, Dementia, Obesity and Hypothyroidism. -PCP dated 10/9/25 had no written consent or agreement by client #3's responsible party.</p> <p>Interview on 10/29/25 with the Qualified Professional revealed: -The plans were signed by the client's guardians. -"I think [staff #1] possibly misplaced some of the client's documentation." -She confirmed the facility failed to have written consent or agreement by the client or responsible party for clients #1 and #2.</p>	V 112		

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V 118	Continued From page 4	V 118		
V 118	<p>27G .0209 (C) Medication Requirements</p> <p>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.</p> <p>This Rule is not met as evidenced by:</p>	V 118		

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V 118	<p>Continued From page 5</p> <p>Based on observation, record reviews and interviews, the facility failed to keep the MAR current affecting one of three audited clients (#2) and failed to ensure medications were administered by an unlicensed person trained by a registered nurse, pharmacist or other legally qualified person and privileged to prepare and administer medications affecting one of two audited paraprofessional staff (#2). The findings are:</p> <p>1. Reviews on 10/28/25 and 10/29/25 of client #2's record revealed: -Date of admission was 6/15/15. -Diagnoses was Major Depressive Disorder, Agoraphobia with Panic Disorder, Obsessive Compulsive Disorder and Intellectual Disability-Unspecified.</p> <p>Observation on 10/29/25 at approximately 2:06 pm revealed: -Cobenfy 125 milligrams (mg) (Schizophrenia) was available. -The medication was dispensed on 7/25/25.</p> <p>Review on 10/29/25 of a physician's orders for client #2 revealed: -Order dated 3/31/25 for Cobenfy 125 mg, one capsule twice a day.</p> <p>Reviews on 10/29/25 and 11/5/25 of MARs for client #2 revealed:</p> <p>No staff initials to indicate the medication was administered by staff- November 2025-11/1 thru 11/4 October 2025-10/1 thru 10/31 September 2025-9/1 thru 9/30 August 2025-8/1 thru 8/31</p>	V 118		

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V 118	<p>Continued From page 6</p> <p>Interview on 11/5/25 with client #1 revealed: -He knew which medication he took daily. -He has been taking the Cobenfy for a "few months." -"I take the Cobenfy daily, I never refuse that medication."</p> <p>Attempted interviews on 10/28/25 and 11/4/25 with staff #1 revealed: -She was called and did not answer. -Text messages were sent requesting the calls be returned. -The calls were never returned prior to exit on 11/5/25.</p> <p>Interview on 10/29/25 with staff #2 revealed: -Client #2 was administered the Cobenfy daily. -He was not sure why that medication was not written on the MARs. -He confirmed the MARs were not kept current for client #2.</p> <p>Interviews on 10/29/25 and 11/5/25 with the Qualified Professional revealed: -There were no issues with client #2 getting his prescribed medications. -She last reviewed the medication and MARs "around April or May 2025." -Staff #1 did not always tell them about issues with the medication. -"[Staff #1] was not always forthcoming with us." -She wasn't sure why staff had not written Cobenfy on the MARs for client #2. -She confirmed the MARs were not kept current for client #2.</p> <p>2. Review on 11/5/25 of the personnel record for staff #2 revealed: -Date of hire was 10/20/25. -He was hired as a Habilitation Technician.</p>	V 118		

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V 118	<p>Continued From page 7</p> <p>-Medication aide training completed on 8/25/20. -There was no documentation of medication administration training for staff #2.</p> <p>Reviews on 10/28/25 and 10/29/25 of client #1's record revealed: -Date of admission was 2/6/13. -Diagnoses was Schizoaffective Disorder-unspecified, Borderline Personality Disorder, Obesity, Chronic Kidney Disease and Gastroesophageal Reflux Disease.</p> <p>Review on 11/5/25 of MARs for client #1 revealed: -August, September and October 2025-Staff #2's initials were listed.</p> <p>Review on 11/5/25 of MARs for client #2 revealed: -August, September and October 2025-Staff #2's initials were listed.</p> <p>Reviews on 10/28/25 and 10/29/25 of client #3's record revealed: -Date of admission was 10/8/12. -Diagnoses was Schizoaffective Disorder-bipolar type, Dementia, Obesity and Hypothyroidism.</p> <p>Review on 11/5/25 of MARs for client #3 revealed: -August, September and October 2025-Staff #2's initials were listed.</p> <p>Interviews on 10/29/25 and 11/5/25 with staff #2 revealed: -He had been working at the facility since October 2025. -He administered medication to the clients during his shift at the group home. -He never received medication administration</p>	V 118		

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V 118	Continued From page 8 training with this facility. Interview on 11/5/25 with the Qualified Professional revealed: -Staff #2 had not been trained by this agency to administer medication. -She was aware that staff #2 had the medication aide training and not medication administration training. -She confirmed there was no documentation of medication administration training for staff #2.	V 118		