

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL032-404	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 04/23/2026
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NAME OF PROVIDER OR SUPPLIER DON'S ADULT CARE GROUP HOME	STREET ADDRESS, CITY, STATE, ZIP CODE 2015 ELLIS ROAD DURHAM, NC 27703
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V 000	<p>INITIAL COMMENTS</p> <p>An annual survey was completed on April 23, 2026. 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 5 and has a current census of 4. The survey sample consisted of audits of 3 current clients.</p>	V 000		
V 110	<p>27G .0204 Training/Supervision Paraprofessionals</p> <p>10A NCAC 27G .0204 COMPETENCIES AND SUPERVISION OF PARAPROFESSIONALS</p> <p>(a) There shall be no privileging requirements for paraprofessionals.</p> <p>(b) Paraprofessionals shall be supervised by an associate professional or by a qualified professional as specified in Rule .0104 of this Subchapter.</p> <p>(c) Paraprofessionals shall demonstrate knowledge, skills and abilities required by the population served.</p> <p>(d) At such time as a competency-based employment system is established by rulemaking, then qualified professionals and associate professionals shall demonstrate competence.</p> <p>(e) Competence shall be demonstrated by exhibiting core skills including:</p> <ol style="list-style-type: none"> (1) technical knowledge; (2) cultural awareness; (3) analytical skills; (4) decision-making; (5) interpersonal skills; (6) communication skills; and (7) clinical skills. <p>(f) The governing body for each facility shall</p>	V 110		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE _____ TITLE _____ (X6) DATE _____

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V 110	<p>Continued From page 1</p> <p>develop and implement policies and procedures for the initiation of the individualized supervision plan upon hiring each paraprofessional.</p> <p>This Rule is not met as evidenced by: Based on record review and interview, the facility failed to have a Qualified Professional (QP). The findings are:</p> <p>Review on 4/23/26 of the facility's personnel records revealed: -There was no personnel file for a QP.</p> <p>Interview on 2/23/26 with the Licensee revealed: -"I have no QP right now." -The Former QP retired a few months ago and she had not been able to secure a new QP. -She was in the process of hiring a QP for the facility. -A couple of months ago, sister facility was cited for the same thing, so she was expecting to be cited again. -She confirmed the facility failed to have a QP.</p>	V 110		
V 114	<p>27G .0207 Emergency Plans and Supplies</p> <p>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</p>	V 114		

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V 114	<p>Continued From page 2</p> <p>request. The plans shall include evacuation procedures and routes.</p> <p>(b) The plans shall be made available to all staff and evacuation procedures and routes shall be posted in the facility.</p> <p>(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.</p> <p>(d) Each facility shall have a first aid kit accessible for use.</p> <p>This Rule is not met as evidenced by: Based on record review and interviews, the facility failed to ensure fire and disaster drills were conducted quarterly and on each shift. The findings are:</p> <p>Review on 4/23/26 of the facility's fire drills log from April 2025- April 2026 revealed: -There were no fire drills completed for 3rd shift for the 2nd quarter (April, May, June) of 2025. -There were no fire drills completed for 1st and 2nd shift for the 3rd quarter (July, August, September) of 2025. -There were no fire drills completed for 2nd shift for the 4th quarter (October, November, December) of 2025. -There were no fire drills completed for 1st and 3rd shift for the 1st quarter (January, February, March) of 2026.</p> <p>Review on 4/23/26 of the facility's disaster drills log from April 2025-April 2026 revealed: -There were no disaster drills completed for 1st and 3rd shift for the 2nd quarter (April, May, June) of 2025.</p>	V 114		

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V 114	<p>Continued From page 3</p> <ul style="list-style-type: none"> -There were no disaster drills completed for 1st and 2nd shift for the 3rd quarter (July, August, September) of 2025. -There were no disaster drills completed for 1st and 3rd shift for the 4th quarter (October, November, December) of 2025. -There were no disaster drills completed for the 1st quarter (January, February, March) of 2026. <p>Interview on 4/23/26 with Client #1 revealed:</p> <ul style="list-style-type: none"> -Informed that fire drills were being done. -He was able to describe what to do in the event of a fire. "We go out to the back and walk to the tree in the back." -He was able to describe what to do in the event of a tornado. "We go to the hallway." <p>Interview on 4/23/26 with Client #2 revealed:</p> <ul style="list-style-type: none"> -Informed that emergency drills being done. -Clients went to the back for a fire drill. <p>Interview on 4/23/26 with Client #3 revealed:</p> <ul style="list-style-type: none"> -Informed that emergency drills were being done. -He was able to describe what to do in the event of a fire. "We go out to the back and meet by the tree." -He was also able to describe what to do in the event of a tornado. "We go to the hallway and close all doors." <p>Interview on 4/23/26 with the House Manager revealed:</p> <ul style="list-style-type: none"> -Staff was a "live in" staff. -Staff spent two weeks at the facility and would then be relieved for a week. -Facility conducted three shifts only for emergency drills. First shift was from 7 am to 3 pm. Second shift was from 3 pm to 11 pm. Third shift was from 11 pm to 7 am. -She acknowledged that drills listed on the log 	V 114		

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V 114	Continued From page 4 were all the drills performed at the facility. -She had been confused on when and how often the emergency drills had be conducted. -She acknowledged the facility failed to ensure fire and disaster drills were conducted quarterly on each shift.	V 114		
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	<p>Continued From page 5</p> <p>This Rule is not met as evidenced by: Based on record reviews and interviews, the facility failed to ensure medications were administered by an unlicensed person trained by a registered nurse (RN), pharmacist or other legally qualified person and privileged to prepare and administer medications affecting one of three audited staff (#5). The findings are:</p> <p>Review on 4/23/26 of Staff #5's personnel records revealed: -Date of hire was 8/20/25. -Hired as a Supervisor In Charge. -Medication Administration training was completed on 8/20/25 by a Licensed Practical Nurse (LPN).</p> <p>Interview on 4/23/26 with the House Manager revealed: -She was a live in staff. -She would work for a couple of weeks and then be relieved by Staff #5. -Staff #5 worked for a week at the facility and she would then return to work. -Staff #5 administered the medications when he would be working at the facility.</p> <p>-Interview on 4/23/26 with the Licensee revealed: -She was aware that Staff #5's medication administration training was completed by an LPN. -The LPN worked for the pharmacy and was sent by them to do the medication administration training.</p>	V 118		

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V 118	Continued From page 6 -She confirmed there was no documentation of medication administration training for Staff #5 completed by a RN, pharmacist or other legally qualified person.	V 118		
V 120	27G .0209 (E) Medication Requirements 10A NCAC 27G .0209 MEDICATION REQUIREMENTS (e) Medication Storage: (1) All medication shall be stored: (A) in a securely locked cabinet in a clean, well-lighted, ventilated room between 59 degrees and 86 degrees Fahrenheit; (B) in a refrigerator, if required, between 36 degrees and 46 degrees Fahrenheit. If the refrigerator is used for food items, medications shall be kept in a separate, locked compartment or container; (C) separately for each client; (D) separately for external and internal use; (E) in a secure manner if approved by a physician for a client to self-medicate. (2) Each facility that maintains stocks of controlled substances shall be currently registered under the North Carolina Controlled Substances Act, G.S. 90, Article 5, including any subsequent amendments. This Rule is not met as evidenced by: Based on observation and interview, the facility failed to ensure medications were kept in a securely locked cabinet affecting three of three audited clients (#1, #2 and #3). The findings are:	V 120		

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V 120	<p>Continued From page 7</p> <p>Observation on 4/23/26 at approximately 11:25 am of the common area/tv room revealed:</p> <ul style="list-style-type: none"> -Medications were being kept inside a two drawer file cabinet. -File cabinet was located next to the couch. -Drawers were unlocked. -All of the clients' medications were available for administration. <p>Review on 4/23/26 of Client #1's record revealed:</p> <ul style="list-style-type: none"> -Admission date of 4/10/23. -Diagnoses of Developmental Delay, Schizophrenia, Drug Induced Parkinsonism; Hypertension. -Physician's orders dated 3/23/26 for Doxepin 25 milligrams (mg), take 1 capsule daily. -Physician's orders dated 4/17/26 for: <ul style="list-style-type: none"> -Aripiprazole 15 mg, take one tablet daily. -Atorvastatin 40 mg, take one tablet daily. -Amlodipine Besylate 10 mg, take one tablet daily. -Diazepam 2 mg, take one tablet twice daily. -Olanzapine 10 mg, take one tablet daily with 20 mg tablet (30 mg total). -Olanzapine 20 mg, take one tablet daily with 10 mg tablet (30 mg total). -Fluticasone Propionate 50 mcg, Place 2 sprays into both nostrils once daily. <p>Review on 4/23/26 of Client #2's record revealed:</p> <ul style="list-style-type: none"> -Admission date of 3/2/23. -Diagnoses of Chronic Schizophrenia; Type 2 Diabetes; Hyperlipidemia. -Physician's orders dated 4/17/26 for: <ul style="list-style-type: none"> -Austedo 12 mg, take one tablet daily. -Docusate Sodium 100 mg, take one capsule twice daily. -Ferrous Sulfate 220 mg/5ml, take 6.8 mls by mouth every day for supplement. -Vitamin D3 1,000 units, take one capsule 	V 120		

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V 120	<p>Continued From page 8</p> <p>daily.</p> <p>Review on 4/23/26 of Client #3's record revealed:</p> <ul style="list-style-type: none"> -Admission date of 3/2/23. -Diagnoses of Schizophrenia; Microcytic Anemia; Vitamin D Deficiency; Castroeseplagah Retrolic Disease. -Physician's orders dated 5/20/25 for Loratadine 10 mg, take one tablet daily. -Physician's orders dated 9/15/25 for Fanapt 4 mg, take one tablets twice daily. -Physician's orders dated 12/2/25 for: <ul style="list-style-type: none"> -Atorvastatin 20 mg, take one capsule daily at night. -Carvedilol 12.5 mg, take one tablet every 12 hours, -Clozapine 100 mg, take five tablets every night at bedtime. -Glipizide 10 mg, take one tablet daily. -Lisinopril 5 mg, take one tablet every 12 hours. -Lithium Carbonate 300 mg, take one capsule daily in the morning. -Lithium Carbonate 300 mg, take two capsules daily at bedtime. -Metformin 500 mg, take one tablet daily. -Polyethylene Glycol 3350 Powder, mix one capful (17gm) in 4 to 8 ounces of liquid and drink twice weekly. -Physician's orders dated 1/27/26 for Vascepa 1 gm, take one capsule daily. <p>Interview on 4/23/26 with the House Manager revealed:</p> <ul style="list-style-type: none"> -Medication cabinet stayed unlocked because the key had broken off and had not been replaced. -She was unable to lock the medications cabinet. -She was unable to say how long the cabinet's key/lock had been broken. -Although clients were allowed to go into the 	V 120		

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V 120	Continued From page 9 common area, they preferred to stay in their rooms to watch television. -She confirmed the facility failed to ensure medications were kept in a securely locked cabinet.	V 120		