

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL092-563</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>11/08/2018</b>
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NAME OF PROVIDER OR SUPPLIER  <b>NEW BEGINNINGS HEALTH CARE</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>5309 KYLE DRIVE RALEIGH, NC 27616</b>
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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
V 000	<p><b>INITIAL COMMENTS</b></p> <p>An Annual Survey was completed 11/8/18. No deficiencies were cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .1700 Residential Treatment Level III for Adolescents</p>	V 000		
V 120	<p><b>27G .0209 (E) Medication Requirements</b></p> <p><b>10A NCAC 27G .0209 MEDICATION REQUIREMENTS</b></p> <p>(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.</p> <p>This Rule is not met as evidenced by: Based on observation and interview the facility failed to ensure medication was stored in a securely locked box for one of one clients from a sister facility (SF#1). The findings are:</p>	V 120		

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

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V 120	<p>Continued From page 1</p> <p>Observation on 11/7/18 at 2:30 PM revealed: -SF #1 Novolog Flexpen stored in side of refrigerator door.</p> <p>Interview on 11/7/18 staff #1 stated: -SF #1 often was in the home for group activities, so they keep her diabetes medication there in case she needed it. -Not sure where the lock box is located.</p> <p>During interview on 11/8/18 The Licensee stated: -The medication for SF #1 should have been in the locked refrigerator located in the home. -Not sure why staff had placed it in the main refrigerator. -This has been addressed with staff.</p>	V 120		
V 539	<p>27F .0102 Client Rights - Living Environment</p> <p>10A NCAC 27F .0102 LIVING ENVIRONMENT</p> <p>(a) Each client shall be provided: (1) an atmosphere conducive to uninterrupted sleep during scheduled sleeping hours, consistent with the types of services being provided and the type of clients being served; and (2) accessible areas for personal privacy, for at least limited periods of time, unless determined inappropriate by the treatment or habilitation team.</p> <p>(b) Each client shall be free to suitably decorate his room, or his portion of a multi-resident room, with respect to choice, normalization principles, and with respect for the physical structure. Any restrictions on this freedom shall be carried out in accordance with governing body policy.</p>	V 539		

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V 539	<p>Continued From page 2</p> <p>This Rule is not met as evidenced by: Based on observation and interview the facility failed to ensure privacy for four of eight clients (#1, #2, #3, #4) by removing the doors from the bedrooms. The findings are:</p> <p>Observation on 11/7/18 at 2:30 PM revealed: -Bedroom door not present on client #1, #2 bedroom. -Bedroom door not present on client #3, #4 bedroom.</p> <p>During interview on 11/7/18 Client #1 stated: -Staff removed her bedroom door because she was slamming it so much. -Not sure when they plan to put it back on .</p> <p>During interview on 11/7/18 staff #1 stated: -Client #1 bedroom door was removed because of her history of harming herself. -Client #1 would get upset and lock her self in the bedroom and they could not ensure safety. -Not sure why client #3 and #4 door was removed. -Clients can change clothes in the bathroom. -There are male staff employed in the home who work all shifts.</p> <p>During interview on 11/8/18 The Licensee stated: -Doors were removed because "I want an open door policy." -Clients slam doors, punch holes and lock themselves in their room. -Clients have privacy in the bathroom. -Male staff do work in the home. -Not aware bedroom doors could not be removed.</p>	V 539		