

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL034-399	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 05/29/2024
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NAME OF PROVIDER OR SUPPLIER HOME OF A SECOND CHANCE, I	STREET ADDRESS, CITY, STATE, ZIP CODE 6891 NEELY WAY RURAL HALL, NC 27045
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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>INITIAL COMMENTS</p> <p>A complaint survey was completed on 5/29/24. The complaints were unsubstantiated (intake #'s NC00216538, NC00216546, and NC00216815). Deficiencies were cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .1700 Residential Treatment Staff Secure for Children or Adolescents.</p> <p>The facility is licensed for 4 and currently has a census of 2. The survey sample consisted of audits of 2 current clients and 2 former clients.</p>	V 000		
V 318	<p>13O .0102 HCPR - 24 Hour Reporting</p> <p>10A NCAC 13O .0102 INVESTIGATING AND REPORTING HEALTH CARE PERSONNEL The reporting by health care facilities to the Department of all allegations against health care personnel as defined in G.S. 131E-256 (a)(1), including injuries of unknown source, shall be done within 24 hours of the health care facility becoming aware of the allegation. The results of the health care facility's investigation shall be submitted to the Department in accordance with G.S. 131E-256(g).</p> <p>This Rule is not met as evidenced by: Based on interviews, the facility failed to report all allegations against health care personnel within</p>	V 318		

Division of Health Service Regulation LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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V 318	<p>Continued From page 1</p> <p>24 hours of the health care facility becoming aware of the allegation. The findings are:</p> <p>Review on 5/20/24 of reports made by the facility against health care personnel revealed:</p> <p>-Report submitted on 4/27/24 by the Director/Qualified Professional (D/QP)...Date of Incident: 4/24/24..."After elopement, [Client #1] reported to the police that a staff member told him that he was going to take his butt and pulled his own pants down in the kitchen last Saturday night. CPS (Child Protective Services) visited and reported that there was a report that a staff member said I will take your butt and picked [Client #1] and another client up and pull their pant down. CPS also reported that the clients reported that another staff member has smoked marijuana at the facility and offered it to clients. They also reported that a bag of coke fell out of a staff member's pocket"...No information was submitted for the Allegations, Investigation Results, Department of Social Services Information, Police Information, Additional Information or Accused Staff.</p> <p>-Report submitted on 4/27/24 by the D/QP...Date of Incident: 4/24/24..."After elopement, CPS reported to the facility that [Former Client (FC) #4] made allegations of inappropriate comment sexual in nature by staff member. [FC #4] reported that a staff member pulled down his pants and another client's pants in the kitchen. He also reported that another staff has smoked marijuana at the facility and offered to the clients. He also reported that another staff member had a bag of coke that fell out of their pocket"...No information was submitted for the Allegations, Investigation Results, Department of Social Services Information, Police Information, Additional Information or Accused Staff.</p>	V 318		

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V 318	Continued From page 2 Interview on 5/23/24 with the D/QP revealed: -It was her responsibility to timely report allegations against health care personnel; -She thought she had 72 hours to report allegations against health care personnel; -The additional information needed to complete the report regarding FC #4, initially submitted on 4/27/24 had not been submitted because she had been unable to open the report; -The additional information needed to complete the report regarding client #1, initially submitted on 4/27/24 was added to the report on 5/1/24.	V 318		