	T OF DEFICIENCIES OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:		CONSTRUCTION		E SURVEY PLETED
		BERTH IO/THOM NOMBER.	A. BUILDING:			
		MHL001-169	B. WING		C 10/02/2024	
NAME OF F	PROVIDER OR SUPPLIER	STREET A	DDRESS, CITY, ST	TATE, ZIP CODE		
JUST IN	TIME YOUTH SERVIC	SES II	WOOD DRIVE GTON, NC 272	15		
(X4) ID PREFIX TAG	(EACH DEFICIENC)	TEMENT OF DEFICIENCIES / MUST BE PRECEDED BY FULL SC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF (EACH CORRECTIVE AC CROSS-REFERENCED TO DEFICIENC	TION SHOULD BE THE APPROPRIATE	(X5) COMPLET DATE
V 000	INITIAL COMMENT	rs	V 000			
	2024. Three comple (intakes #NC00216 #NC00217183). Or	take #NC00221752).				
	category: 10A NCA	sed for the following service C 27G .1300 Residential s for Children & Adolescents.				
	census of 6. The su	sed for 6 and has a current urvey sample consisted of clients and 1 former client.				
V 132	G.S. 131E-256(G) I Allegations, & Prote		V 132			
	REGISTRY (g) Health care faci Department is notif health care personn unknown source, w	EALTH CARE PERSONNEL lities shall ensure that the ied of all allegations against hel, including injuries of thich appear to be related to odivision (a)(1) of this section.				
	facility or a person f as defined by G.S. as defined by G.S. b. Misappropriatio in a health care fac (b) of this section in care services as de hospice services as	se of a resident in a healthcare to whom home care services 131E-136 or hospice services 131E-201 are being provided. n of the property of a resident ility, as defined in subsection ncluding places where home fined by G.S. 131E-136 or s defined by G.S. 131E-201				
	healthcare facility.	n of the property of a igs belonging to a health care				

Division	of Health Service Re	egulation			FORM	APPROVED
STATEME	NT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:		E CONSTRUCTION	COM	E SURVEY PLETED
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NAME OF	PROVIDER OR SUPPLIER	STREET AI	DDRESS, CITY, S	TATE, ZIP CODE		
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3001 IN		BURLING	GTON, NC 27	215		
(X4) ID PREFIX TAG	(EACH DEFICIENCY	TEMENT OF DEFICIENCIES / MUST BE PRECEDED BY FULL SC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF C (EACH CORRECTIVE ACTI CROSS-REFERENCED TO TH DEFICIENCY	ON SHOULD BE HE APPROPRIATE	(X5) COMPLETE DATE
V 132	Continued From pa	ge 1	V 132			
	facility or to a patient e. Fraud against a a patient or client for providing services). Facilities must hav acts are investigate to protect residents investigation is in prinvestigations must Department within f notification to the D This Rule is not me Based on record re facility failed to prov allegation of abuse The findings are:	nt or client. health care facility or against or whom the employee is e evidence that all alleged ad and must make every effort from harm while the rogress. The results of all be reported to the five working days of the initial epartment.				
	revealed: -Admission date of -He was 15 years o -Discharged on 5/3, -Diagnoses of Majo episode, with psych Stress Disorder. Review on 5/3/24 o revealed: -He was hired on 5/ -He was hired as a Review on 8/27/24	2/23/24. ld. /24. or Depressive Disorder, Single notic Features; Posttraumatic f Staff #1's personnel record /15/23. Paraprofessional. of an arrest report from the				
Division of H	local law enforceme revealed: -Date of report was -"Arrestee Informat -Type of arrest: Tak -Charge #1: Rape- -Charge #2: Indece lealth Service Regulation	ion: [Staff #1]. en into custody. 2nd degree.				

STATEMEN	of Health Service Re NT OF DEFICIENCIES OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE A. BUILDING: _	CONSTRUCTION	COM	E SURVEY PLETED C
		MHL001-169	B. WING			02/2024
NAME OF	PROVIDER OR SUPPLIER	STREET AD	DRESS, CITY, S	TATE, ZIP CODE		
IUST IN	TIME YOUTH SERVIC	CES II	NOOD DRIVE TON, NC 272			
(X4) ID PREFIX TAG	(EACH DEFICIENC)	ATEMENT OF DEFICIENCIES Y MUST BE PRECEDED BY FULL SC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF (EACH CORRECTIVE ACT CROSS-REFERENCED TO T DEFICIENC	ION SHOULD BE HE APPROPRIATE	(X5) COMPLETE DATE
V 132	Continued From pa	nge 2	V 132			
	-Charge #3: Statutory rape of a child <15 or =15. -Case status: Closed/cleared."					
	conclusion signed I revealed: -"Just in Time Youth removed the employ JITYS at this time f #1] is not a threat to the group home (fa outstanding employ over a year, withou complaint from the the homes (facilitie they feel safe being serious allegation, (Former Client #6) against [Staff #1], a himself. Currently, (Deoxyribonucleic a have been filed to s committed the criminjustice to put this an allegation as suckids (clients) in the informed and if the a threat to their chill better to wait for the conduct their invest decorative Military of States) 10 years ar there is not enough [Staff #1]. JITYS wi [local law enforcem	-				

Division	of Health Service Re	egulation			FORM	APPROVED
STATEME	NT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE A. BUILDING:			E SURVEY PLETED
		MHL001-169			C 10/02/2024	
NAME OF	PROVIDER OR SUPPLIER	STREET AD	DRESS, CITY, S	TATE, ZIP CODE		
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JUST IN	TIME YOUTH SERVIC	SES II	TON, NC 272			
(X4) ID	_	TEMENT OF DEFICIENCIES	ID	PROVIDER'S PLAN OF CO		(X5)
PREFIX TAG		VMUST BE PRECEDED BY FULL SC IDENTIFYING INFORMATION)	PREFIX TAG	(EACH CORRECTIVE ACTION CROSS-REFERENCED TO THE DEFICIENCY)		COMPLETE DATE
V 132	Continued From pa	ge 3	V 132			
	on 4/27/24. -"Allegation was that client's room- [Form had been watching walked in the room. masturbating and w him 'not to'. He (For [Staff #1] if he want [Former Client #6] t [Staff #1]. [Staff #1] [Staff #1] then clear Client #6]'s shirt. [F told [Staff #2] at the -The detective was going to work at and an investigation was -The detective was gap of time it took b occurred to when th the owner/administr -Evidence was colle -There was semen -DNA was taken fro swab. -All evidence was s -"It may take severa -She did not know h the DNA results. "It the results to get ba -She spoke with the "Owner/Administrat (Former Client #6). is very religious. His to do something like 8/27/24: -Staff #1 was arrest summoned by the p -Staff #1 was arrest	"concerned" about Staff #1 other facility with agency while s still on. also "concerned" about the between when the allegation he police were contacted by rator. ected. on the client's shirt. on the client's shirt. m Staff #1's mouth with a ent to a laboratory. al weeks for the results." how long it would take to get may take several weeks for ack." e owner/administrator. or did not believe the client Reported that staff (Staff #1) s religion would not allow him e that."				

	IT OF DEFICIENCIES OF CORRECTION	egulation (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE A. BUILDING: _	CONSTRUCTION	СОМ	E SURVEY PLETED C
		MHL001-169	B. WING			02/2024
NAME OF F	PROVIDER OR SUPPLIER	STREET AL	DRESS, CITY, ST	TATE, ZIP CODE		
IUST IN	TIME YOUTH SERVIC		WOOD DRIVE GTON, NC 272			
(X4) ID	SUMMARY STA	ATEMENT OF DEFICIENCIES	ID	PROVIDER'S PLAN OF	CORRECTION	(X5)
PRÉFIX TAG		Y MUST BE PRECEDED BY FULL SC IDENTIFYING INFORMATION)	PREFIX TAG	(EACH CORRECTIVE ACT CROSS-REFERENCED TO T DEFICIENC	HE APPROPRIATE	COMPLET DATE
V 132	Continued From pa	age 4	V 132			
	that it belonged to -Source came from -Juvenile (Former (present in the sam	n Staff #1. Client #6)'s DNA was not				
	Owner/Administrate 5/3/24: -"[Former Client #6 doing something in opened the door ar going and to not ste pulled down [Staff a allowed him to give -"[Staff #1] said tha Client #6)'s door tw barricaded self. He open and noticed th watching gay porto (Former Client #6) off and told him (Fo going to report this -She started her int -She interviewed th facility.	b] said that he was in his room appropriate, and that [Staff #1] and that he told him to keep op. He (Former Client #6) then #1]'s pants and [Staff #1] him oral sex." It he knocked on his (Former vice, but [Former Client #6] had (Staff #1) pushed the door that [Former Client #6] was ography. He (Staff #1) told him to stop. He (Staff #1) cut the two ormer Client #6) that he was to the Owner/Administrator." ternal investigation. he clients and the staff at the				
	Director) investigat police about this in allegation. -Police came to the -"Police then got [S gave his DNA." -"[Former Client #6 behaviors at the ho and going to other got suspended at the caught giving oral s	Staff #1]'s DNA. He willingly b) had been displaying some bome (facility). Getting naked boys (clients) rooms. He also he school for 5 days for getting sex at the school." b) had made other false				

Division of Health Sel STATE FORM

YLCP11

If continuation sheet 5 of 25

PREFIX TAG (EACH DEFICIENCY MU REGULATORY OR LSC II V 132 Continued From page may take up to a monti-Former Client #6 said gone before the results -"[Former Client #6] ha word against [Staff #1]	MHL001-169 STREET AI	B. WING			С
JUST IN TIME YOUTH SERVICES(X4) ID PREFIX TAGSUMMARY STATEM (EACH DEFICIENCY MU REGULATORY OR LSC II)V 132Continued From pageW 132May take up to a monti -Former Client #6 said gone before the results -"[Former Client #6] ha word against [Staff #1] working at the facility for that [Staff #1] should n because a child made	STRFFT AI			10/0	02/2024
(X4) ID PREFIX TAGSUMMARY STATEM (EACH DEFICIENCY MU REGULATORY OR LSC II)V 132Continued From pageMay take up to a monti -Former Client #6 said gone before the results -"[Former Client #6] ha word against [Staff #1] working at the facility for that [Staff #1] should n because a child made	5 <u>2</u> E174	DDRESS, CITY, ST	TATE, ZIP CODE		
(X4) ID PREFIX TAGSUMMARY STATEM (EACH DEFICIENCY MU REGULATORY OR LSC II)V 132Continued From pageMay take up to a monti -Former Client #6 said gone before the results -"[Former Client #6] ha word against [Staff #1] working at the facility for that [Staff #1] should n because a child made		WOOD DRIVE			
V 132 Continued From page May take up to a monther of the results -Former Client #6 said gone before the results -"[Former Client #6] ha word against [Staff #1] working at the facility for that [Staff #1] should n because a child made	BURLING	GTON, NC 272	:15		
may take up to a mont -Former Client #6 said gone before the results -"[Former Client #6] ha word against [Staff #1] working at the facility fo that [Staff #1] should n because a child made	IENT OF DEFICIENCIES IST BE PRECEDED BY FULL DENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF ((EACH CORRECTIVE ACTI CROSS-REFERENCED TO T DEFICIENC ¹	ON SHOULD BE HE APPROPRIATE	(X5) COMPLET DATE
-Former Client #6 said gone before the results -"[Former Client #6] ha word against [Staff #1] working at the facility for that [Staff #1] should n because a child made	5	V 132			
a month just because of -"[Former Client #6] has the story." -Staff #1 was removed -"[Staff #1] is at another working with other staff Three staff are working (facility) over night. No the kids (clients). The of Intellectual Development 8/27/24: -"I still don't believe he -Staff #1 was arrested police department after -She questioned the D -"I don't believe the nur something like one in a something. I don't think -"[Staff #1] has a lawyed the DNA results." -Staff #1's DNA was or	that he wanted to be "long s get back". Is a history of lying. It's his . He (Staff #1) has been or about a year. We believe ot be put out of his job a false allegation." former Client #6's ostantiated. t a person out of work for of the allegation." ad also changed some of I from the facility. er home (facility), but he is f at the house with him. g at the other house staff are ever alone with other house (facility) is for ental Disabilities. did what they say he did." last Friday. He went to the r they told him to appear. NA results. mbers they gave about an octa million or k the results were right." er and he also questions in the shirt because staff did ients) at the house (facility).				

Division	of Health Service Re	gulation				APPROVED
	NT OF DEFICIENCIES OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:			COM	E SURVEY PLETED
		MHL001-169	B. WING		C 10/02/2024	
NAME OF	PROVIDER OR SUPPLIER	STREET AD	DRESS, CITY, S	TATE, ZIP CODE		
JUST IN	TIME YOUTH SERVIC	ES II	NOOD DRIVE			
(X4) ID PREFIX TAG	(EACH DEFICIENCY	TEMENT OF DEFICIENCIES ' MUST BE PRECEDED BY FULL SC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CC (EACH CORRECTIVE ACTION CROSS-REFERENCED TO THE DEFICIENCY)	N SHOULD BE	(X5) COMPLETE DATE
V 132	Continued From pa	ge 6	V 132			
	recommended for h through trial." -A new DNA test ma #1's lawyer did not results. Facility concluded t Staff #1 was moved	/ Immigration. His lawyer im to stay there while he went ay also be ordered as Staff believe the "accuracy" of heir internal investigation and d to a sister facility while esults were still pending.				
V 366	10A NCAC 27G .06 RESPONSE REQU CATEGORY A AND (a) Category A and implement written p response to level I, shall require the pro (1) attending of individuals involv (2) determinin (3) developin measures accordin timeframes not to e (4) developin to prevent similar in specified timeframe (5) assigning for implementation preventive measure (6) adhering set forth in G.S. 75, 42 CFR Parts 2 and 164; and (7) maintainin Subparagraphs (a)	IREMENTS FOR B PROVIDERS B providers shall develop and volicies governing their II or III incidents. The policies ovider to respond by: to the health and safety needs ed in the incident; ng the cause of the incident; g and implementing corrective g to provider specified xceed 45 days; g and implementing measures icidents according to provider as not to exceed 45 days; person(s) to be responsible of the corrections and	V 366			

Division of Health Servi STATEMENT OF DEFICIENCIE AND PLAN OF CORRECTION	6 (X1) PROVIDI	ER/SUPPLIER/CLIA CATION NUMBER:		CONSTRUCTION		E SURVEY PLETED
			A. BUILDING:			
	MHLO	01-169	B. WING			C 02/2024
NAME OF PROVIDER OR SUP	PLIER	STREET A	DDRESS, CITY, S	TATE, ZIP CODE		
JUST IN TIME YOUTH S	RVICES II					
		BURLIN	GTON, NC 272	215		
PREFIX (EACH DEFI	RY STATEMENT OF DE CIENCY MUST BE PRE Y OR LSC IDENTIFYIN	CEDED BY FULL	ID PREFIX TAG	PROVIDER'S PLAN OF (EACH CORRECTIVE ACT CROSS-REFERENCED TO DEFICIENC	FION SHOULD BE THE APPROPRIATE	(X5) COMPLET DATE
V 366 Continued Fro	m page 7		V 366			
shall address regulations in (c) In addition Paragraph (a) providers, exc develop and in their response while the prov or while the cl The policies s by: (1) imm by: (A) obta (B) mak (C) cert (D) trans review team; (2) com review team; (2) com review team v internal review who were not were not resp with direct pro services at the review team s follows: (A) revie determine the and make rec occurrence of (B) gatt (C) issu within five woo preliminary fin LME in whose	42 CFR Part 483 to the requirement of this Rule, Cat luding ICF/MR pro- nplement written to a level III incided der is delivering ent is on the pro- nall require the pro- ediately securing ning the client re- ing a photocopy; fying the copy's of ferring the copy's of ferring the copy's of rening a meeting ithin 24 hours of team shall cons- involved in the in- posible for the cli- fessional oversig the copy of the facts and causes ommendations for future incidents; er other informate e written preliming king days of the in- dings of fact shall catchment area the LME where the facts and causes of the client of the client facts and causes of the copy of the facts and causes of fact shall complete all catchment area	ired by the federal Subpart I. ents set forth in egory A and B roviders, shall policies governing dent that occurs a billable service vider's premises. rovider to respond the client record cord; completeness; and to an internal of an internal the incident. The ist of individuals cident and who ent's direct care or ht of the client's ent. The internal of the activities as e client record to s of the incident or minimizing the ion needed; nary findings of fact incident. The l be sent to the				

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: (X2) MULTIPLE CONSTRUCTION A. BUILDING: MHL001-169 B. WING	(X3) DATE SURVEY COMPLETED C 10/02/2024
MHL001-169 B. WING	
NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE	
JUST IN TIME YOUTH SERVICES II 111 DOGWOOD DRIVE	
BURLINGTON, NC 27215	
(X4) IDSUMMARY STATEMENT OF DEFICIENCIESIDPROVIDER'S PLAN OF CORPREFIX(EACH DEFICIENCY MUST BE PRECEDED BY FULL TAGPREFIX(EACH CORRECTIVE ACTION TAGCROSS-REFERENCED TO THE DEFICIENCY)	SHOULD BE COMPLETE
V 366 Continued From page 8 V 366	
 (D) issue a final written report signed by the owner within three months of the incident. The final report shall be sent to the LME in whose catchment area the provider is located and to the LME where the client resides, if different. The final written report shall address the issues identified by the internal review team, shall include all public documents pertinent to the incident, and shall make recommendations for minimizing the occurrence of future incidents. If all documents needed for the report are not available within three months of the incident, the LME may give the provider an extension of up to three months to submit the final report; and (3) immediately notifying the following: (A) the LME responsible for the catchment area where the services are provided pursuant to Rule .0604; (B) the LME where the client resides, if different; (C) the provider agency with responsibility for maintaining and updating the client's treatment plan, if different from the reporting provider; (D) the Department; (E) the client's legal guardian, as applicable; and (F) any other authorities required by law. 	

Division of Health Service Regulation STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: (X2) MULTIPLE CONSTRUCTION A. BUILDING: MHL001-169 B. WING NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE JUST IN TIME YOUTH SERVICES II 111 DOGWOOD DRIVE BURLINGTON, NC 27215	Сомі 10/	E SURVEY PLETED C 02/2024
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ILIST IN TIME YOUTH SERVICES II 111 DOGWOOD DRIVE		
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BURLINGTON, NC 2/215		
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V 366 Continued From page 9 V 366		
 Review on 5/3/24 of Former Client #6's record revealed: -Admission date of 2/23/24. -He was 15 years old. -Discharged on 5/3/24. -Diagnoses of Major Depressive Disorder, Single episode, with psychotic Features; Posttraumatic Stress Disorder. Review on 5/3/24 of Staff #1's personnel record revealed: -He was hired on 5/15/23. -He was hired as a Paraprofessional. Review on 5/6/24 of a Level III incident report for Former Client #6 submitted on 4/29/24 by the Program Director and updated on 5/6/24 to the North Carolina Incident Response Improvement System (IRIS) revealed: 4/29/24: -Date of Incident: 4/27/24 at 12:00 pm. -'While staff (Staff #1) was serving lunch he (Staff #1) went to client (Former Client #6)'s room to let him know it was time to eat. Staff member (Staff #1) went be against the door. When staff (Staff #1) knocked on the door and there was no answer. Staff (Staff #1) ken bale to open the door. Client (Former Client #6) was naked in the room watching porn. Staff (Staff #1) then lotd him (Former Client #1) to cnee at. Client (Former Client #1) to cnee at. Client (Former Client #1) to row eat. Staff (Staff #2) on shift and stated that he needed to tell her soom to state (Staff #1) then old him (Former Client #1) the need to tell her soom thing purched a stated that the former Client (Former Client #1) to cnee at. Client (Former Client #1		

STATEMEN	of Health Service Re NT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA	(X2) MULTIPLE	CONSTRUCTION		E SURVEY
	OF CORRECTION	IDENTIFICATION NUMBER:	A. BUILDING:			PLETED
		MHL001-169	B. WING		C 10/02/2024	
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V 366	Continued From pa	ige 10	V 366			
	contacted Program group home." 5/6/24: -"Staff member (Sta active police & Dep (DSS) investigation member (Staff #1)) of the individual (Fo investigations are of Client #6) has mad & uncle in the past. Review on 8/27/24 local law enforcement revealed: -Date of report was -"Arrestee Informat -Type of arrest: Tak -Charge #1: Rape- -Charge #2: Indece	of an arrest report from the ent department of Staff #1 8/23/24. ion: [Staff #1]. cen into custody. 2nd degree. ent Liberties. ory rape of a child <15 or =15.				
	conclusion signed b revealed: -"Just in Time Youth removed the emplo JITYS at this time f #1] is not a threat to the group home (fa outstanding employ over a year, withour complaint from the the homes (facilities they feel safe being serious allegation, fi	f an undated investigation by the Owner/Administrator h Services (JITYS)(licensee) byee in question (Staff #1). eels that the employee [Staff b any of the kids (clients) at cility). [Staff #1] is an yee and has been on staff for t one investigation or kids (clients) that reside in all s). All the kids (clients) state g around [Staff #1]. This is a but we also recognize the child who made the allegations				

	IT OF DEFICIENCIES OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	. ,	CONSTRUCTION		E SURVEY PLETED
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AME OF F	PROVIDER OR SUPPLIER	STREET AL	DRESS, CITY, S	TATE, ZIP CODE		
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(X4) ID		TEMENT OF DEFICIENCIES	ID	PROVIDER'S PLAN OF		(X5)
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V 366	Continued From pa	ge 11	V 366			
	(Deoxyribonucleic a have been filed to a committed the crim injustice to put this an allegation as suc kids (clients) in the informed and if the a threat to their chill better to wait for the conduct their invest decorative Military (States) 10 years an there is not enough	we are waiting DNA acid) evidence. No charges say this man (Staff #1) e. JITYS feels it would be an man (Staff #1) out of work on ch. Also, all the parents of the group home have been parents did not feel there was d, from this man (Staff #1), its e evidence and the police to tigation. [Staff #1] is a Officer for the US (United ad in Afghanistan, currently evidence to fire or suspend Il wait for the outcome of the teent]."				
	agency revealed: 5/6/24: -They had received on 4/27/24. -"Allegation was that client's room- [Form had been watching walked in the room masturbating and w him 'not to'. He (Fo [Staff #1] if he want [Former Client #6] ft [Staff #1]. [Staff #1] [Staff #1] then clean Client #6]'s shirt. [F told [Staff #2] at the -The detective was going to work at an an investigation wa	ive from local law enforcement a call from the group home at staff- [Staff #1] walked into ner Client #6] informed that he gay porn when [Staff #1] . [Former Client #6] had been when he stopped, [Staff #1] told rmer Client #6) then asked red him to do oral sex on lejaculated in client's mouth. then performed oral sex on lejaculated in client's mouth. ned himself with [Former former Client #6] afterwards a facility." "concerned" about Staff #1 other facility with agency while				

Division	of Health Service Re	egulation				APPROVE
STATEMEN	IT OF DEFICIENCIES OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE A. BUILDING: _	CONSTRUCTION		E SURVEY PLETED
		MHL001-169 B. WING		C 10/02/2024		
NAME OF F	PROVIDER OR SUPPLIER	STREET A	DDRESS, CITY, ST	TATE, ZIP CODE		
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(X4) ID		TEMENT OF DEFICIENCIES	ID	PROVIDER'S PLAN OF		(X5)
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V 366	Continued From pa	ige 12	V 366			
	occurred to when the	ne police were contacted by				
	the owner/administ					
	-Evidence was colle					
		on the client's shirt.				
		om Staff #1's mouth with a				
	swab.					
	-All evidence was s	ent to a laboratory.				
		al weeks for the results."				
		how long it would take to get				
		may take several weeks for				
	the results to get ba					
	•	e owner/administrator. tor did not believe the client				
		Reported that staff (Staff #1)				
		s religion would not allow him				
	to do something like					
	8/27/24:					
		ted on 8/23/24 after being				
	summoned by the					
		ted at the police department.				
		e "10.3 octillion times likely				
	that it belonged to [-Source came from					
		Client #6)'s DNA was not				
	present in the same					
	procent in the camp					
	Interviews on 5/3/24	4, 8/27/24 and 10/2/24 with the	e			
	Owner/Administrate	or revealed:				
	5/3/24:					
] said that he was in his room				
		appropriate, and that [Staff #1]				
		nd that he told him to keep op. He (Former Client #6) then				
		#1]'s pants and [Staff #1]				
	allowed him to give					
		t he knocked on his (Former				
		vice, but [Former Client #6] had	l l			
		(Staff #1) pushed the door				
	open and noticed the	hat [Former Client #6] was				
	watching day porne	ography. He (Staff #1) told him				

	IT OF DEFICIENCIES OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	. ,			E SURVEY PLETED	
		MHL001-169	B. WING			C 10/02/2024	
AME OF	PROVIDER OR SUPPLIER	STREET AD	DRESS, CITY, S	TATE, ZIP CODE			
		111 DOG					
UST IN	TIME YOUTH SERVIC	CES II BURLING	TON, NC 272	215			
(X4) ID		TEMENT OF DEFICIENCIES	ID	PROVIDER'S PLAN OF		(X5)	
PRÉFIX TAG		Y MUST BE PRECEDED BY FULL SC IDENTIFYING INFORMATION)	PREFIX TAG	(EACH CORRECTIVE ACT CROSS-REFERENCED TO DEFICIENC	THE APPROPRIATE	COMPLE DATE	
V 366	Continued From pa	age 13	V 366				
	off and told him (Fo going to report this -She started her int -She interviewed th facility. -Facility staff (Owne Director) investigate police about this ind allegation. -Police came to the -"Police then got [S gave his DNA." -"[Former Client #6 behaviors at the ho and going to other I got suspended at th caught giving oral s -"[Former Client #6 allegations before." -The police informe may take up to a m -Former Client #6 sgone before the res -"[Former Client #6 sgone before the res -"[Former Client #6 sgone before the res -"[Former Client #6 word against [Staff working at the facilit that [Staff #1] shou because a child ma -She concluded tha allegations were ur -"I was not going to a month just becau -"[Former Client #6 the story."	ataff #1]'s DNA. He willingly had been displaying some me (facility). Getting naked boys (clients) rooms. He also he school for 5 days for getting sex at the school." had made other false d her that results from DNA nonth to return. said that he wanted to be "long sults get back". has a history of lying. It's his #1]. He (Staff #1) has been ity for about a year. We believe Id not be put out of his job ade a false allegation." at Former Client #6's					

STATEMENT OF DEFICIEN AND PLAN OF CORRECTIO	· · ·	VIDER/SUPPLIER/CLIA	(X2) MULTIPLE A. BUILDING:	CONSTRUCTION		E SURVEY PLETED
					с	
	MHL001-169		B. WING	B. WING		
NAME OF PROVIDER OR S	UPPLIER	STREET A	DDRESS, CITY, ST	TATE, ZIP CODE		
JUST IN TIME YOUTH	SERVICES II		WOOD DRIVE GTON, NC 272			
(,,	MARY STATEMENT C		ID	PROVIDER'S PLAN OF		(X5)
		PRECEDED BY FULL FYING INFORMATION)	PREFIX TAG	(EACH CORRECTIVE ACT CROSS-REFERENCED TO DEFICIENC	THE APPROPRIATE	COMPLET DATE
V 366 Continued	From page 14		V 366			
Intellectual 8/27/24: -"I still don' -Staff #1 wa police depa -She quest -"I don't bel something something. -"[Staff #1] the DNA re -Staff #1's I laundry for -"Everyone 10/2/24: -Staff #1 cc -Plan was f incarcerate process. -"[Staff #1] may be dep recomment through tria -A new DN/ #1's lawyer results. Facility con knowing tha V 512 27D .0304 10A NCAC HARM, AB (a) Employ abuse, neg with G.S. 1	Developmental believe he did was arrested last l rtment after they oned the DNA re- ieve the number ike one in an oc I don't think the has a lawyer and sults." DNA was on the the kids (clients) s DNA is on thei the kids (clients) s DNA is on the the kids (clients) s DNA is on the kids (clients) s DNA is on the kids (clients) s DN	what they say he did." Friday. He went to the y told him to appear. esults. s they gave about ta million or results were right." d he also questions shirt because staff did at the house (facility) r clothing!" carcerated.	d t e V 512			

YLCP11

If continuation sheet 15 of 25

STATEMEN	of Health Service Re NT OF DEFICIENCIES OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE A. BUILDING: _	CONSTRUCTION	COM	E SURVEY PLETED	
		MHL001-169	B. WING 1			C 10/02/2024	
NAME OF	PROVIDER OR SUPPLIER	STREET AI	DDRESS, CITY, S	TATE, ZIP CODE			
JUST IN	TIME YOUTH SERVIC	CES II	WOOD DRIVE GTON, NC 272				
(X4) ID PREFIX TAG	(EACH DEFICIENC)	TEMENT OF DEFICIENCIES Y MUST BE PRECEDED BY FULL SC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF (EACH CORRECTIVE ACT CROSS-REFERENCED TO T DEFICIENC	ION SHOULD BE THE APPROPRIATE	(X5) COMPLET DATE	
V 512	sort of abuse or ne 27C .0102 of this C (c) Goods or servic purchased from a c established govern (d) Employees sha necessary to repel aggressive client at governing body pol is necessary deper characteristics of th and physical and m of aggressiveness intervention proced Subchapter 10A NG (e) Any violation by	glect, as defined in 10A NCAC chapter. ces shall not be sold to or client except through ing body policy. all use only that degree of force or secure a violent and nd which is permitted by icy. The degree of force that nds upon the individual ne client (such as age, size nental health) and the degree displayed by the client. Use of lures shall be compliance with CAC 27E of this Chapter. y an employee of Paragraphs nis Rule shall be grounds for					
	Based on record re three audited Para abused one of one #6). The findings a Review on 5/3/24 of revealed: -Admission date of -He was 15 years of -Discharged on 5/3 -Diagnoses of Majo episode, with psych	f Former Client #6's record 2/23/24. old.					
	Stress Disorder. Review on 5/3/24 o revealed: -He was hired on 5 ealth Service Regulation	of Staff #1's personnel record					

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If continuation sheet 16 of 25

Division	of Health Service Re	egulation			FURM	APPROVED
STATEMEN	NT OF DEFICIENCIES OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE A. BUILDING:	E CONSTRUCTION	COM	E SURVEY PLETED
		MHL001-169	B. WING	3. WING 1		
NAME OF	PROVIDER OR SUPPLIER	STREET AD	DRESS, CITY, S	TATE, ZIP CODE		
	TIME YOUTH SERVIC	111 DOG		<u>.</u>		
3031 IN		BURLING	TON, NC 272	215		
(X4) ID PREFIX TAG	(EACH DEFICIENCY	TEMENT OF DEFICIENCIES / MUST BE PRECEDED BY FULL SC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CO (EACH CORRECTIVE ACTIO CROSS-REFERENCED TO TH DEFICIENCY)	N SHOULD BE E APPROPRIATE	(X5) COMPLETE DATE
V 512	Continued From pa	ge 16	V 512			
	-He was hired as a	Paraprofessional.				
	Former Client #6 su Program Director a North Carolina Incid System (IRIS) revea 4/29/24: -Date of Incident: 4, -"While staff (Staff # (Staff #1) went to cl to let him know it wa (Staff #1) knocked answer. Staff (Staff there was still no ar tried to open the do something pushed member (Staff #1) v Client (Former Client #1) then wen on shift and stated something. When s Client (Former Client #1) did something in staff member (Staff #1) do. Client (Form performed oral sex contacted Program group home." 5/6/24: -"Staff member (Staff #1) v of the individual (For investigations are c	/27/24 at 12:00 pm. #1) was serving lunch he ient (Former Client #6)'s room as time to eat. Staff member on the door and there was no #1) knocked a second time hswer. Staff (Staff #1) then or and realized that there was a against the door. When staff was able to open the door. Int #6) was naked in the room f (Staff #1) then told him to come eat. Client (Former t to the other staff (Staff #2) that he needed to tell her taff (Staff #2) asked what. Int #6) stated that staff (Staff nappropriate with him. When if #2) asked what did he (Staff ner Client #6) stated that I on him. Staff (Staff #2) then Director and Owner of the aff #1) is still employed until all artment of Social Services s are completed. Staff was removed from direct care ormer Client #6) until those ompleted. Client (Former e allegations against his father				

	IT OF DEFICIENCIES OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE A. BUILDING:		(X3) DATE SURVEY COMPLETED	
		MHL001-169	B. WING			C 02/2024
AME OF	PROVIDER OR SUPPLIER	STREET A	DDRESS, CITY, ST	TATE, ZIP CODE		
UST IN	TIME YOUTH SERVIO	CESII	WOOD DRIVE GTON, NC 272			
(X4) ID	SUMMARY STA			PROVIDER'S PLAN OF	CORRECTION	(X5)
PREFIX TAG	(EACH DEFICIENC)	Y MUST BE PRECEDED BY FULL SC IDENTIFYING INFORMATION)	PREFIX TAG	(EACH CORRECTIVE ACT CROSS-REFERENCED TO DEFICIENC	TION SHOULD BE	COMPLET
V 512	Continued From pa	age 17	V 512			
	conclusion signed I revealed: -"Just in Time Yout removed the employ JITYS at this time f #1] is not a threat to the group home (fa outstanding employ over a year, without complaint from the the homes (facilitie they feel safe being serious allegation, (Former Client #6) against [Staff #1], a himself. Currently, (Deoxyribonucleic a have been filed to a committed the crim- injustice to put this an allegation as su kids (clients) in the informed and if the a threat to their chi better to wait for th- conduct their invest decorative Military States) 10 years ar there is not enough [Staff #1]. JITYS w [local law enforcem Review on 8/27/24	of an arrest report from the ent department of Staff #1 s 8/23/24. tion: [Staff #1].				

STATE FORM

	of Health Service Re IT OF DEFICIENCIES OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE A. BUILDING:	E CONSTRUCTION	СОМ	E SURVEY PLETED C
		MHL001-169			02/2024	
NAME OF F	PROVIDER OR SUPPLIER	STREET A	DDRESS, CITY, S	TATE, ZIP CODE		
JUST IN	TIME YOUTH SERVIC	CES II	WOOD DRIVE GTON, NC 272			
(X4) ID PREFIX TAG	(EACH DEFICIENC)	ATEMENT OF DEFICIENCIES Y MUST BE PRECEDED BY FULL SC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF (EACH CORRECTIVE ACT CROSS-REFERENCED TO T DEFICIENC	ION SHOULD BE HE APPROPRIATE	(X5) COMPLET DATE
V 512	Continued From pa	nge 18	V 512			
	-Charge #1: Rape- -Charge #2: Indece -Charge #3: Statuto -Case status: Close	ent Liberties. ory rape of a child <15 or =15.				
	agency revealed: 5/6/24: -They had received on 4/27/24. -"Allegation was that client's room- [Forn had been watching walked in the room masturbating and w him 'not to'. He (For [Staff #1] if he wand [Former Client #6] [Staff #1]. [Staff #1] [Staff #1]. [Staff #1] [Staff #1] then clea Client #6]'s shirt. [F told [Staff #2] at the -The detective was going to work at an an investigation wa -The detective was gap of time it took I occurred to when the the owner/administ -Evidence was colle -There was semen	tive from local law enforcemen I a call from the group home at staff- [Staff #1] walked into ner Client #6] informed that he gay porn when [Staff #1] . [Former Client #6] had been when he stopped, [Staff #1] tolo rmer Client #6) then asked ted him to do oral sex on him. then performed oral sex on] ejaculated in client's mouth. ned himself with [Former former Client #6] afterwards a facility." "concerned" about Staff #1 other facility with agency while s still on. also "concerned" about the petween when the allegation ne police were contacted by rator.	3			
	-She did not know the DNA results. "It the results to get ba	al weeks for the results." how long it would take to get may take several weeks for				

STATE FORM

Division	of Health Service Re	equiation			FORM	APPROVED
STATEMEN	NT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE A. BUILDING: _	CONSTRUCTION		E SURVEY PLETED
	MHL001-169 B. WING				C 10/02/2024	
NAME OF	PROVIDER OR SUPPLIER	STREET AL	DRESS, CITY, S	TATE, ZIP CODE		
		111 DOG	WOOD DRIVE			
JUSTIN	TIME YOUTH SERVIC	BURLING	GTON, NC 272	215		
(X4) ID		TEMENT OF DEFICIENCIES	ID	PROVIDER'S PLAN OF CO		(X5)
PREFIX TAG		/ MUST BE PRECEDED BY FULL SC IDENTIFYING INFORMATION)	PREFIX TAG	(EACH CORRECTIVE ACTION CROSS-REFERENCED TO THE DEFICIENCY)		COMPLETE DATE
V 512	Continued From pa	ge 19	V 512			
	(Former Client #6). is very religious. His to do something like 8/27/24: -Staff #1 was arrest summoned by the p -Staff #1 was arrest -"DNA showed to be that it belonged to [-Source came from -Juvenile (Former C present in the samp Interview on 5/3/24 revealed: -He had been at the -"[Staff #1] was in the and serving the oth (Staff #1) then cam knocking on the doo -"I was watching a g on my tv (television and when I was goi me 'no, that's ok' ar then asked him if he sex?" -"I gave him oral se -"I initiated it" -"[Staff #1] told me -After the incident, I have some homicid for what he allowed -Staff #1 gave him s	ted on 8/23/24 after being police. ted at the police department. e "10.3 octillion times likely Staff #1]." Staff #1. Client #6)'s DNA was not ole. with Former Client #6 e facility for about 2 months. he kitchen making sandwiches er clients at the house. He e to my room and without or, he opened it." gay porn (pornographic movie)). [Staff #1] opened the door ng to turn off the tv, he told hd he pointed to his penis. I e wanted me to give him oral ex." not to tell anyone." Former Client #6 started to lal thoughts against Staff #1 him to do. some chocolate and told him				
	-Staff #2 told the Ov -"[The Owner/Admi	wner/Administrator. nistrator] did not believe me." om the home (facility) and				
ivision of L	lealth Service Regulation					

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If continuation sheet 20 of 25

	IT OF DEFICIENCIES OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:		CONSTRUCTION	COM	E SURVEY PLETED C
		MHL001-169	B. WING		10/0	
NAME OF F	PROVIDER OR SUPPLIER	STREET A	DDRESS, CITY, S	TATE, ZIP CODE		
JUST IN	TIME YOUTH SERVIC	SES II	WOOD DRIVE GTON, NC 272			
(X4) ID PREFIX TAG	(EACH DEFICIENC)	TEMENT OF DEFICIENCIES / MUST BE PRECEDED BY FULL SC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF ((EACH CORRECTIVE ACT CROSS-REFERENCED TO T DEFICIENC	ION SHOULD BE THE APPROPRIATE	(X5) COMPLET DATE
V 512	-He told police them -"[Staff #1] had clea -Former Client #6 w -"They tested my D They did a mouth s -I returned home (fa to discharge me be bothered by what h -"I do not feel safe a Interview on 5/6/24 -He denied abusing -He had been prepa get Former Client # -Former Client #6 w the tv. He turned it #6) that "it was not -He left Former Clie continued to serve -Nothing else happe Interview on 5/6/24 -She was sitting on #6 came to her and happened. -She had been on t #1 go into Former Clie abuse, she contact Director). -Owner/Administrat and investigated. -"I had never seen a Staff #1."	the police when he ran away. e was evidence. "A red shirt." aned himself with the shirt." vent to the hospital afterwards. NA (deoxyribonucleic acid). wab to get my DNA." acility) and now they are going cause they don't want to be appened." at the group home (facility). with Staff #1 revealed: g Former Client #6. aring sandwiches and went to 66 to come out to eat. vas watching pornography on off and told him (Former Client right." ent #6's bedroom and sandwiches to the clients. ened afterwards. with Staff #2 revealed: the couch when Former Client I told her about what he couch and did not see Staf Client #6's room. int #6 told her about the sexua ed her manager (Program tor later came to the house anything inappropriate with 4, 8/27/24 and 10/2/24 with the	t f	DEFICIENC	Υ)	
	Owner/Administrato 5/3/24: ealth Service Regulation					

Division of Health Service STATE FORM

Division	of Health Service Re	egulation			FORM	APPROVE
STATEMEN	NT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE A. BUILDING:	E CONSTRUCTION		E SURVEY PLETED
			A. BUILDING:			
		MHL001-169	B. WING			C 02/2024
NAME OF	PROVIDER OR SUPPLIER	STREET AD	DRESS, CITY, S	TATE, ZIP CODE		
		111 DOG				
JUST IN	TIME YOUTH SERVIC	CES II BURLING	TON, NC 272	215		
(X4) ID	_	TEMENT OF DEFICIENCIES	ID	PROVIDER'S PLAN OF CC		(X5)
PREFIX TAG		Y MUST BE PRECEDED BY FULL SC IDENTIFYING INFORMATION)	PREFIX TAG	(EACH CORRECTIVE ACTIO CROSS-REFERENCED TO THE DEFICIENCY)		COMPLETE DATE
V 512	Continued From pa	ige 21	V 512			
	"[Eormer Client #6]] said that he was in his room				
		appropriate, and that [Staff #1]				
		nd that he told him to keep				
		op. He (Former Client #6) then				
		#1]'s pants and [Staff #1]				
	allowed him to give					
		t he knocked on his (Former				
		rice, but [Former Client #6] had				
		(Staff #1) pushed the door				
		hat [Former Client #6] was				
		ography. He (Staff #1) told him				
	(Former Client #6)	to stop. He (Staff #1) cut the tv				
	off and told him (Fo	ormer Client #6) that he was				
	going to report this	to the Owner/Administrator."				
	-She started her int	ernal investigation.				
	-She interviewed th	e clients and the staff at the				
	facility.					
		er/Administrator and Program				
		ed and decided to call the				
	•	cident due to the serious				
	allegation.	6				
	-Police came to the					
		taff #1]'s DNA. He willingly				
	gave his DNA."	1 had had a displaying a sure				
] had been displaying some				
		me (facility). Getting naked boys (clients) rooms. He also				
	0 0	,				
	caught giving oral s	ne school for 5 days for getting				
] had made other false				
	allegations before."					
		ed her that results from DNA				
	may take up to a m					
		aid that he wanted to be "long				
	gone before the res					
] has a history of lying. It's his				
		#1]. He (Staff #1) has been				
		ty for about a year. We believe				
		Id not be put out of his job				
		ade a false allegation."				
vision of H	lealth Service Regulation	~	Į.			1

MHL001-169 B. WING 10/02/2024 NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE 111 DOGWOOD DRIVE JUST IN TIME YOUTH SERVICES II 111 DOGWOOD DRIVE 111 DOGWOOD DRIVE (X4) ID SUMMARY STATEMENT OF DEFICIENCIES ID PROVIDER'S PLAN OF CORRECTION (X4) (X4) ID SUMMARY STATEMENT OF DEFICIENCIES ID PROVIDER'S PLAN OF CORRECTION (X5)		T OF DEFICIENCIES OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	. ,	E CONSTRUCTION	COM	E SURVEY PLETED
111 DOGWOOD DRIVE BURLINGTON, NC 27215 OWNERS YATEMENT OF DEFICIENCES IN BURLINGTON, NC 27215 PROVIDER'S PLAN OF CORRECTION (EACH DEFICIENCY MUST BE PRECEDED BY FULL REDULTORY OR LSC IDENTIFYING INFORMATION) PREFIX TAG PROVIDER'S PLAN OF CORRECTION (EACH ORDERCTIVE ACTION SHOULD BE CROSS-REFERENCE) TO THE APPROPRIATE CORSS-REFERENCE) TO THE APPROPRIATE CONSTRUCT ACTION SHOULD BE CROSS-REFERENCE) TO THE APPROPRIATE CONSTRUCT ACTION SHOULD BE CROSS-REFERENCE) TO THE APPROPRIATE CONSTRUCT ACTION SHOULD BE CROSS-REFERENCE) TO THE APPROPRIATE CONSTRUCT CROSS-REFERENCE) TO THE APPROPRIATE CONSTRUCT CROSS-REFERENCE) TO THE APPROPRIATE CONSTRUCT CROSS-REFERENCE) TO THE APPROPRIATE CONSTRUCT ACTION SHOULD BE CROSS-REFERENCE) TO THE APPROPRIATE CONSTRUCT ACTION SHOULD BE CROSS-REFERENCE) TO THE APPROPRIATE CONSTRUCT CROSS-REFERENCE) TO THE APPROPRIATE CONSTRUCT CROSS-REFERENCE) TO THE APPROPRIATE CONSTRUCT CROSS-REFERENCE) TO THE APPROPRIATE CONSTRUCT ACTION CROSS-REFERENCE) TO THE APPROPRIATE CONSTRUCT ACTION CROSS-REFERENCE) TO THE APPROPRIATE CONSTRUCT ACTION CROSS-REFERENCE) CONSTRUCT ACTION			MHL001-169	B. WING			
UNST IN TIME YOUTH SERVICES II BURLINGTON, NC 27215 (X4) ID PREFIX TAG SUMMARY STATEMENT OF DEFICIENCIES REGULATORY OR LSC IDENTIFYING INFORMATION) ID PROVIDER'S PLAN OF CORRECTION ENOUND E CROSS-REFERENCE TO THE APPROPRIATE DEFICIENCY (x) CROSS-REFERENCE TO THE APPROPRIATE DEFICIENCY (x) CROSS-REFERENCE DEFICIENCY V 512 Continued From page 22 V 512 -'' was not going to put a person out of work for a month just because of the allegation." -''Former Client #16's allegations were unsubstantiated. -'' was not going to put a person out of work for a month just because of the allegation." -''Former Client #16 had also changed some of the story.'' -Staff #1 was removed from the facility. -''Staff #1 was removed from the facility. -''Staff #1 was areanouse (facility), but he is working with other staff at the house with him. Three staff are working at the other house (facility) over night. No staff are ever alone with the kids (clients). The other house (facility) is for Intellectual Developmental Disabilities. 8/27724: -''' Staff #1 was areated last Friday. He went to the police department after they told him to appear. -She questioned the DNA results. -''' don't believe the numbers they gave about something like one in an octa million or something like one in an octa million or something. I don't think the results were right.'' -''Staff #1 to continued to be incarcerated. -Plan was for Staff #1 to continue to be incarcerated while he went through the trial process. -'''Staff #1 conninue to be incarcerated. -Plan was for Staff #1 to continue to be incarcerated while he went through the trial process. -'''Staff #1 con not come out of jail, because he may be deported by Immigration. His lawyer recommended for him to stay there while he went through trial.'' -A new DNA lestimay also be ordered as Staff	NAME OF F	PROVIDER OR SUPPLIER	STREET AD	DRESS, CITY, S	TATE, ZIP CODE		
PREFIX TAG IEACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION) PREFX TAG (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY) Codin DEFICIENCY) V512 Continued From page 22 V512 -She concluded that Former Client #6's allegations were unsubstantiated. -"I was not going to put a person out of work for a month just because of the allegation." -"[Former Client #6] had also changed some of the story." V512 -Staff #1 was removed from the facility. -"Staff #1 was removed form the facility. -"Staff #1 was removed form the facility. -"Staff #1 was arrested last Friday. Ho went to the police department after they told him to appear. -She questioned the DNA results. -" don't believe the numbers they gave about something. I don't think the results were right." -"[Staff #1] has a lawyer and he also questions the DNA results." -Staff #1 so not me is charity be cause staff did laundry for the kids (clients) at the house (facility). -"Everyone's DNA is on the int clothing!" 10/2/24: -Staff #1 continued to be incarcerated. -Plan was for Staff #1 to continue to be incarcerated while he went through the trial process. -"[Staff #1] can not come out of jail, because he may be deported by Immigration. His lawyer recommended for him to stay there while he went through trial." -A new DNA test may also be ordered as Staff		TIME YOUTH SERVIC	CES II				
 She concluded that Former Client #6's allegations were unsubstantiated. "I was not going to put a person out of work for a month just because of the allegation." "[Former Client #6] had also changed some of the story." Staff #1 was removed from the facility. "[Staff #1] is at another home (facility), but he is working with other staff at the house with him. Three staff are working at the other house (facility) over night. No staff are ever alone with the kids (clients). The other house (facility) is for Intellectual Developmental Disabilities. 8/27/24: "I still don't believe he did what they say he did." Staff #1 was arrested last Friday. He went to the police department after they told him to appear. She questioned the DNA results. "I don't believe and million or something. I don't think the results were right." "[Staff #1] has a lawyer and he also questions the DNA results." Staff #1 so NA was on the shirt because staff did laundry for the kids (clients) at the house (facility). "Everyone's DNA is on their clothing!" 10/2/24: Staff #1 continued to be incarcerated. -Plan was for Staff #1 to continue to be incarcerated while he went through the trial process. "[Staff #1] can not come out of jail, because he may be deported by Immigration. His lawyer recommended for him to stay there while he went through tria." A new DNA test may also be ordered as Staff 	PRÉFIX	(EACH DEFICIENC)	Y MUST BE PRECEDED BY FULL	PREFIX	(EACH CORRECTIVE ACTION SHOU CROSS-REFERENCED TO THE APPRC	LD BE	(X5) COMPLET DATE
allegations were unsubstantiated. -"I was not going to put a person out of work for a month just because of the allegation." -"[Former Client #6] had also changed some of the story." -Staff #1 was removed from the facility. -"[Staff #1] is at another home (facility), but he is working with other staff at the house with him. Three staff are working at the other house (facility) over night. No staff are ever alone with the kids (clients). The other house (facility) is for Intellectual Developmental Disabilities. 8/27/24: -"I still don't believe he did what they say he did." -Staff #1 was arrested last Friday. He went to the police department after they told him to appear. -She questioned the DNA results. -"I don't believe the numbers they gave about something. I don't think the results were right." -"[Staff #1] has a lawyer and he also questions the DNA results." -Staff #1's DNA was on the shirt because staff did laundry for the kids (clients) at the house (facility). -"Everyone's DNA is on their clothing!" 1/0/2/24: -Staff #1 continued to be incarcerated. -Plan was for Staff #1 to continue to be incarcerated while he went through the trial process. -"[Staff #1] can not come out of jail, because he may be deported by Immigration. His lawyer recommended for him to stay there while he went through trial." -A new DNA test may also be ordered as Staff	V 512	Continued From pa	age 22	V 512			
results. Review on 10/2/24 of the Plan of Protection dated		allegations were ur -"I was not going to a month just becau -"[Former Client #6 the story." -Staff #1 was remo -"[Staff #1] is at and working with other Three staff are wor (facility) over night. the kids (clients). T Intellectual Develop 8/27/24: -"I still don't believe -Staff #1 was arres police department a -She questioned th -"I don't believe the something like one something. I don't t -"[Staff #1] has a la the DNA results." -Staff #1's DNA wa laundry for the kids -"Everyone's DNA i 10/2/24: -Staff #1 continued -Plan was for Staff incarcerated while process. -"[Staff #1] can not may be deported b recommended for t through trial." -A new DNA test m #1's lawyer did not results.	 a put a person out of work for use of the allegation." b) had also changed some of wed from the facility. b) ther home (facility), but he is staff at the house with him. c) the other house with him. c) the other house (facility) is for omental Disabilities. c) he did what they say he did." c) the say the did what they say he did." c) the incarcerated as Staff believe the "accuracy" of 				

	of Health Service Re NT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA		CONSTRUCTION		ESURVEY
	OF CORRECTION	IDENTIFICATION NUMBER:	A. BUILDING:			PLETED
						С
		MHL001-169	B. WING		10/	02/2024
NAME OF	PROVIDER OR SUPPLIER	STREET AI	DDRESS, CITY, S	TATE, ZIP CODE		
JUST IN	TIME YOUTH SERVIC	SES II	WOOD DRIVE			
	1	BURLING	GTON, NC 272			
(X4) ID PREFIX TAG	(EACH DEFICIENC)	TEMENT OF DEFICIENCIES / MUST BE PRECEDED BY FULL SC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF (EACH CORRECTIVE ACT CROSS-REFERENCED TO T DEFICIENC	ION SHOULD BE THE APPROPRIATE	(X5) COMPLETE DATE
V 512	Continued From pa	ge 23	V 512			
	10/2/24 written by t -"What immediate a ensure the safety o -In-house traini includes client's rigi reference to harm a clients in our care. -Describe your plan happens. -All new hires w their orientation trai training scheduled employment." The facility served of Attention Deficit Hy Spectrum Disorder Disruptive Mood Dy Disorder; Intermitte Generalized Anxiety Disorder; Posttraun 4/27/24, Former Clip pornographic mater Client #6's bedroom the television, and n area. Former Client wanted him to perfor allowed Former Client him. After the incide up with one of Form that day, Former Cli about the sexual at and DNA was obtai shirt to be analyzed	he Program Director revealed: action will the facility take to f the consumers in your care? ng with all staff, which ht, policy and procedures in and neglect, also safety of as to make sure the above will undergo this training during ining, and participate in all by management during their clients with diagnoses of peractivity Disorder; Autism s; Intellectual Disability; /sregulation Disorder; Conduct nt Explosive Disorder; y Disorder, Major Depressive natic Stress Disorder. On ient #6 had been watching rial. Staff #1 walked in Former n and told him to not turn off rather pointed at his groin t #6 then asked Staff #1 if he form oral sex on him. Staff #1 ent #6 to perform oral sex on ent, Staff #1 cleaned himself ner Client #6's shirts. Later lient #6 informed Staff #2 ouse. Police were contacted ned from Former Client #6's I at a laboratory. On 8/23/24 ed by local law enforcement				
	sample obtained or matched Staff #1's with Rape- 2nd deg	esults revealed that the Former Client #6's shirt had DNA. Staff #1 was charged gree, Indecent Liberties and child <15 or =15. This				

Division of Health Service Re STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION A. BUILDING: B. WING		(X3) DATE SURVEY COMPLETED C		
NAME OF F	PROVIDER OR SUPPLIER				DRESS, CITY, ST	ATE, ZIP CODE	
JUST IN	TIME YOUTH SERVIC		NOOD DRIVE TON, NC 272	15			
(X4) ID PREFIX TAG	(EACH DEFICIENC)	ATEMENT OF DEFICIENCIES Y MUST BE PRECEDED BY FULL .SC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF ((EACH CORRECTIVE ACT CROSS-REFERENCED TO T DEFICIENC	ION SHOULD BE THE APPROPRIATE	(X5) COMPLET DATE	
V 512	Continued From page 24		V 512				
	denciency constitut serious abuse and days.	tes a Type A1 rule violation for must be corrected within 23					