

Division of Health Service Regulation

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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:<br><br><b>MHL092-563</b> | (X2) MULTIPLE CONSTRUCTION<br>A. BUILDING: _____<br><br>B. WING _____ | (X3) DATE SURVEY COMPLETED<br><br><b>10/16/2025</b> |
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| NAME OF PROVIDER OR SUPPLIER<br><br><b>NEW BEGINNINGS HEALTH CARE</b> | STREET ADDRESS, CITY, STATE, ZIP CODE<br><b>5309 KYLE DRIVE<br/>RALEIGH, NC 27616</b> |
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| V 000  | <p><b>INITIAL COMMENTS</b></p> <p>An annual and complaint survey was completed on 10/16/25. The complaint was unsubstantiated (Intake NC#00233933). A deficiency was 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>This facility is licensed for 9 and has a current census of 7. The survey sample consisted of audits of 1 current client and 3 former clients.</p>   | V 000 | <p style="text-align: center;"><b>RECEIVED</b></p> <p style="text-align: center;">NOV 06 2025</p> <p style="text-align: center;">DHSR-MH Licensure Sect</p> <table border="1"> <tr> <td></td> <td> <ul style="list-style-type: none"> <li>10A NCAC 27G.1703 Residential Requirements for Associate Professional</li> </ul> </td> </tr> <tr> <td>Measures put in place to correct the deficient area of practice and how we identified other areas of the facility having the potential to be affected by the same deficient practice and what corrective actions will be taken</td> <td>Our agency took immediate action to ensure the quality of all homes. We were not aware that the AP had to be full time. The agency has updated all required parties and hired a full time AP to ensure compliance.</td> </tr> <tr> <td>Measures put in place to prevent the problem from occurring again</td> <td>Upon learning of the deficiency, our agency placed the below preventative measures in place. We will continue to employ a full time AP to remain in compliance.</td> </tr> <tr> <td>Who will monitor the situation to ensure it will not occur again</td> <td>The Executive Director, Director and our Quality management/Quality Improvement Director, and or a designated qualified staff will continue to monitor the implementation to ensure that the deficiency will not occur again.</td> </tr> <tr> <td>How often the monitoring will take place</td> <td>Our agency made sure the above plan happened by implementing continual employment of full time AP to remain in compliance.</td> </tr> <tr> <td>Dates the corrective action will be completed</td> <td>The corrective action was completed on 10/01/25</td> </tr> </table> |  | <ul style="list-style-type: none"> <li>10A NCAC 27G.1703 Residential Requirements for Associate Professional</li> </ul> | Measures put in place to correct the deficient area of practice and how we identified other areas of the facility having the potential to be affected by the same deficient practice and what corrective actions will be taken | Our agency took immediate action to ensure the quality of all homes. We were not aware that the AP had to be full time. The agency has updated all required parties and hired a full time AP to ensure compliance. | Measures put in place to prevent the problem from occurring again | Upon learning of the deficiency, our agency placed the below preventative measures in place. We will continue to employ a full time AP to remain in compliance. | Who will monitor the situation to ensure it will not occur again | The Executive Director, Director and our Quality management/Quality Improvement Director, and or a designated qualified staff will continue to monitor the implementation to ensure that the deficiency will not occur again. | How often the monitoring will take place | Our agency made sure the above plan happened by implementing continual employment of full time AP to remain in compliance. | Dates the corrective action will be completed | The corrective action was completed on 10/01/25 |  |
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| V 295  | <p>27G .1703 Residential Tx. Child/Adol - Req. for A P</p> <p><b>10A NCAC 27G .1703 REQUIREMENTS FOR ASSOCIATE PROFESSIONALS</b></p> <p>(a) In addition to the qualified professional specified in Rule .1702 of this Section, each facility shall have at least one full-time direct care staff who meets or exceeds the requirements of an associate professional as set forth in 10A NCAC 27G .0104(1).</p> <p>(b) The governing body responsible for each facility shall develop and implement written policies that specify the responsibilities of its associate professional(s). At a minimum these policies shall address the following:</p> <p>(1) management of the day to day day-to-day operations of the facility;</p> <p>(2) supervision of paraprofessionals regarding responsibilities related to the implementation of each child or adolescent's treatment plan; and</p> <p>(3) participation in service planning meetings.</p> | V 295 |   |  |   |  |  |   |   |  |   |  |  |   |   |  |

Division of Health Service Regulation  
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE  
*Sonia Ward* Director  
DATE  
10/26/25

Division of Health Service Regulation

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| V 295              | <p>Continued From page 1</p> <p>This Rule is not met as evidenced by:<br/>Based on interview and record review, the facility failed to maintain one staff who met the requirements of an Associate Professional. The findings are:</p> <p>Review on 10/10/25 Of Staff #4's record revealed:</p> <ul style="list-style-type: none"> <li>- Hired 3/19/21</li> <li>- Title: Direct Care Staff/Associate Professional (AP)</li> <li>- Signed job description for direct care staff and a signed job description for AP</li> <li>- Bachelor of Arts degree in Sociology</li> </ul> <p>Interview on 10/10/25 with the Director/Qualified Professional #1 (D/QP) revealed:</p> <ul style="list-style-type: none"> <li>- Staff #4 was her AP</li> </ul> <p>Interview on 10/16/25 with Staff #4 reported:</p> <ul style="list-style-type: none"> <li>- She had been an AP for 2 years but not at this facility</li> <li>- Denied working at this facility</li> <li>- Acknowledged working at Sister Facility A</li> </ul> <p>Interview on 10/16/25 with the D/QP reported:</p> <ul style="list-style-type: none"> <li>- Staff #4 had worked at this facility "at times" and is AP qualified</li> <li>- She did not know she needed a full time AP</li> <li>- She would start locating an AP</li> </ul> | V 295         |   |                    |