STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	MHL036-268	A. BUILDING: _____ B. WING _____	R 01/06/2020

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
BELMONT HOUSE	927 FLOYD LANE GASTONIA, NC 28052

(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	INITIAL COMMENTS A complaint and follow up survey was completed on January 6, 2020. A deficiency was cited. This facility is licensed for the following service category: 10A NCAC 27G .1700 Residential Treatment Staff Secure for Children or Adolescents.	V 000		
V 367	27G .0604 Incident Reporting Requirements 10A NCAC 27G .0604 INCIDENT REPORTING REQUIREMENTS FOR CATEGORY A AND B PROVIDERS (a) Category A and B providers shall report all level II incidents, except deaths, that occur during the provision of billable services or while the consumer is on the providers premises or level III incidents and level II deaths involving the clients to whom the provider rendered any service within 90 days prior to the incident to the LME responsible for the catchment area where services are provided within 72 hours of becoming aware of the incident. The report shall be submitted on a form provided by the Secretary. The report may be submitted via mail, in person, facsimile or encrypted electronic means. The report shall include the following information: (1) reporting provider contact and identification information; (2) client identification information; (3) type of incident; (4) description of incident; (5) status of the effort to determine the cause of the incident; and (6) other individuals or authorities notified or responding. (b) Category A and B providers shall explain any missing or incomplete information. The provider	V 367		

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V 367	Continued From page 1	V 367		

shall submit an updated report to all required report recipients by the end of the next business day whenever:
(1) the provider has reason to believe that information provided in the report may be erroneous, misleading or otherwise unreliable; or
(2) the provider obtains information required on the incident form that was previously unavailable.
(c) Category A and B providers shall submit, upon request by the LME, other information obtained regarding the incident, including:
(1) hospital records including confidential information;
(2) reports by other authorities; and
(3) the provider's response to the incident.
(d) Category A and B providers shall send a copy of all level III incident reports to the Division of Mental Health, Developmental Disabilities and Substance Abuse Services within 72 hours of becoming aware of the incident. Category A providers shall send a copy of all level III incidents involving a client death to the Division of Health Service Regulation within 72 hours of becoming aware of the incident. In cases of client death within seven days of use of seclusion or restraint, the provider shall report the death immediately, as required by 10A NCAC 26C .0300 and 10A NCAC 27E .0104(e)(18).
(e) Category A and B providers shall send a report quarterly to the LME responsible for the catchment area where services are provided. The report shall be submitted on a form provided by the Secretary via electronic means and shall include summary information as follows:
(1) medication errors that do not meet the definition of a level II or level III incident;
(2) restrictive interventions that do not meet the definition of a level II or level III incident;

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V 367	Continued From page 2 (3) searches of a client or his living area; (4) seizures of client property or property in the possession of a client; (5) the total number of level II and level III incidents that occurred; and (6) a statement indicating that there have been no reportable incidents whenever no incidents have occurred during the quarter that meet any of the criteria as set forth in Paragraphs (a) and (d) of this Rule and Subparagraphs (1) through (4) of this Paragraph. This Rule is not met as evidenced by: Based on interview and record review, the facility failed to report all Level III Incident Reports to the LME (Local Management Entity) where services are provided within 72 hours of becoming aware of the incident. The findings are: Review on 1/6/2020 of Client #1's record revealed: -Admitted 7/1/2019; -Diagnosed with Post-Traumatic Stress Disorder, Intermittent Explosive disorder, Depressive Disorder with Anxious Features, Borderline Intellectual Developmental Disability, Autistic Disorder, History of Physical and Sexual Abuse. Review on 1/6/2020 of the facility's Incident Reports revealed: -Level I incident report dated 11/26/2019 regarding an allegation of choking against Staff #3 made by Client #1. Staff #3 had provided multiple prompts to Client #1 for completion of morning hygiene tasks. Client #1 began cursing and reporting he wanted to kill Staff #3 and have Staff #3 fired. Staff #3 reported the incident to his	V 367		

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V 367	Continued From page 3 supervisor and when Client #1 saw Staff #3 on the telephone, Client #1 began yelling he was raped and choked by Staff #3. Staff #2 was in the facility and was able to calm Client #1 so Client #1 could speak with the Manager on the telephone; -Level I incident report dated 11/28/2019 regarding Client #1 reporting to his mother that he had been raped and choked by Staff #3 and Client #1 wanted to be removed from the home; -Level I incident report dated 12/1/2019 regarding client #1 wanting to leave the facility because of his reports of being raped and choked; -There were no Level III incident reports completed through North Carolina Incident Response Improvement System (NC IRIS) regarding the allegation of abuse. Interview on 1/6/2020 with the Executive Administrator revealed: -Was an oversight that the Level III incident report was not completed; -Will ensure any allegation is reported as a Level III incident report through NC IRIS in the future.	V 367		