STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:		(X2) MULTIPLE CONSTRUCTION A. BUILDING:			(X3) DATE SURVEY COMPLETED		
MHL060968			B. WING		I	C 04/30/2025	
NAME OF F	PROVIDER OR SUPPLIER				STATE, ZIP CODE		
ALEXAN	DER YOUTH NETWO	RK - CHARLOTTI		IERMAL RD TE, NC 282	11		
(X4) ID PREFIX TAG	(EACH DEFICIENCY	TEMENT OF DEFICIENCIES MUST BE PRECEDED BY FU SC IDENTIFYING INFORMATION		ID PREFIX TAG	PROVIDER'S PLAN OF COI (EACH CORRECTIVE ACTION CROSS-REFERENCED TO THE DEFICIENCY)	I SHOULD BE	(X5) COMPLETE DATE
V 000	INITIAL COMMENT	TS .		V 000			
	2025. The complain	was completed on Apr nts were substantiated #NC00228713). Defici	(intake				
	category: 10A NCA	sed for the following se C 27G .1400 Day Trea olescents with Emotion ances.	tment				
		urrent census of 30 . T sisted of audits of 1 cur					
V 132	G.S. 131E-256(G) I Allegations, & Prote			V 132			
	REGISTRY (g) Health care faci Department is notifi health care personr unknown source, w any act listed in sub (which includes: a. Neglect or abus facility or a person t as defined by G.S. as defined by G.S.	EALTH CARE PERSON lities shall ensure that the fied of all allegations agonel, including injuries of hich appear to be relate odivision (a)(1) of this so the of a resident in a head to whom home care se 131E-136 or hospice so 131E-201 are being property of a re-	the ainst f ed to ection. althcare rvices ervices ovided.				
	in a health care fact (b) of this section in care services as de hospice services as are being provided. c. Misappropriation healthcare facility.	ility, as defined in subs icluding places where h fined by G.S. 131E-13 defined by G.S. 131E in of the property of a ligs belonging to a heal	ection nome 6 or -201				

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

TITLE (X6) DATE

STATEMENT OF DEFICIENCIES (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:						SURVEY LETED
			A. BUILDING.		c	
		MHL060968	B. WING		1	0/2025
NAME OF	PROVIDER OR SUPPLIER	STREET AD	DRESS, CITY, S	STATE, ZIP CODE		
ΛΙΕΥΛΝ	DER YOUTH NETWO	PK - CHAPLOTTI 6220-D TH	HERMAL RD			
ALLXAN	DER TOOTH NETWO	CHARLOT	TTE, NC 282	11		
(X4) ID PREFIX TAG	(EACH DEFICIENCY MUST BE PRECEDED BY FULL			PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD CROSS-REFERENCED TO THE APPRODEFICIENCY)	.D BE	(X5) COMPLETE DATE
V 132	Continued From pa	ge 1	V 132			
	e. Fraud against a a patient or client for providing services) Facilities must have acts are investigated to protect residents investigation is in prinvestigations must Department within notification to the Department of the Dep	health care facility or against or whom the employee is a evidence that all alleged and must make every effort from harm while the rogress. The results of all a be reported to the five working days of the initial repartment. Let as evidenced by: views and interviews, the rect clients during an rise, neglect or exploitation.				
	-Job Title QP.					
	Facility's Video Foot-Client #1 was in the chair yelling, "Duming The QP said, "Dorwrong one." -Staff #2 walked ow to sit in the chair buchairThere was an uning between Client #1 are the Client #1, grabbed	4/21/25 at 12:00pm of the stage dated 3/14/25 revealed: e classroom standing in a my! Dummy! Dummy!" It start with me today, I'm the er to Client #1 and asked him at he continued standing in the stelligible exchange of words and the QP. In her seat, walked over to both of his shoulders and floor then walked back over to				
	-Client #1 fell over to the floor.	to the right out of his chair on f the floor, sat in his chair and				

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STATE FORM 6899 KUZI11 If continuation sheet 2 of 11

STATEMENT OF DEFICIENCIES (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:		(X2) MULTIPLE CONSTRUCTION A. BUILDING:			(X3) DATE SURVEY COMPLETED			
				71. Boiles in (c.			С	
		MHL060968		B. WING			30/2025	
NAME OF I	PROVIDER OR SUPPLIER		STREET AD	DRESS, CITY, S	STATE, ZIP CODE			
ALEXAN	DER YOUTH NETWO	RK - CHARLOLL		HERMAL RD FTE, NC 282	111			
(X4) ID PREFIX TAG	(EACH DEFICIENC)	TEMENT OF DEFICIENCIES / MUST BE PRECEDED BY F SC IDENTIFYING INFORMAT		ID PREFIX TAG	PROVIDER'S PLAN OF (EACH CORRECTIVE AC CROSS-REFERENCED TO DEFICIEN	TION SHOULD BE THE APPROPRIATE	(X5) COMPLETE DATE	
V 132	1 0			V 132				
	made an unintelligible comment to the QP then Client #1 said, "Do something about it." in which the QP replied, "I just did."							
	Response Improve -On 3/19/25 while r reference to anothe Supervisor saw the pushed him out of I	of the North Carolina Iment System (IRIS) re eviewing video footage er incident, the Program QP walk over to Clier inis chair on 3/14/25.	evealed: e in m					
	-Client #1 fell to the -The QP walked ba #1 got up and sat in	ck over to her seat an	d Client					
	Review on 4/21/25 of the facility's document titled "Internal Review Findings of Fact Summary-3.31.24: Incident 3.19.25" revealed: -"Allegation: While reviewing video for another Internal Investigation, program manager saw staff (QP) pull client (Client #1) off a desk and 'throw the to the floor.' " -"The video shows the staff member (QP)							
	exchange of words floor. The video is of -"The youth (Client 'dummy.' The staff saying 'Don't start v	#1) is repeatedly sayir member (QP) can be vith me today, I'm the	on the ng heard wrong					
	challenged the staf 'I just did something -"The cause of the member (QP) exac	ical exchanged the your found the your found it.' " incident is seen as stated in the your feering her. Staff was	stated, iff					
	-"Recommendation staff member (QP) Improvement Plan completed TCI (the	s: It is recommended be on a 60-day Perfor during which time she rapeutic crisis interver ith a concentration on	mance ntion)					

Division of Health Service Regulation

STATE FORM 6899 KUZI11 If continuation sheet 3 of 11

STATEMENT OF DEFICIENCIES (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:			(X2) MULTIPLE CONSTRUCTION A. BUILDING:		(X3) DATE SURVEY COMPLETED	
		MIII 00000	B. WING		C	
		MHL060968	b. WING		04/3	0/2025
NAME OF F	PROVIDER OR SUPPLIER	STREET ADI	DRESS, CITY, S	STATE, ZIP CODE		
ALEXAN	DER YOUTH NETWO	RK - CHARLOTTI	HERMAL RD TTE, NC 282	211		
(X4) ID PREFIX TAG	(EACH DEFICIENCY	TEMENT OF DEFICIENCIES / MUST BE PRECEDED BY FULL SC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOUL CROSS-REFERENCED TO THE APPRO DEFICIENCY)	.D BE	(X5) COMPLETE DATE
V 132	Continued From pa	ge 3	V 132			
	with Care concepts proactive and utilizi	that assist with being ng verbal de-escalation as positive engagement				
	revealed: -On 3/19/25 he was reference to another footage of the QP prochair on 3/14/25Completed the NC incident to Human IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII	outcome of the internal				
	-Did not remember incident between th 3/14/25Remembered Clie clients and "talking black B**ch." -"Whatever you say happened. I think s minute. That kid (C and push."	5 with Staff #2 revealed: a lot of the details of the le QP and Client #1 on Int #1 was disrupting the other back, calling staff names like In on the video is what the (QP) just lost her cool for a lient #1) would push and push P and Client #1 arguing with				

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STATE FORM 6899 KUZI11 If continuation sheet 4 of 11

DIVIDION	of Fleatiff Service IN	guiation					
	STATEMENT OF DEFICIENCIES (X1) PROVIDER/SUPPLIER/CLIA			(X2) MULTIPL	E CONSTRUCTION	(X3) DATE	
and Plan	OF CORRECTION	IDENTIFICATION N	UMBER:	A. BUILDING:		COMPLETED	
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		МП ососо		B. WING		04/2	
		MHL060968				1 04/3	0/2025
NAME OF F	PROVIDER OR SUPPLIER		STREET AD	DRESS, CITY, S	STATE, ZIP CODE		
			6220-D TI	HERMAL RD			
ALEXAN	DER YOUTH NETWO	RK - CHARLOTTI		ΓΤΕ, NC 282			
0(4) ID	CLIMMA DV CTA	TEMENT OF DEFICIENCE				ON	(2/5)
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TAG	•	SC IDENTIFYING INFORM		TAG	CROSS-REFERENCED TO THE APPRO		DATE
					DEFICIENCY)		
V 132	Continued From pa	ige 1		V 132			
V 132	Continued From pa	ige 4		V 132			
	Interview on 4/28/2	5 the QP revealed:					
	-On 3/14/25 Client a	#1 kept using the sa	aying "clock				
	that tea" and in a jo						
	-"I walked over to h						
	wiggled out of his c	hair. I was playing v	with him, I				
	wasn't trying to harr		,				
	-"I'm not that kind of person to harm children."						
	-"It was a playful interaction."						
	-Denied telling Client #1 "Don't start with me						
	today, I'm the wrong						
	-Denied Client #1 w		chair velling				
	"Dummy."						
	-Did not pull Client	#1 out of his chair o	n to the				
	floor.	,, i out of the origin c	11 10 110				
	-Could not recall wh	nich davs she worke	ed hetween				
	3/27/25 and 3/31/25		od between				
	3/21/23 and 3/3 1/20	J.					
	Interview on 4/22/2	5 with the HR Direc	tor				
	revealed:						
	-The QP was suspe	ended from the day	nrogram				
	pending investigation		program				
	-The QP worked wi		while				
	under investigation.		WILLIG				
	-The internal invest		rom				
	3/27/25 to 3/31/25.	igation took place i	- OIII				
	-Did not know the G)P was not sunnos	ed to work				
	with any clients while under investigation"I thought the suspension was just for the day						
	program."	onsion was just for	uie day				
	program.						
	Interview on 4/29/2	5 with the Vice Pres	sident of				
	Performance Impro	-	Jacin Ol				
	-Did not have a lot		incident				
	between the QP an		HICIAETII				
			anothar				
	-Verified the QP wa						
	Program while unde	er investigation for a	abusing				
	Client #1.	igation was 2/07/05	through				
	- I DE IDIERDAI INVACT	いついいい いつく イノノブンち	ממוווחוווו	1	I .		1

3/31/25.

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STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:			(X2) MULTIPLE CONSTRUCTION A. BUILDING:		(X3) DATE SURVEY COMPLETED	
MHL060968		B. WING		C 04/30/2025		
NAME OF I	PROVIDER OR SUPPLIER	STREET AD	DRESS, CITY, S	STATE, ZIP CODE		
AI EVAN	DER YOUTH NETWO	BK CHARLOTTI 6220-D TH	IERMAL RD			
ALEXAN	DER TOUTH NETWO	CHARLOTT	TTE, NC 282	211		
(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 CORRECTI (EACH CORRECTIVE ACTION SHOUL CROSS-REFERENCED TO THE APPRO DEFICIENCY)	D BE	(X5) COMPLETE DATE
V 132	Continued From pa	nge 5	V 132			
	-The QP was termi	nated on 4/29/25.				
V 512	27D .0304 Client R	ights - Harm, Abuse, Neglect	V 512			
	(a) Employees sha abuse, neglect and with G.S. 122C-66. (b) Employees sha sort of abuse or ne 27C .0102 of this C (c) Goods or service purchased from a cestablished govern (d) Employees shanecessary to repel aggressive client argoverning body polis necessary deper characteristics of the and physical and mof aggressiveness intervention proced Subchapter 10A NC (e) Any violation by	EGLECT OR EXPLOITATION all protect clients from harm, exploitation in accordance all not subject a client to any 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 not which is permitted by icy. The degree of force that add 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. It is a control to the con				
	Based on record re	et as evidenced by: eviews and interviews, 1 of 1 nal (QP) abused 1 of 1 client are:				
	Review on 4/16/25	of Client #1's record revealed:				

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Division of Health Service Regulation STATE FORM

KUZI11 If continuation sheet 6 of 11

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:		(X2) MULTIPL A. BUILDING:	E CONSTRUCTION		SURVEY PLETED		
		MHL060968		B. WING		I	C 30/2025
	PROVIDER OR SUPPLIER	RK - CHARLOTTI	6220-D TH	DRESS, CITY, S HERMAL RD ITE, NC 282	STATE, ZIP CODE		
(X4) ID PREFIX TAG	(EACH DEFICIENCY	TEMENT OF DEFICIENCIE / MUST BE PRECEDED BY SC IDENTIFYING INFORM	FULL	ID PREFIX TAG	PROVIDER'S PLAN OF (EACH CORRECTIVE AC CROSS-REFERENCED TO DEFICIEN	TION SHOULD BE THE APPROPRIATE	(X5) COMPLETE DATE
V 512	-Diagnoses of Opper Posttraumatic Stress Review on 4/21/25 revealed: -Date of hire 2/28/2 -Job Title QPAbuse training on stress Review on 4/21/25 Video Footage date -Client #1 was in the chair yelling, "Dumret -The QP said, "Donwrong one." -Staff #2 walked over to sit in the chair buchairThere was an unin between Client #1 are -The QP got up from Client #1, grabbed pulled him to the flower seatClient #1 fell over the floorClient #1 got up of made an unintelligil challenged the QP which the QP replies Review on 4/16/25 Response Improverson 3/19/25 while reference to another Supervisor saw the pushed him out of the Client #1 fell to the recommendation of the Client #1 fell to the recommendation of the Supervisor saw the pushed him out of the Client #1 fell to the	ositional Defiant Disc es Disorder of the QP's personn 22 9/18/24. at 12:00pm of the Fact 3/14/25 revealed: e classroom standin my! Dummy! Dummy of the Continued stand at the continued stand at the continued stand at the continued stand at the right of the char both of his shoulders bor then walked back to the right of the char at the floor, sat in his ble comment to the O to "Do something ab ed, "I just did." of the North Carolina ment System (IRIS) eviewing video foota er incident, the Progr QP walk over to Clin is choir. et floor. eck over to her seat a	el record acility's g in a y!" y, I'm the asked him ding in the of words over to air on to chair then QP and out it" in a Incident revealed: ge in am ent #1 and	V 512			

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STATE FORM 6899 KUZI11 If continuation sheet 7 of 11

MHL060968 B. WING	STATEMENT OF DEFICIENCIES (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:			(X2) MULTIPLE CONSTRUCTION A. BUILDING:			(X3) DATE SURVEY COMPLETED	
NAME OF PROVIDER OR SUPPLIER ALEXANDER YOUTH NETWORK - CHARLOTTI (X4) ID SUMMARY STATEMENT OF DEFICIENCIES BY FULL (EACH DEFICIENCY MUST BE PRECEDED BY FULL TAG (X4) ID PREFIX TAG (EACH DEFICIENCY MUST BE PRECEDED BY FULL TAG (EACH DEFICIENCY SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DATE (EACH DEFICIENCY) V 512 V 512 Review on 4/21/25 of the facility's document titled 'Internal Review Findings of Fact Summary- 3.31.24: Incident 3.19.25 revealed: -'Allegation: While reviewing video for another Internal Investigation, program manager (Program Supervisor) saw staff (QP) pull client (Client #1) off a desk and throw the to the floorThe video shows the staff member (QP) approaching the youth (Client #1) after an exchange of words and then the youth is on the floor. The video is darkThe youth (Client #1) is repeatedly saying dummy. The staff member (QP) can be heard saying 'Don't start with me today, I'm the wrong one.' After the physical exchanged the youth challenged the staff verbally to which she stated, 'I just did something about it.' -The cause of the incident is seen as staff member (QP) exacting revenge on the youth (Client #1) for challenging her. Staff was reactionaryRecommendations: It is recommended that the staff member (QP) be on a 60-day Performance Improvement Plan during which time she completed TCI (therapeutic crisis intervention) refresher training with a concentration on Handle with Care concepts that assist with being proactive and utilizing verbal de-escalation techniques as well as positive engagement						c		
ALEXANDER YOUTH NETWORK - CHARLOTTI (X4) ID PREFEIX TAGS (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION) V 512 Continued From page 7 Review on 4/21/25 of the facility's document titled "Internal Review Findings of Fact Summary-3.31.24: Incident 3.19.25 revealed: "Allegation: While reviewing video for another Internal Investigation, program manager (Program Supervisor) saw staff (QP) pull client (Client #1) off a desk and throw the to the floor. "The video shows the staff member (QP) approaching the youth (Client #1) is repeatedly saying dummy. The staff member (QP) can be heard saying 'Don't start with me today, I'm the wrong one.' After the physical exchanged the youth challenged the staff verbally to which she stated, 'I just did something about it.' -The cause of the incident is seen as staff member (QP) exacting revenge on the youth (Client #1) for challenging her. Staff was reactionary. -Recommendations: It is recommended that the staff member (QP) bor on a 60-4ay Performance Improvement Plan during which time she completed TCI (therapeutic crisis intervention) refresher training with a concentration on Handle with Care concepts that assist with being proactive and utilizing verbal de-escalation techniques as well as positive engagement		MHL060968						
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CM4-IID PREFIX CRACH DEFICIENCY MUST BE PRECEDED BY PULL REGULATORY OR LSG DENTIFYING INFORMATION) PREFIX TAG PROPERTIFY ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DATE DATE	ALEXAN	DER YOUTH NETWO	RK - CHARLOTTE		44			
PRÉFIX TAG (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION) PRÉFIX TAG CROSS-REFERENCED TO THE APPROPRIATE						ON	0/5	
Review on 4/21/25 of the facility's document titled "Internal Review Findings of Fact Summary-3.31.24: Incident 3.19.25 revealed: -"Allegation: While reviewing video for another Internal Investigation, program manager (Program Supervisor) saw staff (QP) pull client (Client #1) off a desk and throw the to the floorThe video shows the staff member (QP) approaching the youth (Client #1) after an exchange of words and then the youth is on the floor. The video is darkThe youth (Client #1) is repeatedly saying dummy. The staff member (QP) can be heard saying 'Don't start with me today, I'm the wrong one.' After the physical exchanged the youth challenged the staff verbally to which she stated, 'I just did something about it.' -The cause of the incident is seen as staff member (QP) exacting revenge on the youth (Client #1) for challenging her. Staff was reactionaryRecommendations: It is recommended that the staff member (QP) be on a 60-day Performance Improvement Plan during which time she completed TC (therapeutic crisis intervention) refresher training with a concentration on Handle with Care concepts that assist with being proactive and utilizing verbal de-escalation techniques as well as positive engagement	PRÉFIX	(EACH DEFICIENC)	Y MUST BE PRECEDED BY FULL	PREFIX	(EACH CORRECTIVE ACTION SHOUL CROSS-REFERENCED TO THE APPRO	D BE	COMPLETE	
"Internal Review Findings of Fact Summary- 3.31.24: Incident 3.19.25 revealed: -"Allegation: While reviewing video for another Internal Investigation, program manager (Program Supervisor) saw staff (QP) pull client (Client #1) off a desk and throw the to the floorThe video shows the staff member (QP) approaching the youth (Client #1) after an exchange of words and then the youth is on the floor. The video is darkThe youth (Client #1) is repeatedly saying dummy. The staff member (QP) can be heard saying 'Don't start with me today, I'm the wrong one.' After the physical exchanged the youth challenged the staff verbally to which she stated, 'I just did something about it.' -The cause of the incident is seen as staff member (QP) exacting revenge on the youth (Client #1) for challenging her. Staff was reactionaryRecommendations: It is recommended that the staff member (QP) be on a 60-day Performance Improvement Plan during which time she completed TCI (therapeutic crisis intervention) refresher training with a concentration on Handle with Care concepts that assist with being proactive and utilizing verbal de-escalation techniques as well as positive engagement	V 512	Continued From pa	ige 7	V 512				
Interview on 4/21/25 with the Program Supervisor revealed: -On 3/19/25 he was reviewing video footage in reference to another incident when he came upon footage of the QP pushing Client #1 out of his chair on 3/14/25Completed the NC IRIS report and reported the		Review on 4/21/25 "Internal Review Fit 3.31.24: Incident 3 -"Allegation: While Internal Investigation (Program Supervise (Client #1) off a destant of the video shows the approaching the your exchange of words floor. The video is constructed that the physical construction on the video is constructed to the video is constructed in the video in the video is constructed in the video is construct	of the facility's document titled indings of Fact Summary-19.25 revealed: reviewing video for another on, program manager or) saw staff (QP) pull client sk and throw the to the floor. The staff member (QP) pult (Client #1) after an and then the youth is on the dark. The staff member (QP) can be heard with me today, I'm the wrong sical exchanged the youth for verbally to which she stated, grabout it. Incident is seen as staff sting revenge on the youth enging her. Staff was see It is recommended that the be on a 60-day Performance during which time she erapeutic crisis intervention) with a concentration on Handle at that assist with being ing verbal de-escalation as positive engagement.					

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STATEMENT OF DEFICIENCIES (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:		(X2) MULTIPLE CONSTRUCTION A. BUILDING:			(X3) DATE SURVEY COMPLETED			
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		MHL060968		B. WING			30/2025	
NAME OF F	PROVIDER OR SUPPLIER		STREET AD	DRESS, CITY, S	STATE, ZIP CODE			
ALEXAN	DER YOUTH NETWO	RK - CHARLOTTI		HERMAL RD ITE, NC 282	11			
(X4) ID PREFIX TAG	(EACH DEFICIENCY	TEMENT OF DEFICIENCIE Y MUST BE PRECEDED BY SC IDENTIFYING INFORM	FULL	ID PREFIX TAG	PROVIDER'S PLAN OF (EACH CORRECTIVE AC CROSS-REFERENCED TO DEFICIENC	TION SHOULD BE THE APPROPRIATE	(X5) COMPLETE DATE	
V 512	Continued From pa	ige 8		V 512				
	3/31/25)Did not question th	outcome of the intern						
	revealed: -His legal guardian interview because (v on 4/25/25 with Clie would not consent to Client #1 "does not s e has trouble followi	o an peak					
	Interview on 4/28/25 with Staff #2 revealed: -Did not remember a lot of the details of the incident between the QP and Client #1 on 3/14/25Remembered Client #1 was disrupting the other clients and "talking back, calling staff names like black B***h." -"Whatever you saw on the video is what happened. I think she (QP) just lost her cool for a minute. That kid (Client #1) would push and push and push." -Did not hear the QP and Client #1 arguing with each otherDid not know if Client #1 sustained any injuries. Interview on 4/28/25 the QP revealed: -On 3/14/25, Client #1 kept using the saying "clock that tea" and in a jokingly way she said "I will." -"I walked over to his desk and tickled him and he wiggled out of his chair. I was playing with him, I wasn't trying to harm him."							
	-"It was a playful int	nt #1 "Don't start with						

Division of Health Service Regulation

STATE FORM 6899 KUZI11 If continuation sheet 9 of 11

STATEMENT OF DEFICIENCIES (V4) DROVIDER/SUBBLIEB/CLIA				T		
	IT OF DEFICIENCIES OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	` '	E CONSTRUCTION	(X3) DATE COMP	SURVEY LETED
			A. BUILDING:			
		MHL060968	B. WING		04/3	0/2025
NAME OF I	PROVIDER OR SUPPLIER	STREET ADI	DRESS, CITY, S	STATE, ZIP CODE		
		6220-D TH	IERMAL RD			
ALEXANDER YOUTH NETWORK - CHARLOTTI CHARLOT			TE, NC 282	11		
(X4) ID PREFIX TAG	(EACH DEFICIENCY	TEMENT OF DEFICIENCIES MUST BE PRECEDED BY FULL SC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD CROSS-REFERENCED TO THE APPRODEFICIENCY)	D BE	(X5) COMPLETE DATE
V 512	Continued From pa	ge 9	V 512			
	-Denied Client #1 w	vas standing in his chair yelling				
	revealed: -The QP was susper pending investigationThe QP worked wire under investigationThe internal investigationThe QP was put or	th another program while				
	Interview on 4/29/25 with the Vice President of Performance Improvement revealed: -Did not have a lot of details about the incident between the QP and Client #1Verified the QP was allowed to work in another Program while under investigation for abusing Client #1The internal investigation was 3/27/25 through 3/31/25The QP was terminated on 4/30/25. Review on 4/30/25 of the Plan of Protection dated 4/30/25 signed by the Vice President of Performance Improvement revealed: -"What immediate action will the facility take to ensure the safety of the consumers in your care? [QP] was terminated from employment with [Licensee] on 4/29/2025 and has not worked with any children since 4/4/2025.					
	Describe your plans happens.	s to make sure the above				

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STATEMENT OF DEFICIENCIES (X1) PROVIDER/SUPPLIER/CLIA AND PLAN OF CORRECTION IDENTIFICATION NUMBER:			, ,	E CONSTRUCTION	(X3) DATE COMP	SURVEY LETED
			A. BOILDING.			,
		MHL060968	B. WING			0/2025
NAME OF F	PROVIDER OR SUPPLIER	STREET AD	DRESS, CITY,	STATE, ZIP CODE		
ALEXANDER YOUTH NETWORK - CHARLOTTI			HERMAL RD			
(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 CORREC' (EACH CORRECTIVE ACTION SHOI CROSS-REFERENCED TO THE APPR DEFICIENCY)	JLD BE	(X5) COMPLETE DATE
V 512	Continued From pa	age 10	V 512			
V 512	Human Resources all systems and loc Client #1 was 9 year Oppositional Defiar Stress Disorder. Or on a video from 3/1 yelling the word during the word during the word during the word on the shoulders, pulled hended up on the flo Deficiency constitution.	has removed [QP] access to rations effective 4/29/2025." ars old with diagnoses of an Disorder and Post Traumatic an 3/19//25, Client #1 was seen 14/25 standing in his chair and mmy. The QP told Client #1, today, I'm the wrong one. The Client #1, grabbed both of his im to the floor. Client #1 for beside the chair. This tes a Type A1 rule violation for must be corrected with in 23	V 512			

Division of Health Service Regulation STATE FORM