STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	MHL0601558	A. BUILDING: _____ B. WING _____	C 08/13/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
NEWPORT ACADEMY-LODGE	10450 BRIEF ROAD CHARLOTTE, NC 28227

(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 survey was completed on 8/13/25. The complaint was substantiated (Intake #NC00232123). A deficiency was cited. This facility is licensed for the following service category 10A NCAC 27G 1300 Residential Treatment for Children or Adolescents. This facility is licensed for 6 and has a current census of 5. The survey sample consisted of audits of 1 current client.	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	V 367		

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V 367	Continued From page 1 (6) other individuals or authorities notified or responding. (b) Category A and B providers shall explain any missing or incomplete information. The provider 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:	V 367		

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V 367	Continued From page 2 (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; (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 record reviews and interviews, the facility failed to report a Level II incident in the Incident Response Improvement System (IRIS) within 24 hours of becoming aware of the incident. The findings are: Review on 8/1/15 of IRIS revealed: -The facility had not submitted any incident reports since 1/2/24. Review on 7/30/25 of the facility's internal incident report revealed: -On 6/23/25 at 9:50 am "Client (#1) was asked to stop a behavior (saying "ommmm") by her peer and in response she continued doing so louder. After a brief argument with the peer, client [#1]	V 367		

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V 367	Continued From page 3	V 367		

threw a marker in the direction of the peer and the staff (another staff assisting Staff #1) took the peer (who was crying) outside to separate them. Back in the art room, staff [#1] attempted to redirect the client (#1) from the behavior since she was saying she "didn't care"and could "do what I want." When staff (#1) attempted to discuss this, the client became agitated. She (Client #1) grabbed the staff's (Staff #1) computer and threw it, then grabbed the staff's phone and threw it attempting to break it. Staff (#1) put client (#1) in a hold in an effort to get the phone and client (#1) bit staff (#1) on his arm. Client (#1) received a surface level scratch on her nose in the altercation."

Interview on 7/30/25 with Client #1 revealed:
-On 6/23/25 she was upset with Staff #1 because he would not stop talking to her.
-She "smashed" Staff #1's computer and he laughed so she grabbed his cellphone.
-Staff #1 put her in a "bear hug" in an attempt to get his cellphone away from her.
-She had a scratch on her nose but was not injured.
-Felt safe at the facility.

Interview on 8/4/25 with Staff #1 revealed:
-On 6/23/25 Client #1 was disturbing the other clients in the classroom.
-Client #1 kept telling him to "shut up" and he told Client #1, "Your yelling doesn't scare me. It is my job to talk to you."
-Client #1 came over and grabbed his computer and "smashed" it on the floor.
-Client #1 then grabbed his cellphone and that is when he got up and reached over her shoulder and grabbed it from Client #1's hand.
-He never put Client #1 in a hold.
-"The only time I made physical contact with her

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V 367	Continued From page 4 (Client #1) was when I grabbed my phone. My hand touched her's then she bit me." -He is a Nonviolent Crisis Intervention Instructor. -Was not trying to put Client #1 in a restraint. -Did not know how she got the scratch on her nose. -"She (Client #1) was not bleeding when she was removed from the class." -Reported the incident to the Program Director. Interview on 7/30/25 with the Program Director revealed: -Learned on the incident on 6/23/25 and completed an internal incident report. -Did not submit the incident to IRIS. -"I was told we (facility) did not have to report to IRIS." -Will report to IRIS going forward.	V 367		