

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL0601404	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 08/22/2025
NAME OF PROVIDER OR SUPPLIER SPRUCE COTTAGE		STREET ADDRESS, CITY, STATE, ZIP CODE 6200-E THERMAL ROAD CHARLOTTE, NC 28211		
(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 8-22-25. The complaints were substantiated (#NC00232821, #NC00232819). A deficiency was cited. This facility is licensed for the following service category: 10A NCAC 27G 1900 Psychiatric Residential Treatment Facility for Children and Adolescents. This facility is licensed for 6 and currently has a census of 5. The survey sample consisted of audits of 1 current client.	V 000	RECEIVED SEP 08 2025 DHSR-MH Licensure Sect V315 Correction: 1. Program supervisor will review the ratio requirements, the ratio SOP, and the child Protection Policy with Behavioral Health Counselors (BHCs). 2. Program Manager will attend staff meetings to ensure communication of expectations with all staff have been provided by Program Supervisor. Prevention: 1. Supervisor will conduct rounds throughout the shift to ensure ratio compliance and document findings on the Ratio Verification Checklists. 2. Supervisor will set expectations that they must be informed when BHCs need to step out of ratio. 3. Supervisors and Residential Coach will step into cottages when staff need to step out of ratio. 4. Supervisor will provide monthly individual and group supervision to all para professionals and document supervisions in the HRIS. Monitor: 1. Supervisor will conduct ratio checks throughout the shift. 2. Supervisor will address BHCs regarding ratio through monthly supervisions and provide corrective action plans to those who cannot comply. 3. Program manager will regularly review Ratio Verification checklists and monthly supervisions provided by Program Supervisors to program oversight of expectations and ensure compliance.	9/30/25
V 315	27G .1902 Psych. Res. Tx. Facility - Staff 10A NCAC 27G .1902 STAFF (a) Each facility shall be under the direction a physician board-eligible or certified in child psychiatry or a general psychiatrist with experience in the treatment of children and adolescents with mental illness. (b) At all times, at least two direct care staff members shall be present with every six children or adolescents in each residential unit. (c) If the PRTF is hospital based, staff shall be specifically assigned to this facility, with responsibilities separate from those performed on an acute medical unit or other residential units. (d) A psychiatrist shall provide weekly consultation to review medications with each child or adolescent admitted to the facility. (e) The PRTF shall provide 24 hour on-site coverage by a registered nurse.	V 315		by 9/30/25 then ongoing effective immediately then ongoing

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

Mashu Rull

TITLE

Program Manager

(X6) DATE

9/3/25

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V 315	Continued From page 1 This Rule is not met as evidenced by: Based on interviews and record review the facility failed to insure proper staffing ratio. The findings are: Review on 8-20-25 of video dated 7-17-25 revealed: -Approximately 7:00pm Former Staff #1 was working with 4 clients by himself. -Staff #2 was out of the cottage with 1 client. -Former Staff #1 was sitting outside of Client #1's bedroom door as Client #1 is having a behavior. -Client #3 came up to Former Staff #1 and requested assistance with making a phone call which Former Staff #1 couldn't help him with, so he had Client #3 get the iPad himself and dial the number. -7:22 pm, Staff #2 returns to facility with client. Interview on 8-20-25 with Former Staff #1 revealed: -He had not known where Staff #2 was, but when he tried to call her, he realized that her phone was left at the cottage. Interview on 8-20-25 with Staff #2 revealed: -Client #4 was having trouble regulating, so she took him on a walk to calm him down and got supplies at the same time. -She knew that she was supposed to let a supervisor know whenever she left the cottage but "I was just going across the field and I was with a client." Interview on 8-20-25 with the Program Director revealed:	V 315		

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V 315	Continued From page 2 -She doesn't know why Staff #2 wasn't re-trained on staff ratio. -All staff know that they are not supposed to leave the cottage without notifying the supervisor.	V 315		