

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL0601592	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 11/26/2025
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NAME OF PROVIDER OR SUPPLIER KATRINA RENEE'S SAFE PLACE LLC	STREET ADDRESS, CITY, STATE, ZIP CODE 5017 ELIZABETH ROAD CHARLOTTE, NC 28269
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V 000	<p>INITIAL COMMENTS</p> <p>An annual survey was completed on 11/26/2025. Deficiencies were 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 4 and currently has a census of 4. The survey sample consisted of audits of 1 current client and 2 former clients.</p>	V 000		
V 118	<p>27G .0209 (C) Medication Requirements</p> <p>10A NCAC 27G .0209 MEDICATION REQUIREMENTS</p> <p>(c) Medication administration:</p> <p>(1) Prescription or non-prescription drugs shall only be administered to a client on the written order of a person authorized by law to prescribe drugs.</p> <p>(2) Medications shall be self-administered by clients only when authorized in writing by the client's physician.</p> <p>(3) Medications, including injections, shall be administered only by licensed persons, or by unlicensed persons trained by a registered nurse, pharmacist or other legally qualified person and privileged to prepare and administer medications.</p> <p>(4) A Medication Administration Record (MAR) of all drugs administered to each client must be kept current. Medications administered shall be recorded immediately after administration. The MAR is to include the following:</p> <p>(A) client's name;</p> <p>(B) name, strength, and quantity of the drug;</p> <p>(C) instructions for administering the drug;</p> <p>(D) date and time the drug is administered; and</p> <p>(E) name or initials of person administering the</p>	V 118		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE _____ TITLE _____ (X6) DATE _____

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V 118	<p>Continued From page 1</p> <p>drug.</p> <p>(5) Client requests for medication changes or checks shall be recorded and kept with the MAR file followed up by appointment or consultation with a physician.</p> <p>This Rule is not met as evidenced by: Based on observations, record reviews, and interviews, the facility failed to ensure medications were administered on the written order of a physician affecting 1 of 1 Client (Client #1). The findings are:</p> <p>Review on 11/20/2025 of Client #1's record revealed: -Admission date 10/21/2025. -Diagnosed with Unspecified Trauma and Stress Related Disorder and Oppositional Defiant Disorder. -There were no Physician Orders for: -Tizanidine Hydrochloride (HCL) 2 milligram (mg) -Take 1 tablet by mouth once daily before bed.</p> <p>Observation on 11/20/2025 at 3:16 pm of Client #1's medication container revealed: -A bubble pack of Tizanidine 2 mg.</p> <p>Review on 11/20/2025 of Client #1's MARs from 10/21/2025-11/19/2025 revealed: -Tizanidine 2 mg was administered daily from 11/15/2025-11/19/2025.</p> <p>Interview on 11/20/2025 with Client #1 revealed:</p>	V 118		

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V 118	<p>Continued From page 2</p> <p>-She received her medications as prescribed but did not know the names of medications taken.</p> <p>Interview on 11/24/2025 with the Associate Professional (AP) revealed: -"It is my job to go back and do my checks on the meds (medications) to make sure everything has been documented. I do that in the middle of the week." -She and the Licensee were responsible for ensuring physician orders were present at the facility prior to administering medications. -Would ensure that medication orders were present at the facility prior to administering medications to clients moving forward.</p> <p>Interview on 11/24/2025 with the Qualified Professional revealed: -"[AP] and [Licensee] are responsible (for ensuring orders were present at the facility prior to medication administration)."</p> <p>Interview on 11/26/2025 with the Licensee revealed: -"Orders were sent to the pharmacy. I am going to have to get with the AP to make sure we are not missing anything (orders) and we have what we need." -Would ensure that medication orders were present at the facility prior to administering medications to clients moving forward.</p>	V 118		
V 367	<p>27G .0604 Incident Reporting Requirements</p> <p>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</p>	V 367		

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V 367	<p>Continued From page 3</p> <p>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:</p> <p>(1) reporting provider contact and identification information;</p> <p>(2) client identification information;</p> <p>(3) type of incident;</p> <p>(4) description of incident;</p> <p>(5) status of the effort to determine the cause of the incident; and</p> <p>(6) other individuals or authorities notified or responding.</p> <p>(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:</p> <p>(1) the provider has reason to believe that information provided in the report may be erroneous, misleading or otherwise unreliable; or</p> <p>(2) the provider obtains information required on the incident form that was previously unavailable.</p> <p>(c) Category A and B providers shall submit, upon request by the LME, other information obtained regarding the incident, including:</p> <p>(1) hospital records including confidential information;</p> <p>(2) reports by other authorities; and</p>	V 367		

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V 367	<p>Continued From page 4</p> <p>(3) the provider's response to the incident.</p> <p>(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).</p> <p>(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:</p> <p>(1) medication errors that do not meet the definition of a level II or level III incident;</p> <p>(2) restrictive interventions that do not meet the definition of a level II or level III incident;</p> <p>(3) searches of a client or his living area;</p> <p>(4) seizures of client property or property in the possession of a client;</p> <p>(5) the total number of level II and level III incidents that occurred; and</p> <p>(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.</p>	V 367		

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V 367	<p>Continued From page 5</p> <p>This Rule is not met as evidenced by: Based on record reviews and interviews, the facility failed to report all level II incidents in the Incident Response Improvement System (IRIS), failed to notify the Local Management Entity (LME)/Managed Care Organization (MCO) responsible for the catchment area where services were provided as required and failed to submit to the LME/MCO upon request other information regarding the incident. The findings are:</p> <p>Review on 11/20/2025 of the facility's incident reports from 08/01/2025 - 11/19/2025 revealed: -There were no incident reports available for review at the facility.</p> <p>Reviews on 11/24/2025 and 11/25/2025 of IRIS revealed: -10/03/2025; Former Client (FC) #2's Absence Without Leave (AWOL) incident with law enforcement involvement. -10/03/2025; FC #4's AWOL incident with law enforcement involvement. -10/12/2025; FC #5's AWOL incident with law enforcement involvement.</p> <p>Reviews on 11/24/2025 and 11/25/2025 of an IRIS Report dated 10/04/2025 for FC #2 revealed: -The incident occurred on 10/03/2025. -The provider learned of the incident on 10/03/2025. -The report was submitted on 10/04/2025. -LME/MCO comments dated 10/06/2025: "Please update the report with any new developments</p>	V 367		

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V 367	<p>Continued From page 6</p> <p>and/or once the client has been located." -The facility did not update the IRIS report at the request of the LME/MCO.</p> <p>Reviews on 11/24/2025 and 11/25/2025 of an IRIS Report dated 10/04/2025 for FC #4 revealed: -The incident occurred on 10/03/2025. -The provider learned of the incident on 10/03/2025. -The report was submitted on 10/04/2025. -LME/MCO comments dated 10/06/2025: "Please update the report with any new developments and/or once the client has been located." -The facility did not update the IRIS report at the request of the LME/MCO.</p> <p>Reviews on 11/24/2025 and 11/25/2025 of an IRIS Report dated 11/24/2025 for FC #5 revealed: -The incident occurred on 10/12/2025. -The provider learned of the incident on 10/12/2025. -The report was submitted on 11/24/2025; 42 days after the incident occurred.</p> <p>Interview on 11/26/2025 with the Licensee revealed: -She submitted the IRIS report for FC #5 prior to 11/24/2025. -"Going forward, when I follow up the guardian, I will also follow up with the LME (MCO)."</p>	V 367		
V 716	<p>27G .0301(c-d) Sanitation and Fire Documentation</p> <p>10A NCAC 27G .0301 COMPLIANCE WITH BUILDING CODES (c) Each facility shall maintain documented evidence of compliance with applicable fire,</p>	V 716		

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V 716	<p>Continued From page 7</p> <p>sanitation and building codes including an annual fire inspection.</p> <p>(d) As used in these Rules, the term "new facility" refers to a facility that has not been licensed previously and for which an initial license is sought. The term includes buildings converted from another use or containing facilities licensed for a different use than the facility for which an initial license is sought.</p> <p>This Rule is not met as evidenced by: Based on observations, record reviews, and interviews, the facility failed to maintain documented evidence of compliance with applicable annual fire extinguisher inspection.</p> <p>Observation on 11/20/2025 at approximately 1:35 pm of the facility's fire extinguisher revealed: -No annual fire extinguisher inspection tag.</p> <p>Review on 11/24/2025 of Email Correspondence from the Division of Health Service Regulations Construction Manager revealed: -"The tags should be provided when you have it serviced yearly. The company that does the service normally provides a tag."</p> <p>Interview on 11/24/2025 with the Associate Professional revealed: -"Usually, we call them (Fire Marshalls) out and they came out this year, and they said they did not give that little sticker." -She was not aware that fire extinguishers were serviced at an inspection site.</p> <p>Interview on 11/24/2025 with the Qualified Professional revealed: -"We are responsible for that (ensuring the fire extinguisher was inspected annually)."</p>	V 716		

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V 716	Continued From page 8 Interviews on 11/20/2025 and 11/26/2025 with the Licensee revealed: -"We were told that they (Fire Marshalls) no longer provided that (fire extinguisher annual inspection tag)." -"I will look it up and get the information on where to take it (fire extinguisher) and get it done every year." -"I will take it every November."	V 716		