Statement of Deficiencies	**(X1) Provider/Supplier/CLIA Identification Number**	**(X3) Date Survey Completed**
	01L004	08/16/2024
Name of Provider or Supplier	**Street Address, City, State**	
Altapoint Health Systems, Inc.	5800 Southland Drive, Mobile, AL	

For information on the provider's plan to correct this deficiency, please contact the provider or the state survey agency.

(X4) ID Prefix Tag	**Summary Statement of Deficiencies** (Each deficiency should be preceded by full regulatory or LSC identifying information)
N0167	MONITORING DURING AND AFTER RESTRAINT CFR(s): 483.362(c) A physician, or other licensed practitioner permitted by the state and the facility to evaluate the resident's well-being and trained in the use of emergency safety interventions, must evaluate the resident's well-being immediately after the restraint is removed. This ELEMENT is not met as evidenced by: Based on medical record (MR) review, review of facility policy, and interviews with staff, it was determined the facility failed to ensure a Face-to-Face evaluation was conducted within one hour after the application of restraint or seclusion. This deficient practice affected four of nine MRs reviewed of patients in restraints including Patient Identifier (PI) # 7, PI # 3, PI # 6, PI # 8, and had the potential to negatively affect all patients admitted to this facility. Findings include: Facility Policy: Use of Seclusion & Restraint Policy Number: CTS 4.2 Revised: 9/21 ...Procedure: ... F. In-person Face-to-Face Evaluation

1. The patient must receive an in-person face-to-face evaluation within 1 (one) hour of initiation of seclusion/restraint...

1. PI # 7 was admitted on 8/24/23 with diagnoses including Suicide Attempt, Chronic Post-Traumatic Stress Disorder, and Victim of Child Sexual Abuse.

Review of the Seclusion Restraint Placement dated 6/21/24 revealed PI # 7 was placed in restraints at 5:50 PM and released at 6:50 PM.

Review of the Face-to-Face Evaluation dated 6/21/24 revealed the Face-to-Face was conducted at 7:52 PM, which was two hours and two minutes after the initiation of the restraint.

Review of the Seclusion Restraint Placement dated 7/30/24 revealed PI # 7 was placed in seclusion from 9:44 AM to 10:44 AM.

Review of the Face-to-Face Evaluation dated 7/30/24 revealed the Face-to-Face was conducted at 3:40 PM, which was five hours and 56 minutes after the initiation of seclusion.

An interview was conducted on 8/16/24 at 10:02 AM with Employee Identifier (EI) # 1, Facility Administrator, who confirmed the Face-to-Face was not conducted within on hour after the initiation of restraint and seclusion per facility policy.

2. PI # 3 was admitted on 4/1/24 with diagnoses including Adjustment Disorder, Oppositional Defiant Disorder, and Attention Deficit Hyperactivity Disorder.

Review of the Seclusion Restraint Placement dated 5/8/24 revealed PI # 3 was placed in seclusion from 12:45 PM and released at 1:45 PM.

Review of the Face-to-Face Evaluation revealed the face to face evaluation was conducted at 7:24 PM, which was seven hours and 43 minutes after the initiation of seclusion.

Review of the Seclusion Restraint Placement dated 5/8/24 revealed physician's orders for Restraint from 1:00 PM to 1:59 PM.

Further review of the Seclusion Restraint Placement dated 5/8/24 revealed PI # 3 was placed in restraints at 1:00 PM and released at 1:05 PM.

Review of the Face-to-Face Evaluation revealed the evaluation was conducted at 7:28 PM, which was seven hours and 28 minutes after the initiation of the restraint.

Review of the Seclusion Restraint Placement dated 5/22/24 revealed physician's orders for seclusion for one hour.

Further review of the Seclusion Restraint Placement dated 5/22/24 revealed PI # 3 was placed in seclusion at 5:22 PM and released at 6:07 PM.

Review of the Face-to-Face Evaluation revealed the evaluation was conducted at 8:18 PM, which was two hours and 56 minutes after the initiation of seclusion.

An interview was conducted on 8/16/24 at 10:15 AM with EI # 1 who confirmed the

	facility failed to ensure a Face-to-Face evaluation was conducted within one hour after the initiation of restraint or seclusion per facility policy. 3. PI # 6 was admitted on 6/17/24 with diagnoses including Other Specified Disruptive Impulse-Control and Conduct Disorder, Attention Deficit/Hyperactivity Disorder, Combined Presentation, and Autism Spectrum Disorder. Review of the Seclusion Restraint Placement dated 6/26/24 revealed PI # 6 was placed in restraints at 2:42 PM and released at 2:49 PM. Review of the Face-to-Face Evaluation dated 6/28/24 revealed the Face to Face was conducted at 11:03 AM, which was forty six hours and twenty one minutes after the initiation of the restraint. Review of the Seclusion Restraint Placement dated 7/9/24 revealed PI # 6 was placed in seclusion from 10:05 AM to 11:05 AM. Review of the Face-to-Face Evaluation dated 7/9/24 revealed the Face-to-Face was conducted at 7:36 PM, which was seven hours and 31 minutes after the initiation of seclusion. An interview was conducted on 8/16/24 at 10:20 AM with EI # 2, Assistant Director, who confirmed the Face-to-Face evaluation was not conducted within on hour after the initiation of restraint and seclusion per facility policy. 4. PI # 8 was admitted on 4/30/24 with diagnoses including Disruptive Mood Dysregulation Disorder and Attention Deficit/Hyperactivity Disorder, Combined Presentation. Review of the Seclusion Restraint Placement dated 5/3/24 revealed PI # 8 was placed in restraints at 10:15 AM and released at 11:15 AM. Review of the Face-to-Face Evaluation dated 5/4/24 revealed the Face-to-Face was conducted at 10:49 AM, which was 24 hours and 49 minutes after the initiation of the restraint. An interview was conducted on 8/16/24 at 10:02 AM with EI # 2 who confirmed the Face-to-Face evaluation was not conducted within one hour after the initiation of restraint per facility policy.