Statement of Deficiencies	**(X1) Provider/Supplier/CLIA Identification Number**	**(X3) Date Survey Completed**
	01L023	07/30/2026
Name of Provider or Supplier	**Street Address, City, State**	
Southeastern Psychiatric Management, Inc.	3001 Scenic Highway, Gadsden, 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)
N0145	ORDERS FOR USE OF RESTRAINT OR SECLUSION CFR(s): 483.358(f) Within 1 hour of the initiation of the emergency safety intervention a physician, or other licensed practitioner trained in the use of emergency safety interventions and permitted by the state and the facility to assess the physical and psychological wellbeing of residents, must conduct a face-to-face assessment of the physical and psychological wellbeing of the resident, including but not limited to- (1) The resident's physical and psychological status; (2) The resident's behavior; (3) The appropriateness of the intervention measures; and (4) Any complications resulting from the intervention. This ELEMENT is not met as evidenced by: Based on a review of the medical records (MR) and interview with staff, it was determined the facility failed to ensure that a face to face assessment was completed within one hour of the initiation of the restraint and/or seclusion. This affected five of eight MR's reviewed to include MR # 1, MR # 7, MR # 8, MR # 3, and MR # 6, and had the potential to negatively affect all residents restrained or secluded at this facility. Findings include: 4. MR # 3 was admitted on 7/9/2026 with a diagnosis of Disruptive Mood Dysregulation Disorder. A review of the MR revealed no documentation of the dates and times of the face to face assessments for restraints on 4/27/2026, 5/2/2026, 5/3/2026, 5/7/2026, 6/10/2026, 7/6/2026, 7/7/2026, and 7/18/2026.

An interview was conducted on 7/30/2026 with EI # 2, who confirmed there was no documentation of the dates and times of the face to face assessments.

5. MR # 6 was admitted on 7/29/2026 with a diagnosis of Disruptive Mood Dysregulation Disorder.

A review of the MR revealed no documentation of the face to face assessments for restraints on 4/26/2026 and 4/27/2026.

An interview was conducted on 7/30/2026 with EI # 2, who confirmed there was no documentation of the dates and times of the face to face assessments.

1. MR # 1 was admitted on 2/7/25 with a diagnosis of Disruptive Mood Dysregulation Disorder.

A review of the MR revealed no documentation of the dates and times of the face to face assessments for restraints on 5/3/25, 5/13/25, 7/9/25, 7/15/25, and 9/17/25.

An interview was conducted on 7/30/2026 at 3:22 PM with Employee Identifier (EI) # 2, Clinical Director of Residential, who confirmed there was no documentation of the dates and times of the face to face assessment for restraints.

2. MR # 7 was admitted on 6/10/26 with a diagnosis of Disruptive Mood Dysregulation Disorder.

A review of the MR revealed no documentation of the dates and times of the face to face assessment for restraints on 6/22/26.

An interview was conducted on 7/30/2026 at 3:22 PM with EI # 2, who confirmed there was no documentation of the dates and times of the face to face assessment for restraints.

3. MR # 8 was admitted on 2/25/26 with a diagnosis of Conduct Disorder, Childhood Onset.

A review of the MR revealed no documentation of the date and time of the face to face assessment for restraints on 6/7/26.

An interview was conducted on 7/30/2026 at 3:22 PM with EI # 2, who confirmed there was no documentation of the dates and times of the face to face assessment for restraints.