STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	220438	A. BUILDING: _____ B. WING _____	12/20/2022

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
MOREHEAD CITY TREATMENT CENTER	309 COMMERCE AVENUE MOREHEAD CITY, NC 28557

(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 An annual survey was completed on December 20, 2022. A deficiency was cited. This facility is licensed for the following service categories: 10A NCAC 27G .3600 Outpatient Opioid Treatment and 10A NCAC 27G .4400 Substance Abuse Intensive Outpatient Program. This facility has a current census of 242. The survey sample consisted of audits of 13 current clients.	V 000		
V 139	27G .0404 (F-L) Operations During Licensed Period 10A NCAC 27G .0404 OPERATIONS DURING LICENSED PERIOD (f) DHSR shall conduct inspections of facilities without advance notice. (g) Licenses for facilities that have not served any clients during the previous 12 months shall not be renewed. (h) DHSR shall conduct inspections of all 24-hour facilities an average of once every 12 months, to occur no later than 15 months as of July 1, 2007. (i) Written requests shall be submitted to DHSR a minimum of 30 days prior to any of the following changes: (1) Construction of a new facility or any renovation of an existing facility; (2) Increase or decrease in capacity by program service type; (3) Change in program service; or (4) Change in location of facility. (j) Written notification must be submitted to DHSR a minimum of 30 days prior to any of the following changes: (1) Change in ownership including any	V 139		

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V 139	Continued From page 1	V 139		

change in partnership; or
(2) Change in name of facility.
(k) When a licensee plans to close a facility or discontinue a service, written notice at least 30 days in advance shall be provided to DHSR, to all affected clients, and when applicable, to the legally responsible persons of all affected clients. This notice shall address continuity of services to clients in the facility.
(l) Licenses shall expire unless renewed by DHSR for an additional period. Prior to the expiration of a license, the licensee shall submit to DHSR the following information:
(1) Annual Fee;
(2) Description of any changes in the facility since the last written notification was submitted;
(3) Local current fire inspection report;
(4) Annual sanitation inspection report, with the exception of a day/night or periodic service that does not handle food for which a sanitation inspection report is not required; and
(5) The names of individuals who are owner, partners or shareholders holding an ownership or controlling interest of 5% or more of the applicant entity.

This Rule is not met as evidenced by:
Based on record review and interview, the facility failed to provide 30 days advance written notice to the Division of Health Service Regulation (DHSR) of plans to temporarily discontinue a licensed service. The findings are:

Review on 12/14/22 of the DHSR Enterprise electronic licensure system revealed no

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V 139	Continued From page 2 documented notice of discontinuation a licensed service at the facility location. During interviews on 12/14/22 and 12/20/22 the Program Director stated: - SAIOP services were not being provided at the facility. - The facility moved to its current location in September 2022 and SAIOP had not been provided since the move. - The Chief Executive Officer requested funding for SAIOP from the Local Management Entity, but it had not been approved. - She did not know if DHSR was notified of the temporary discontinuation of SAIOP and she did not have documentation of a notification.	V 139		