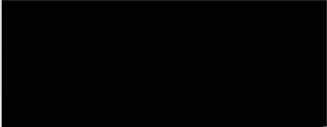


Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL067-166	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 12/06/2022
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NAME OF PROVIDER OR SUPPLIER JACKSONVILLE TREATMENT CENTER, LLC	STREET ADDRESS, CITY, STATE, ZIP CODE 291 HUFF DRIVE JACKSONVILLE, NC 28546
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(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
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V 000	<p>INITIAL COMMENTS</p> <p>A annual survey was completed on December 6, 2022. A deficiency was cited.</p> <p>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.</p> <p>This facility has a current census of 380. The survey sample consisted of audits of 18 current clients.</p>	V 000	<p><i>DHSR - Mental Health</i></p> <p><i>DEC 29 2022</i></p> <p><i>Lic. & Cert. Section</i></p>	
V 237	<p>27G .3604 (A-D) Outpt. Opiod - Operations</p> <p>10A NCAC 27G .3604 OPERATIONS</p> <p>(a) Hours. Each facility shall operate at least six days per week, 12 months per year. Daily, weekend and holiday medication dispensing hours shall be scheduled to meet the needs of the client.</p> <p>(b) Compliance with The Substance Abuse and Mental Health Services Administration (SAMHSA) or The Center for Substance Abuse Treatment (CSAT) Regulations. Each facility shall be certified by a private non-profit entity or a State agency, that has been approved by the SAMHSA of the United State Department of Health and Human Services and shall be in compliance with all SAMHSA Opioid Drugs in Maintenance and Detoxification Treatment of Opioid Addiction regulations in 42 CFR Part 8, which are incorporated by reference to include subsequent amendments and editions. These regulations are available from the CSAT, SAMHSA, Rockwall II, 5600 Fishers Lane, Rockville, Maryland 20857 at no cost.</p> <p>(c) Compliance With DEA Regulations. Each facility shall be currently registered with the Federal Drug Enforcement Administration and</p>	V 237		<p>The Program Director and Clinical Supervisor of Jacksonville Treatment Center will ensure that clients are meeting their required monthly sessions by increasing monthly audits of client electronic medical records. The Program Director and clinical team will discuss issues specific to clients experiencing barriers to counseling session compliance and how to assist those clients with overcoming those barriers during weekly treatment team meetings. The Clinical Supervisor will assist the counseling team in developing means of engagement for clients experiencing issues related to program compliance.</p> <p></p> <p><i>12/27/2022</i></p>

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL067-166	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 12/06/2022
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V 237	<p>Continued From page 1</p> <p>shall be in compliance with all Drug Enforcement Administration regulations pertaining to opioid treatment programs codified in 21 C.F.R., Food and Drugs, Part 1300 to end, which are incorporated by reference to include subsequent amendments and editions. These regulations are available from the United States Government Printing Office, Washington, D.C. 20402 at the published rate.</p> <p>(d) Compliance With State Authority Regulations. Each facility shall be approved by the North Carolina State Authority for Opioid Treatment, DMH/DD/SAS, which is the person designated by the Secretary of Health and Human Services to exercise the responsibility and authority within the state for governing the treatment of addiction with an opioid drug, including program approval, for monitoring compliance with the regulations related to scope, staff, and operations, and for monitoring compliance with Section 1923 of P.L. 102-321. The referenced material may be obtained from the Substance Abuse Services Section of DMH/DD/SAS.</p> <p>This Rule is not met as evidenced by: Based on record review and interview, the facility failed to ensure clients attended a minimum of 2 counseling sessions per month during the first year of treatment and at least 1 counseling session in all subsequent years, affecting 5 of 18 clients audited (#1031, #2393, #1844, #2057, and #2764). The findings are:</p> <p>Finding #1: Review on 12/6/22 of client #1031's record</p>	V 237		
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STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL067-166	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 12/06/2022
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V 237	<p>Continued From page 2</p> <p>revealed:</p> <ul style="list-style-type: none"> -44 year old female admitted 8/10/21. -Diagnoses of opioid use disorder, severe. -Order dated 4/25/22, client #1031 was currently taking methadone 100 mg (milligrams) daily and could increase by 5 mg weekly for a Clinical Opiate Withdrawal Scale (COWS) greater than 5 up to a maximum dose of 120mg. -Client #1031 had increased her dose from 110 mg to 115 mg on 11/10/22. -Client #1031's urine drug screen (UDS) on 9/23/22 was positive for Fentanyl. -Client #1031's UDS on 10/25/22 and 11/2/22 were positive for Fentanyl and Tetrahydrocannabinol (THC). <p>Review on 12/6/22 of client #1031's counselor notes revealed:</p> <ul style="list-style-type: none"> -Counselor notes dated 9/26/22 did not document client #1031 had been informed or counseled regarding her positive drug screen on 9/23/22. -There was no documentation client #1031 was seen for a counseling session in October or November 2022. <p>Interview on 12/5/22 client #1031 stated:</p> <ul style="list-style-type: none"> -She did not currently have a counselor. -She was not sure when her most recent counselor left. -She thought it had been "maybe 2 months" since she had seen a counselor. -She had not been "flagged" to see a counselor. -She learned her counselor was no longer employed by the facility when she saw her counselor's name had been removed from the office door. -If she requested to see a counselor she believed the facility would set her up with another counselor. 	V 237		

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STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL067-166	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 12/06/2022
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V 237	<p>Continued From page 3</p> <p>Finding #2: Review on 12/6/22 of client #2393's record revealed: -38 year old female admitted 10/13/20. -Diagnoses of opioid use disorder, severe. -Order dated 10/13/20, client #2393 could increase by 5 mg every other day for a COWS greater than 5 up to a maximum dose of 80 mg. -Client #2393 had increased her dose from 70 mg to 75 mg on 10/12/22. -Client #2393's UDS on 10/4/22 was positive for Cocaine, Amphetamines and THC. -Client #2393's UDS on 11/17/22 was positive for Amphetamines and THC.</p> <p>Review on 12/6/22 of client #2393's counselor notes revealed -There was no documentation client #2393 was seen for a counseling session in the months of October or November 2022, or counseled regarding her positive drug screen results on 10/4/22 and 11/17/22.</p> <p>Interview on 12/5/22 client #2393 stated: -She had 4 to 5 different counselors assigned to her during her treatment. -Since her last counselor left she had been a "floater," meaning she had "floated" among the counselors, but did not have an assigned counselor. -She was supposed to see a counselor twice a month. -Her past experiences with the counselors had been positive.</p> <p>Finding #3: Review on 12/6/22 of client #1844's record revealed: -32 year old male admitted 8/8/17. -Diagnoses of opioid use disorder, severe.</p>	V 237		

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V 237	<p>Continued From page 4</p> <p>-Order dated 8/23/22 approved client #1844's request for a voluntary taper, his current dose was 87 mg of methadone, he could decrease by 1 mg weekly until he reached 30 mg. Client #1844 could stop his taper at any time if he felt uncomfortable and could receive blind dosing as he requested.</p> <p>-Client #1844 had continued his taper down and was at 72 mg of methadone on 12/5/22.</p> <p>-Client #1844's UDS on 10/20/22, and 11/1/22 were positive for THC.</p> <p>Review on 12/6/22 of client #1844's counselor notes revealed:</p> <p>-There was no documentation client #1844 was seen for a counseling session in the months of October or November 2022, or counseled regarding his positive drug screen results on 10/20/22, and 11/1/22.</p> <p>Finding #4: Review on 12/6/22 of client #2057's record revealed:</p> <p>-38 year old female admitted 8/20/19.</p> <p>-Diagnoses of opioid use disorder, severe.</p> <p>-Order dated 8/20/19, client #2057's order allowed her to increase to a maximum dose of 80 mg of methadone.</p> <p>-Client #2057 was at 64 mg of methadone daily and received 6 take home doses each week.</p> <p>-Client #2057's UDS on 10/6/22 was positive for THC.</p> <p>Review on 12/6/22 of client #2057's counselor notes revealed:</p> <p>-There was no documentation client #2057 was seen for a counseling session in the months of October or November 2022.</p> <p>-No documentation client #2057 was counseled about a positive UDS on 10/6/22.</p>	V 237		

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V 237	Continued From page 5 Finding #5: Review on 12/6/22 of client #2764's record revealed: -26 year old female admitted 9/8/22. -Diagnoses of opioid use disorder, severe. -Order dated 9/8/22, client #2764's order allowed her to increase to a maximum dose of 16 mg of buprenorphine. -Client #2764 was at 8 mg of buprenorphine daily. -Client #2764's UDS on 10/11/22 was positive for fentanyl. Review on 12/6/22 of client #2764's counselor notes revealed: -There was no documentation client #2764 was seen for a counseling session in the month of November 2022. -No documentation client #2764 was counseled about a positive UDS on 10/11/22. Interview on 12/6/22 the Licensed Clinical Addiction Specialist (LCAS) #1 stated: -Client #1031's counselor had left employment; she was not sure when she left employment. -Client #1031 had been assigned to LCAS #1's case load, but she was not sure when she had been assigned. -There were no counselor notes for client #1031 in October or November 2022. -Client #1844's counselor had left employment. (Same former counselor as client #1031.) -She did not see any documentation of counselor notes for client #1844 in October or November, 2022. -She did not see any counselor notes for client #2393 in October or November, 2022. -It was the responsibility of the counselor to discuss urine drug screen results with the clients.	V 237		

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V 237	Continued From page 6 Interview on 12/6/22 the Program Director stated: -They had been short staffed on counselors during a transitional period. -New counselors had been hired and they were currently fully staffed.	V 237		

JACKSONVILLE TREATMENT CENTER

291 Huff Drive
Jacksonville, NC 28546
OFFICE (910) 347-2205

December 27, 2022

[REDACTED]
Facility Compliance Consultant I
Mental Health Licensure & Certification Section

[REDACTED], RN, MSN
Nurse Consultant
Mental Health Licensure & Certification Section

[REDACTED]
Facility Compliance Consultant I
Mental Health Licensure & Certification Section

Dear [REDACTED]

Please find enclosed the response to the Annual Survey completed on 12/06/2022 for Jacksonville Treatment Center, MHL #067-166.

We thank you and the survey team for the site visit and welcome the opportunity to improve services at the facility. We look forward to our continued partnership with NCDHSR.

If you have any additional needs, please do not hesitate to reach out to me.

Thank you
[REDACTED]

VP
252-299-0378
RM@TreatmentNC.com

Facility Locations:

Nags Head Treatment Center
Morehead City Treatment Center
Jacksonville Treatment Center
Sanford Treatment Center
Rocky Mount Treatment Center
Western Wake Treatment Center
Lumberton Treatment Center