Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION			R/SUPPLIER/CLIA ATION NUMBER:	(X2) MULTIPLE CONSTRUCTION A. BUILDING:			(X3) DATE SURVEY COMPLETED	
				A. BOILDING.	<del></del>			
MHL047-158		B. WING		08/0	08/07/2023			
NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE								
CANYON	I HILLS TREATMENT	FACILITY		RDEEN ROAI D, NC 28376				
(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 CORRECT (EACH CORRECTIVE ACTION SHOU CROSS-REFERENCED TO THE APPRO DEFICIENCY)	ILD BE	(X5) COMPLETE DATE	
V 000	INITIAL COMMEN	гѕ		V 000				
	An annual, complaint and follow up survey was completed on August 7, 2023. The complaint was unsubstantiated (intake #NC00205283). A deficiency was cited.							
	This facility is licensed for the following service category: 10A NCAC 27G .1900 Psychiatric Residential Treatment for Children and Adolescents.							
	This facility is licen census of 21, The saudits of 4 current of	survey sampl						
V 736	27G .0303(c) Facility and Grounds Maintenance			V 736				
	10A NCAC 27G .0303 LOCATION AND EXTERIOR REQUIREMENTS (c) Each facility and its grounds shall be maintained in a safe, clean, attractive and orderly manner and shall be kept free from offensive odor.							
	This Rule is not me Based on observati was not maintained and orderly manner	ion and interv I in a safe, cle	riew, the facility ean, attractive,					
	Observation on 8/7 facility's "Side A" re -Common Area- Th staff's closet had pa -Floor was stain throughout the roor	vealed: le door frame aint peeling o ned/scratche	around the					
	to entrance.	nt was peeled	issing. I off on wall next d and looked dirty					

Division of Health Service Regulation
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE (X6) DATE Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION A. BUILDING:		(X3) DATE SURVEY COMPLETED		
MHL047-158		B. WING		08/07/2023			
NAME OF F	PROVIDER OR SUPPLIER	STREET AD	DRESS, CITY, S	STATE, ZIP CODE			
CANYON HILLS TREATMENT FACILITY  769 ABERDEEN ROAD							
		RAEFORI	D, NC 28376				
(X4) ID PREFIX TAG	(EACH DEFICIENCY	ATEMENT OF DEFICIENCIES Y MUST BE PRECEDED BY FULL SC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTI (EACH CORRECTIVE ACTION SHOUL CROSS-REFERENCED TO THE APPRO DEFICIENCY)	_D BE	(X5) COMPLETE DATE	
V 736	Continued From pa	age 1	V 736				
	the closets.	m. Ifinished patch-up work inside cratches on the wall.					
	window.	as peeling off on wall by the ned/scratched and looked dirty n.					
	on the walls.	ere unfinished patch-up work ned/scratched and looked dirty n.					
	-Room #4-There was a section of paint that had been peeled off from wall inside the closetFloor was stained/scratched and looked dirty throughout the room.  -Bathroom A-There was a softball size hole on wall behind the doorThere were unfinished patch-up work on the wallsDoor frame was broken and missing sectionsFloor was stained/scratched and looked dirty throughout the room.						
	tiles.	as missing.					
	-Room #5-Floor wa dirty throughout the	as stained/scratch and looked e room.					
	-Room #6-There were unfinished patch-up work						

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STATEMENT OF DEFICIENCIES (X1) PROVIDER/SUPPLIER/CLIA

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION			R/SUPPLIER/CLIA ATION NUMBER:	(X2) MULTIPLE CONSTRUCTION  A. BUILDING:		(X3) DATE SURVEY COMPLETED			
	MHL047-158		B. WING		08/07/2023				
NAME OF I	NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE								
CANYON HILLS TREATMENT FACILITY 769 ABERDEEN ROAD RAEFORD, NC 28376									
(X4) ID PREFIX TAG	SUMMARY STA (EACH DEFICIENC) REGULATORY OR L		EDED BY FULL	ID PREFIX TAG	PROVIDER'S PLAN OF CORREC (EACH CORRECTIVE ACTION SHO CROSS-REFERENCED TO THE APPF DEFICIENCY)	ULD BE	(X5) COMPLETE DATE		
V 736	-Bathroom C-There long inside the show -Floor was stain throughout the room -Panel was condoor.  -Room #7-Bed fram repaired by the from the floor.  -Shelve furnitur shelve broken in the -Floor was stain throughout the room -Room #8-There we off on wall by the light -Floor was stain throughout the room -Room #9-There we on wall by the winder -Floor was stain throughout the room -Hallway to Rooms unfinished patch-up of hallway.  -Floor was stain throughout the room -Floor was stain through	ratches on the ned/scratched n.  was a crack wer stall wall. ned/scratched n. ning off on want of the ned/scratched n.  ere had the neder front and mined/scratched n.  ere scratches ghtswitch and scratched n.  ere unfinished ow.  ned/scratched n.  -There was a owork on the ned/scratch an.  and work on the ned/scratch an.	about six inches d and looked dirty all behind the ag and being Mattress was on at to last bottom assing a section. d and looked dirty and paint peeled d and looked dirty d patch-up work d and looked dirty large section of wall at beginning about six inches	V 736	DEFICIENCY)				
	facility's "Side B" re -Observation was li with active cases or	mited due to							

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STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPI IDENTIFICATION N		(X2) MULTIPLE CONSTRUCTION A. BUILDING:		(X3) DATE SURVEY COMPLETED			
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MHL047-158		B. WING	ING		08/07/2023				
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V 736	Continued From pa	ge 3		V 736					
	COVID positive were being isolated on "Side B" section of the facility. Surveyor was only able to observe Common Area and Play Area.								
	-Common Area-There were unfinished patch-up work on the walls entering the Hallway to the rooms.  -Floor was stained/scratch and looked dirty throughout the room.								
	-Desk/Tables had corners broken and missing sections.								
	Interview on 8/7/23 revealed: -Facility would be mear future as higher expanding from a term of the result of the second of the result of the remove laterRoom that was misted the right measures of the right measures of the right offShe acknowledged maintained in a safemanner	noving to a new built way in front would be wo lane to a four land focusing on replace great the time. It is the floor would created scrate and the floor would created by wall which was replacing door, but when it arrived antly having to pate punched them or set the facility was not the facility was no	Iding in the be ne highway. Sing the sir beds hes on the eate a sh was hard because it was not the tripped the sit						

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