

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL068-003	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 03/13/2024
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NAME OF PROVIDER OR SUPPLIER FREEDOM HOUSE RECOVERY CENTER	STREET ADDRESS, CITY, STATE, ZIP CODE 104 NEW STATESIDE DRIVE CHAPEL HILL, NC 27516
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V 000	<p>INITIAL COMMENTS</p> <p>An annual survey was completed on March 13, 2024. A deficiency was cited.</p> <p>This facility is licensed for the following service categories: 10A NCAC 27G .3700 Day Treatment Facilities for Individuals with Substance Abuse Disorders. 10A NCAC 27G .4400 Substance Abuse Intensive Outpatient Program (SAIOP). 10A NCAC 27G .4500 Substance Abuse Comprehensive Outpatient Treatment (SACOT).</p> <p>This facility has a total census of 23. The .3700 Day Treatment Facilities for Individuals with Substance Abuse Disorders has a current census of 0. The .4400 Substance Abuse Intensive Outpatient Program (SAIOP) has a current census of 9 and the .4500 Substance Abuse Comprehensive Outpatient Treatment Program (SACOT) has a current census of 14. The survey sample consisted of audits of 1 current SAIOP client and 3 current SACOT clients.</p>	V 000		
V 139	<p>27G .0404 (F-L) Operations During Licensed Period</p> <p>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</p>	V 139		

Division of Health Service Regulation LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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V 139	<p>Continued From page 1</p> <p>changes:</p> <p>(1) Construction of a new facility or any renovation of an existing facility;</p> <p>(2) Increase or decrease in capacity by program service type;</p> <p>(3) Change in program service; or</p> <p>(4) Change in location of facility.</p> <p>(j) Written notification must be submitted to DHSR a minimum of 30 days prior to any of the following changes:</p> <p>(1) Change in ownership including any change in partnership; or</p> <p>(2) Change in name of facility.</p> <p>(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.</p> <p>(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:</p> <p>(1) Annual Fee;</p> <p>(2) Description of any changes in the facility since the last written notification was submitted;</p> <p>(3) Local current fire inspection report;</p> <p>(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</p> <p>(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.</p>	V 139		

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V 139	<p>Continued From page 2</p> <p>This Rule is not met as evidenced by: Based on record review, observation and interviews, the facility failed to provide the Department of Health Service Regulation (DHSR) with written notification of discontinuance of services, construction of a new facility or change in location of facility. The findings are:</p> <p>Review on 3/12/24 of the facility's public record maintained by DHSR revealed: -Mental Health License (MHL) effective 1/2/24 with address of facility listed as 104 New Stateside Drive, Chapel Hill, NC. -Facility was license for substance abuse comprehensive outpatient treatment (SACOT), substance abuse intensive outpatient program (SAIOP) and day treatment facilities for individuals with substance abuse disorder. -No change of location noted in the record. -No record of a license for 116 New Stateside Drive, Chapel Hill, NC.</p> <p>Interview on 3/12/24 with the Receptionist revealed: -The SACOT program was not in the building. -The SACOT program was in another building. -She reported the address to the building was 116 New Stateside Drive, Chapel Hill, NC. -The building was on campus. -She reported the licensed building was for outpatient services and the SAIOP program evening group.</p> <p>Observation on 3/12/24 at 11:41 of the licensed facility revealed: -Space was used for outpatient services. -Office had one group space, one large</p>	V 139		

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V 139	<p>Continued From page 3</p> <p>conference room and offices for staff and licensed professionals.</p> <p>-SACOT program was Monday-Friday from 9:00 a.m. - 1:30 p.m.</p> <p>-SACOT program was not operating in the licensed building.</p> <p>Observation on 3/13/24 at 11:15 a.m. of the Unlicensed 116 New Stateside Drive address revealed:</p> <p>-Two group spaces and a bathroom.</p> <p>-SACOT program was currently in session utilizing one group space.</p> <p>Interview on 3/12/24 with the Vice President of Quality Assurance & Training revealed:</p> <p>-She was filling in until the Clinical Director and Director of Operations came on campus.</p> <p>-Both were off site until 3/13/24.</p> <p>-She knew they were doing renovations in the 116 new stateside drive building.</p> <p>-She was unsure when the SACOT program moved to the unlicensed building.</p> <p>Interview on 3/13/24 with the Director of Operations revealed:</p> <p>-SACOT program moved to unlicensed building in November 2023.</p> <p>-Group hours were from 9:00 - 1:30 p.m. Monday-Friday.</p> <p>-The use of the building was available around October or November 2023.</p> <p>-Clients would move back to the conference room in the license building until they obtain a license.</p> <p>Interview on 3/13/24 with the Clinical Director revealed:</p> <p>-SACOT program operated five days a week and facilitated at the 116 new stateside drive building.</p> <p>-SACOT group was from 9-1:30 p.m. and the size</p>	V 139		

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V 139	Continued From page 4 of the group varied. -As they were expanding the campus they felt this building would be more accommodating. -She reported it was a team decision to move clients to the building. -They felt clients would feel more comfortable. -She was unaware they needed a license since 104 new stateside drive address was for the whole campus. -They would submit paperwork immediately to license the 116 new stateside drive building. -SACOT program services would move back to the licensed facility.	V 139		