STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	MHL078-212	A. BUILDING: _____ B. WING _____	R-C 09/18/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
NU-IMAGE	130 SOUTH MAIN STREET RED SPRINGS, NC 28377

(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	V 000		
V 281	27G .4502 Sub. Abuse Comp. Outpt. Tx. - Staff 10A NCAC 27G .4502 STAFF (a) The SACOT shall be under the direction of a Licensed Clinical Addictions Specialist or a Certified Clinical Supervisor who is on site a minimum of 90% of the hours the program is in operation. (b) For each SACOT there shall be at least one direct care staff who meets the requirements of a Qualified Professional as set forth in 10A NCAC 27G .0104 (18) for every 10 or fewer clients. (c) Each SACOT shall have at least one direct care staff present in the program who is trained in the following areas: (1) alcohol and other drug withdrawal symptoms; and (2) symptoms of secondary complications due to alcoholism and drug addiction. (d) Each direct care staff shall receive continuing education that includes the following: (1) understanding of the nature of addiction; (2) the withdrawal syndrome; (3) group therapy; (4) family therapy; (5) relapse prevention; and (6) other treatment methodologies. This Rule is not met as evidenced by:	V 281		

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V 281	Continued From page 1 Based on observation, record reviews and interviews, the facility failed to operate SACOT under the direction of a Licensed Clinical Addition Specialist (LCAS) or a Certified Clinical Supervisor who is on site a minimum of 90 % of the hours the program is in operation for 1 of 3 audited staff (Clinical Director). The findings are: Observation on 09/18/24 between 11:00 AM-2:30 PM revealed no Licensed Clinical Addiction Specialist on site at the program. During interview on 09/18/24 with client #1, client #2 and client #3 revealed: -The previous LCAS was no longer working at the facility. -The facility did not have a new LCAS. During interview on 09/18/24 the QP revealed: -The facility did not have a LCAS. -A female had been hired but due to personal issues she had not worked at the facility. During interview on 09/18/24 the Chief Operating Officer revealed: -She was hired to help assit the facility. -The previous LCAS resigned. -A new LCAS had been hired but she had not worked at the facility due to personal issues. During interview on 09/18/24 the Chief Executive Officer/Owner revealed: -It was very difficult to find qualified people for the LCAS position. -She was aware the facility needed a LCAS. This deficiency constitutes a re-cited deficiency and must be corrected withing 30 days.	V 281		