Division of Health Service Regulation STATEMENT OF DEFICIENCIES (X1) PROVIDER/SUPPLIER/CLIA (X2) MULTIPLE CONSTRUCTION (X3) DATE SURVEY AND PLAN OF CORRECTION IDENTIFICATION NUMBER: COMPLETED A. BUILDING: _ MHL011-404 06/10/2025 NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE 9 OLD BURNSVILLE HILL ROAD, SUITE 4 AND 7 ASHEVILLE RECOVERY CENTER, LLC ASHEVILLE, NC 28804 SUMMARY STATEMENT OF DEFICIENCIES (X4) ID ID PROVIDER'S PLAN OF CORRECTION (EACH DEFICIENCY MUST BE PRECEDED BY FULL **PREFIX** PREFIX (EACH CORRECTIVE ACTION SHOULD BE COMPLETE TAG REGULATORY OR LSC IDENTIFYING INFORMATION) CROSS-REFERENCED TO THE APPROPRIATE TAG DATE DEFICIENCY) V 000 INITIAL COMMENTS V 000 An annual and complaint survey was completed on June 10, 2025. The complaint was unsubstantiated (Intake NC00230395). A deficiency was cited. 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 Program (SACOT). This facility has a current census of 70. The .3700 Day Treatment Facilities for Individuals with Substance Abuse Disorders has a census of 6. The .4400 SAIOP has a current census of 25. The .4500 SACOT has a current census of 39. The survey sample consisted of audits of 1 current Day Treatment, 3 current SACOT clients and 2 current SAIOP clients. V 131 G.S. 131E-256 (D2) HCPR - Prior Employment V 131 Verification G.S. §131E-256 HEALTH CARE PERSONNEL REGISTRY (d2) Before hiring health care personnel into a health care facility or service, every employer at a RECEIVED health care facility shall access the Health Care Personnel Registry and shall note each incident JUN 2 0 2025 of access in the appropriate business files. **DHSR-MH Licensure Sect** Division of Health Service Regulation

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

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Division of Health Service Regular STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION A. BUILDING: B. WING		(X3) DATE SURVEY COMPLETED 06/10/2025	
		MHL011-404				
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NAME OF PE	ROVIDER OR SUPPLIER			ROAD, SUITE 4 AND 7		
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	CUMMARY CTATEMENT OF DEFICIENCIES			ID PROVIDER'S PLAN OF CORRECTION		(X5)
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V 131	Continued From page 1		V 131			
	Continued From page 1 This Rule is not met as evidenced by: Based on record reviews and interviews, the facility failed to ensure the North Carolina Health Care Personnel Registry (HCPR) was accessed prior to hire to ensure the Health Care Personnel Registry (HCPR) was accessed prior to employment for 2 of 3 audited staff (Staff #2 and the Clinical Director). The findings are: Review on 6-10-25 of Staff #1's personnel record revealed: -Job Title: Clinician -Date of Hire: 12/9/24 -Date of HCPR check: 1/6/25 Review on 6-10-25 of the Clinical Director's personnel record revealed: -Job Title: Clinical Director -Date of Hire: 3/17/20 -Date of HCPR check: 1/6/25 Interview on 6-10-25 with the Clinical Director revealed: -HCPR checks are typically completed prior to hire. -"I have been tightening those things up (making sure new hire paperwork is complete)." -Some paperwork "went missing" when the Licensee separated from another companyThe internal systems had merged and "a few things went missing and must have been in the merger."					
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Division of Health Service Regulation

STATE FORM

Corrective Action Plan: Health Care Personnel Registry (HCPR) Submission

Deficiency Identified:

Employee's HCPR check was not completed and documented prior to their start date, as required by state regulations.

Measures to Correct the Deficient Practice:

- A new pre-hire compliance checklist will be implemented and required to be completed before an official start date and hiring policy will be updated accordingly.
- No employee will be onboarded or scheduled for orientation until HCPR verification is completed and uploaded into the employee file.

Measures to Prevent Future Occurrence:

- Hiring managers and compliance staff will receive training on proper pre-employment screening protocol, including required HCPR verification.
- A section of gatekeeping protocol will be added to our onboarding policy that will be enforced: onboarding cannot proceed without verification of this documentation by the Operations Manager.
- A standardized electronic onboarding folder will include a required copy of the HCPR verification printout with the date completed.

Monitoring Plan:

- Responsibility: The Operations Manager will monitor compliance with the HCPR check process.
- Frequency: A monthly audit of all new hire files will be conducted to ensure HCPR was completed before each start date.
- · Any discrepancies will trigger immediate review and coaching of the responsible staff member.

Signature: 1/10then 7-fedrick

Date: 6/17/25

