

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL011-436	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED R 11/14/2025
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NAME OF PROVIDER OR SUPPLIER ASHEVILLE DETOX CENTER	STREET ADDRESS, CITY, STATE, ZIP CODE 25 CHOCTAW STREET ASHEVILLE, NC 28801
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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
V 000	<p>INITIAL COMMENTS</p> <p>An annual and follow up survey was completed on 11/14/25. Deficiencies were cited.</p> <p>This facility is licensed for the following service categories: 10A NCAC 27G .3100 Non-hospital Medical Detoxification-Individuals who are Substance Abusers. 10A NCAC 27G .3400 Residential Treatment-Individuals with Substance Abuse Disorders.</p> <p>This facility is licensed for 10 in the 3100 program with a current census of 10 and licensed for 6 in the 3400 program with a current census of 0. The survey sample consisted of audits of 3 current clients.</p>	V 000		
V 219	<p>27G .3102 Nonhospital Med. Detox. - Staff</p> <p>10A NCAC 27G .3102 STAFF</p> <p>(a) A minimum of one direct care staff member shall be on duty at all times for every nine or fewer clients.</p> <p>(b) The treatment of each client shall be under the supervision of a physician.</p> <p>(c) The services of a certified alcoholism counselor, a certified drug abuse counselor or a certified substance abuse counselor shall be available to each client.</p> <p>(d) Each facility shall have at least one staff member on duty at all times trained in the following areas: (1) substance abuse withdrawal symptoms, including delirium tremens; and (2) symptoms of secondary complications to substance abuse.</p> <p>(e) Each direct care staff member shall receive continuing education to include understanding of</p>	V 219	<p><i>Please see attached letter for Plan of Correction</i></p> <p>RECEIVED DEC 01 2025 DHSR-MH Licensure Sect</p>	

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

TITLE

Chief Compliance Officer

(X6) DATE

11/24/2025

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V 536	Continued From page 2	V 536		
V 536	<p>27E .0107 Client Rights - Training on Alt to Rest. Int.</p> <p>10A NCAC 27E .0107 TRAINING ON ALTERNATIVES TO RESTRICTIVE INTERVENTIONS</p> <p>(a) Facilities shall implement policies and practices that emphasize the use of alternatives to restrictive interventions.</p> <p>(b) Prior to providing services to people with disabilities, staff including service providers, employees, students or volunteers, shall demonstrate competence by successfully completing training in communication skills and other strategies for creating an environment in which the likelihood of imminent danger of abuse or injury to a person with disabilities or others or property damage is prevented.</p> <p>(c) Provider agencies shall establish training based on state competencies, monitor for internal compliance and demonstrate they acted on data gathered.</p> <p>(d) The training shall be competency-based, include measurable learning objectives, measurable testing (written and by observation of behavior) on those objectives and measurable methods to determine passing or failing the course.</p> <p>(e) Formal refresher training must be completed by each service provider periodically (minimum annually).</p> <p>(f) Content of the training that the service provider wishes to employ must be approved by the Division of MH/DD/SAS pursuant to Paragraph (g) of this Rule.</p> <p>(g) Staff shall demonstrate competence in the following core areas:</p> <p>(1) knowledge and understanding of the people being served;</p>	V 536		

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V 536	<p>Continued From page 4</p> <p>by scoring a passing grade on testing in an instructor training program.</p> <p>(3) The training shall be competency-based, include measurable learning objectives, measurable testing (written and by observation of behavior) on those objectives and measurable methods to determine passing or failing the course.</p> <p>(4) The content of the instructor training the service provider plans to employ shall be approved by the Division of MH/DD/SAS pursuant to Subparagraph (i)(5) of this Rule.</p> <p>(5) Acceptable instructor training programs shall include but are not limited to presentation of:</p> <p>(A) understanding the adult learner;</p> <p>(B) methods for teaching content of the course;</p> <p>(C) methods for evaluating trainee performance; and</p> <p>(D) documentation procedures.</p> <p>(6) Trainers shall have coached experience teaching a training program aimed at preventing, reducing and eliminating the need for restrictive interventions at least one time, with positive review by the coach.</p> <p>(7) Trainers shall teach a training program aimed at preventing, reducing and eliminating the need for restrictive interventions at least once annually.</p> <p>(8) Trainers shall complete a refresher instructor training at least every two years.</p> <p>(j) Service providers shall maintain documentation of initial and refresher instructor training for at least three years.</p> <p>(1) Documentation shall include:</p> <p>(A) who participated in the training and the outcomes (pass/fail);</p> <p>(B) when and where attended; and</p> <p>(C) instructor's name.</p>	V 536		

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V 536	<p>Continued From page 6</p> <p>-Date of hire: 11/3/25. -Job Title: Behavioral Health Technician (BHT). -There was no documentation of training in alternatives to restrictive intervention (North Carolina Interventions Plus (NCI+) training).</p> <p>Review on 11/13/25 of Counselor #1's record revealed: -Date of hire: 6/25/25. -Job Title: BHT Clinical Intern. -There was no documentation of training in alternatives to restrictive intervention (North Carolina Interventions Plus (NCI+) training).</p> <p>Interview on 11/13/25 with Staff #1 revealed: -Had just been employed at the facility for 2 weeks. -Did not recall having NCI training.</p> <p>Interview on 11/13/25 with Counselor #1 revealed: -Had not had NCI training. -Was now licensed and could complete an attestation.</p> <p>Interview on 11/13/25 with the Program Director revealed: -Had already discussed adding NCI to onboard for new employees. -Was not aware that licensed clinical staff could complete an attestation in lieu of the NCI training. -NCI training scheduled for 12/11/25. -Had administrative turnover this past year and was tightening up all training requirements.</p>	V 536		