

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL018-110	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 01/20/2026
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NAME OF PROVIDER OR SUPPLIER INTEGRATED TREATMENT SERVICES	STREET ADDRESS, CITY, STATE, ZIP CODE 2329 SPRINGS ROAD NE HICKORY, NC 28601
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V 000	<p>INITIAL COMMENTS</p> <p>An annual and complaint survey was completed on January 20, 2026. The complaint was unsubstantiated (intake # NC00235040). A deficiency was cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .5100 Community Respite Services for Individuals of All Disability Groups.</p> <p>The facility is licensed for 6 and has a current census of 5. The survey sample consisted of audits of 4 current clients and 2 former clients.</p>	V 000		
V 367	<p>27G .0604 Incident Reporting Requirements</p> <p>10A NCAC 27G .0604 INCIDENT REPORTING REQUIREMENTS FOR CATEGORY A AND B PROVIDERS</p> <p>(a) Category A and B providers shall report all level II incidents, except deaths, that occur during the provision of billable services or while the consumer is on the providers premises or level III incidents and level II deaths involving the clients to whom the provider rendered any service within 90 days prior to the incident to the LME responsible for the catchment area where services are provided within 72 hours of becoming aware of the incident. The report shall be submitted on a form provided by the Secretary. The report may be submitted via mail, in person, facsimile or encrypted electronic means. The report shall include the following information:</p> <p>(1) reporting provider contact and identification information;</p> <p>(2) client identification information;</p> <p>(3) type of incident;</p> <p>(4) description of incident;</p>	V 367		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE _____ TITLE _____ (X6) DATE _____

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V 367	<p>Continued From page 1</p> <p>(5) status of the effort to determine the cause of the incident; and</p> <p>(6) other individuals or authorities notified or responding.</p> <p>(b) Category A and B providers shall explain any missing or incomplete information. The provider shall submit an updated report to all required report recipients by the end of the next business day whenever:</p> <p>(1) the provider has reason to believe that information provided in the report may be erroneous, misleading or otherwise unreliable; or</p> <p>(2) the provider obtains information required on the incident form that was previously unavailable.</p> <p>(c) Category A and B providers shall submit, upon request by the LME, other information obtained regarding the incident, including:</p> <p>(1) hospital records including confidential information;</p> <p>(2) reports by other authorities; and</p> <p>(3) the provider's response to the incident.</p> <p>(d) Category A and B providers shall send a copy of all level III incident reports to the Division of Mental Health, Developmental Disabilities and Substance Abuse Services within 72 hours of becoming aware of the incident. Category A providers shall send a copy of all level III incidents involving a client death to the Division of Health Service Regulation within 72 hours of becoming aware of the incident. In cases of client death within seven days of use of seclusion or restraint, the provider shall report the death immediately, as required by 10A NCAC 26C .0300 and 10A NCAC 27E .0104(e)(18).</p> <p>(e) Category A and B providers shall send a report quarterly to the LME responsible for the catchment area where services are provided. The report shall be submitted on a form provided</p>	V 367		

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V 367	<p>Continued From page 2</p> <p>by the Secretary via electronic means and shall include summary information as follows:</p> <ol style="list-style-type: none"> (1) medication errors that do not meet the definition of a level II or level III incident; (2) restrictive interventions that do not meet the definition of a level II or level III incident; (3) searches of a client or his living area; (4) seizures of client property or property in the possession of a client; (5) the total number of level II and level III incidents that occurred; and (6) a statement indicating that there have been no reportable incidents whenever no incidents have occurred during the quarter that meet any of the criteria as set forth in Paragraphs (a) and (d) of this Rule and Subparagraphs (1) through (4) of this Paragraph. <p>This Rule is not met as evidenced by: Based on record review and interview, the facility failed to report a level II incident to the Local Management Entity/Managed Care Organization (LME/MCO) within 72 hours of becoming aware of the incident. The findings are:</p> <p>Review on 1/20/26 of Client #3's record revealed: -Age: 13. -Date of admission: 12/12/25. -Diagnoses: Oppositional Defiant Disorder (ODD), Conduct Disorder and Attention Deficit Hyperactivity Disorder (ADHD). -No documentation of level II incident reported to the LME/MCO within 72 hours of the facility</p>	V 367		

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V 367	<p>Continued From page 3</p> <p>becoming aware of an incident on 12/17/25 of police contact due to client behavior.</p> <p>Review on 1/20/26 of Client #5's record revealed: -Age: 12. -Date of admission: 11/7/25. -Diagnoses: ADHD, Post Traumatic Stress Disorder, and ODD. -No documentation of level II incident reported to the LME/MCO within 72 hours of the facility becoming aware of an incident on 11/24/25 of police contact due to client behavior.</p> <p>Review on 1/20/26 of Former Client #6's record revealed: -Age: 15. -Date of admission: 11/26/25. -Date of discharge: 12/12/25. -Diagnoses: ADHD, and Adjustment Disorder. -No documentation of level II incident reported to the LME/MCO within 72 hours of the facility becoming aware of an incident on 12/12/25 of police contact due to client behavior.</p> <p>Review on 1/20/26 of Former Client #7's record revealed: -Age: 14. -Date of admission: 11/7/25. -Date of discharge: 12/16/25. -Diagnoses: ADHD, combined type; and ODD. -No documentation of level II incident reported to the LME/MCO within 72 hours of the facility becoming aware of an incident on 12/16/25 of police contact due to client behavior.</p> <p>Interview on 1/20/26 with the Qualified Professional (QP) revealed: -Responsible for submitting level II incidents into IRIS. -Was aware he needed to complete a level II</p>	V 367		

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V 367	Continued From page 4 incident report in IRIS for the 4 incidents of police contact due to client behavior between 11/24/25-12/17/25, "know to do it." -Completed level II IRIS reports but they were never submitted in the IRIS system. -"Didn't do the supervisor actions (section in IRIS)...just missed that." -"Will all be in there (level II IRIS reports submitted correctly) by this afternoon."	V 367		