

Division of Health Service Regulation

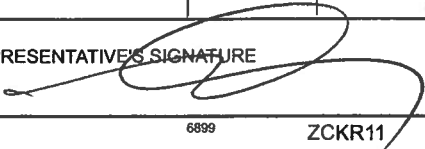
STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL047-158</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>01/15/2026</b>
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NAME OF PROVIDER OR SUPPLIER  <b>CANYON HILLS TREATMENT FACILITY</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>1443 NORTH SHANNON ROAD SHANNON, NC 28386</b>
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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
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V 000	<p><b>INITIAL COMMENTS</b></p> <p>An annual and complaint survey was completed on January 15, 2026. The complaints were unsubstantiated (intakes #: NC00235105, NC00235335). A deficiency was cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G. 1900. Psychiatric Residential Treatment for Children and Adolescents.</p> <p>This facility is licensed for 24 and has a current census of 24. The survey sample consisted of audits of 3 current clients.</p>	V 000		
V 107	<p><b>27G .0202 (A-E) Personnel Requirements</b></p> <p>10A NCAC 27G .0202 PERSONNEL REQUIREMENTS</p> <p>(a) All facilities shall have a written job description for the director and each staff position which:</p> <ul style="list-style-type: none"> <li>(1) specifies the minimum level of education, competency, work experience and other qualifications for the position;</li> <li>(2) specifies the duties and responsibilities of the position;</li> <li>(3) is signed by the staff member and the supervisor; and</li> <li>(4) is retained in the staff member's file.</li> </ul> <p>(b) All facilities shall ensure that the director, each staff member or any other person who provides care or services to clients on behalf of the facility:</p> <ul style="list-style-type: none"> <li>(1) is at least 18 years of age;</li> <li>(2) is able to read, write, understand and follow directions;</li> <li>(3) meets the minimum level of education, competency, work experience, skills and other qualifications for the position; and</li> </ul>	V 107	<p style="text-align: center;"><b>RECEIVED</b> <b>FEB 10 2026</b> DHSR-MH Licensure Sect</p>	

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



TITLE  
**CEO**

(X6) DATE  
**1/30/26**

Division of Health Service Regulation

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V 107	<p>Continued From page 1</p> <p>(4) has no substantiated findings of abuse or neglect listed on the North Carolina Health Care Personnel Registry.</p> <p>(c) All facilities or services shall require that all applicants for employment disclose any criminal conviction. The impact of this information on a decision regarding employment shall be based upon the offense in relationship to the job for which the applicant is applying.</p> <p>(d) Staff of a facility or a service shall be currently licensed, registered or certified in accordance with applicable state laws for the services provided.</p> <p>(e) A file shall be maintained for each individual employed indicating the training, experience and other qualifications for the position, including verification of licensure, registration or certification.</p> <p>This Rule is not met as evidenced by: Based on records reviews and interview the facility failed to ensure 1 of 4 audited staff (Staff #5) met the minimum level of education requirements. The findings are:</p> <p>Review on 1/15/26 of Staff #5's personnel record revealed: -Hired date of 10/31/25. -She was hired as a Residential Advisor. -There was no educational credentials in the personnel record.</p>	V 107	<p>To ensure all employees meet the minimum educational requirements for their positions and that such documentation is consistently verified and maintained in staff records.</p> <p>A full audit of current employees' files to verify the presence and validity of education documents. HR Staff will be contacted to obtain proof of meeting the minimum educational requirements.</p> <p>The hiring checklist will be reinforced that will be verified prior to an offer, HR personnel will sign off on receipt of items.</p> <p>The policy for personnel files will be updated to include procedures for handling missing or unverifiable documents by the Corporate Compliance Officer.</p> <p>A training session for HR and Supervisors on updated policies and regulatory requirements related to employment files.</p> <p>A quarterly audit will be conducted to ensure continued compliance.</p>	3-30-26
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V 107	<p>Continued From page 2</p> <p>Interview on 1/15/26 with Staff #5 revealed: -She had been working at the facility for a few months. -She believed she had presented her proof of education to the facility already. -She was not aware that her proof of educations was not in her personnel record. -She would bring a copy of her education to the facility.</p> <p>Interview on 1/15/26 with the Corporate Compliance Staff revealed: -She was not aware that Staff #5's proof of education was not in her personnel file. -She would ask Staff #5 to bring a copy of her education. -She acknowledged the facility had failed to ensure that Staff #5 met the minimum level of education requirements by not having proof of education in her file.</p>	V 107		