STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	MHL078-229	A. BUILDING: _____ B. WING _____	R 02/10/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
FIRST IMAGE INC GRACE COURT	3750 MEADOWVIEW RD BLDG F1 LUMBERTON, NC 28358

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V 000	INITIAL COMMENTS An annual and follow up survey was completed on February 10, 2026. A deficiency was cited. This facility is licensed for the following service category: 10A NCAC 27G .4100 Residential Recovery Programs for Individuals with Substance Abuse Disorders and their Children. This facility is licensed for 8 and has a current census of 7. The survey sample consisted of audits of 3 current clients.	V 000		
V 114	27G .0207 Emergency Plans and Supplies 10A NCAC 27G .0207 EMERGENCY PLANS AND SUPPLIES (a) Each facility shall develop a written fire plan and a disaster plan and shall make a copy of these plans available to the county emergency services agencies upon request. The plans shall include evacuation procedures and routes. (b) The plans shall be made available to all staff and evacuation procedures and routes shall be posted in the facility. (c) Fire and disaster drills in a 24-hour facility shall be held at least quarterly and shall be repeated for each shift. Drills shall be conducted under conditions that simulate the facility's response to fire emergencies. (d) Each facility shall have a first aid kit accessible for use. This Rule is not met as evidenced by: Based on record review and interviews the facility failed to have fire and disaster drills held at least quarterly and repeated on each shift. The findings	V 114		

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V 114	Continued From page 1 are: Review on 2/10/26 of the facility's fire and disaster drills from 1/1/2025-12/31/2025 revealed: First Quarter 2025 (January-March) -No disaster drills documented on the second or third shift. -No fire drill documented on third shift. Second Quarter 2025 (April-June) -No disaster drill documented on second shift. -No fire drill documented on third shift. Third Quarter 2025 (July-September) -No disaster drills documented on first or second shift. -No fire drill documented on third shift. Fourth Quarter 2025 (October-December) -No disaster drills documented on first or third shift. -No fire drill documented on third shift. Interview on 2/10/26 client #1 stated: -"We do drills (fire and disaster) once a month." -Clients went "towards the road" for fire drills. -Clients "met at the van" for disaster drills. Interview on 2/10/26 client #2 stated: -Fire and disaster drills were completed twice a month. -Clients went outside to the fence for fire drills. -"We get in the bathtub for disaster drills." Interview on 2/10/26 client #3 stated: -"We do drills (fire and disaster) once or twice a month." -Clients met at the front gate for fire drills. -"We sometimes go into the building with the medication room with a bag of personal belongings for disaster drills." Interview on 2/10/26 staff #1 stated:	V 114		

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V 114	Continued From page 2 -Fire and disaster drills were completed once a month. -Clients went to the fence for fire drills -Client went into the bathroom or hallway for disaster drills. Interview on 2/10/26 staff #11 stated: -Fire and disaster drills were completed twice a month. -Clients met in the parking lot for fire drills. -She was "not sure" were clients met for disaster drills. Interview on 2/10/26 the Program Director stated: -The shifts were 7 am-4 pm, 4 pm-11 pm and 11 pm-7 am; 7 days a week. -Clients went to the fence at the front of the building for fire drills. -Clients went into the bathroom for disaster drills. -"The previous manager was responsible for drills last year." -She would ensure fire and disaster drills were held at least quarterly and repeated on each shift.	V 114		
V 263	27G .4103 (a-b) Res. Recovery Clients/Children - Operations 10A NCAC 27G .4103 OPERATIONS (a) Admissions: (1) Admission to the facility shall be a joint decision of the designated qualified professional, the provider of residential care, and the individual. (2) The individual shall have the opportunity for at least one pre-admission visit to the facility except for an emergency admission. (b) Coordination Of Treatment And Education To Children In The Facility: Each facility or multi-unit facility shall provide or make arrangements for the following:	V 263		

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V 263	Continued From page 3 (1) The appropriate education program for a child shall be coordinated with his/her service plan. (2) Each child shall receive preventive and primary health care services. (3) Each child shall have required immunizations as specified by G.S. 130A-152. (4) Each child, birth through four years of age, shall receive a behavioral health and developmental screening, and if appropriate, receive a multi-disciplinary evaluation by qualified professionals for early childhood intervention services. Parents shall be provided information on services that the child is eligible for or entitled to receive at screening and evaluation. (5) Each child five years of age and over, shall receive a behavioral health and developmental screening, and if appropriate, be evaluated for child mental health and substance abuse disorder(s) by a qualified professional(s). (6) Each child three years of age and over, shall receive substance abuse prevention services to address at- risk factors associated with being a child in a high-risk family. This Rule is not met as evidenced by: Based on record reviews and interviews, the facility failed to ensure each five years of age and over received a behavioral health and developmental screening affecting two of three audited clients (#1, #2) and failed to ensure each child three years of age and older received substance abuse prevention services to address at- risk factors associated with being a child in a high-risk family affecting three of three clients	V 263		

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V 263	Continued From page 4 (#1, #2, #3). The findings are: Review on 2/10/26 of client #1's record revealed: -Admission date of 8/5/25. -Diagnoses of Cocaine Use Disorder-Severe and Opioid Use Disorder-Severe. -Client #1's child, age 5. -No documentation client #1's child received a behavioral health and developmental screening or substance abuse prevention services to address at risk factor associated with being a child in a high-risk family. Review on 2/10/26 of client #2's record revealed: -Admission date of 11/3/25. -Diagnoses of Cocaine Use Disorder-Severe. -One child, age 5. -No documentation client #2's child received a behavioral health and developmental screening or substance abuse prevention services to address at risk factor associated with being a child in a high-risk family. Review on 2/10/26 of client #3's record revealed: -Admission date of 3/26/25. -Diagnoses of Cocaine Use Disorder-Severe and Opioid Use Disorder-Severe. -One child, age 12. -No documentation client #3's child received a substance abuse prevention services to address at risk factor associated with being a child in a high-risk family. Interview on 2/10/26 client #1 stated: -She did not remember if her child received a behavior health screening, development screening or substance abuse prevention services at the facility. Interview on 2/10/26 client #2 stated:	V 263		

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V 263	Continued From page 5 -She did not remember if her child received a behavior health screening, development screening or substance abuse prevention services at the facility. Interview on 2/10/26 client #3 stated: -"An evaluation was done on my child when I was admitted. I don't know what it was exactly about." -"I am not sure about substance abuse prevention services for my child." Interview on 2/10/26 the Clinical Counselor: -She completed client #3's child behavioral health and developmental assessment. -A previous staff "should have completed [client #1] and [client #2]'s children's assessments." Interview on 2/10/26 the Program Director stated: -"I am not sure why it was not done. It must have been an oversight." -They were in the process of hiring a staff to complete the behavioral and developmental assessments. -"I will refer the children out to another agency to ensure the assessments and substance abuse prevention services are completed for all children until I hire someone." This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.	V 263		