



CHAPTER 122C
ARTICLE 2 - LICENSURE OF FACILITIES FOR INDIVIDUALS WITH MENTAL HEALTH DISORDERS, DEVELOPMENTAL DISABILITIES, AND SUBSTANCE USE DISORDERS

N.C.G.S. § 122C-32.

Patient visitation rights for residents of residential treatment facilities.

SOURCE General Statutes of North Carolina, as published by the General Assembly	LAST AMENDMENT IN THIS TEXT No amendment history on record	RETRIEVED 21 September 2026, 02:52 UTC	SOURCE FINGERPRINT ed2c9a08692fa7fb14df4774 - 37f459841009a1910a5c5193 - 0fbf72a0b239811f
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- § 122C-32(a)

Any facility licensed under this Chapter shall allow clients to receive visitors of their choice to the fullest extent permitted under the infection and prevention control program of the facility and applicable guidelines or orders issued by the Centers for Disease Control and Prevention, the Department, local health departments, or any other government public health agency.
- § 122C-32(b)

In the event the Department finds a facility has violated any rule, regulation, guidance, directive, or law relating to a client's visitation rights, the Department may issue a warning to the facility about the violation and give the facility not more than 24 hours to allow visitation. If visitation is not allowed after the 24-hour warning period, the Department shall impose a civil penalty in an amount not less than five hundred dollars (\$500.00) for each instance on each day the facility was found to have a violation. This civil penalty shall be in addition to any licensure action, fine, or civil penalty that the Department may impose pursuant to this Chapter.
- § 122C-32(c)

Notwithstanding the provisions of subsection (b) of this section, in the event that circumstances require the complete closure of a facility to visitors, the facility shall use its best efforts to develop alternate visitation protocols that would allow visitation to the greatest extent safely possible. If those alternate protocols are found by the Department, the local health departments, or any other government public health agency to violate any rule, regulation, guidance, or federal law relating to a client's visitation rights, the Department may impose a civil penalty in an amount not less than

five hundred dollars (\$500.00) for each instance on each day the facility was found to have a violation. This civil penalty shall be in addition to any fine or civil penalty that the Centers for Medicare and Medicaid Services or other federal agency may choose to impose and any licensure action, fine, or civil penalty that the Department may impose pursuant to this Chapter.

§ 122C-32(d)

Each facility shall provide notice of the client visitation rights in this act to clients and, when possible, family members of clients. The required notice shall also include the contact information for the agency or individuals tasked with investigating violations of facility client visitation.

§ 122C-32(e)

Subject to, and to the fullest extent permitted by, any rules, regulations, or guidelines adopted by either the Centers for Medicare and Medicaid Services or the Centers for Disease Control and Prevention or any federal law, each facility shall allow compassionate care visits. The facility may require compassionate care visitors to submit to health screenings necessary to prevent the spread of infectious diseases, and, notwithstanding anything to the contrary in this section, the facility may restrict a compassionate care visitor who does not pass a health screening requirement or who has tested positive for an infectious disease. The facility may require compassionate care visitors to adhere to infection control procedures, including wearing personal protective equipment. Compassionate care situations that require visits include, but are not limited to, the following:

- (1) End-of-life situations.
- (2) A resident who was living with his or her family before recently being admitted to the facility is struggling with the change in environment and lack of physical family support.
- (3) A resident who is grieving after a friend or family member recently passed away.
- (4) A resident who needs cueing and encouragement with eating or drinking, previously provided by family or caregivers, is experiencing weight loss or dehydration.
- (5) A resident, who used to talk and interact with others, is experiencing emotional distress, seldom speaking, or crying more frequently when the resident had rarely cried in the past. (2021-171, s. 6; 2021-181, s. 2(f).)

APPARATUS III

Citation

FULL SECTION

N.C. Gen. Stat. § 122C-32 (2026).

PINPOINT

N.C. Gen. Stat. § 122C-32(a) (2026).

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