STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	MHL041658	A. BUILDING: _____ B. WING _____	R 07/08/2021

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
WYNMERE PLACE	203 HAMMOND DRIVE GREENSBORO, NC 27406

(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	INITIAL COMMENTS An Annual and Follow-Up Survey was completed on July 8, 2021. A deficiency was cited. This facility is licensed for the following service category: - 10A NCAC 27G .1700: Residential Treatment Staff Secure for Children or Adolescents	V 000	A refresher Medication Administration training via Zoom has been conducted. The Assistant Director should do pop up visits to assure Rules are followed. The Assistant Director should do pop up visits on a weekly basis. The assistant director should talk and work with staff about Protocol on a regular basis.	7 DS 8/15/21
V 120	27G .0209 (E) Medication Requirements 10A NCAC 27G .0209 MEDICATION REQUIREMENTS (e) Medication Storage: (1) All medication shall be stored: (A) in a securely locked cabinet in a clean, well-lighted, ventilated room between 59 degrees and 86 degrees Fahrenheit; (B) in a refrigerator, if required, between 36 degrees and 46 degrees Fahrenheit. If the refrigerator is used for food items, medications shall be kept in a separate, locked compartment or container; (C) separately for each client; (D) separately for external and internal use; (E) in a secure manner if approved by a physician for a client to self-medicate. (2) Each facility that maintains stocks of controlled substances shall be currently registered under the North Carolina Controlled Substances Act, G.S. 90, Article 5, including any subsequent amendments. This Rule is not met as evidenced by: Based on observation, interview and record	V 120		

DHSR - Mental Health
AUG 11 2021
Lic. & Cert. Section

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V 120	Continued From page 1 review, the facility failed to store all client medication in a securely locked cabinet, for 4 (client #1, client #2, client #3 and client #4) of 4 clients. The findings are: Review on 7-7-21 of client #1 ' s facility record revealed: - admitted 6-3-21 - 13 years old - diagnosed with: - Conduct Disorder - prescribed by his physician on 6-9-21: - fluoxetine Hydrochloride (HCL) 20 milligrams (mg) one daily in the morning - guanfacine HCL 2 mg one in the morning and ½ at night - atomoxetine HCL 25 mg one daily in the morning Review on 7-7-21 of client #2 ' s facility record revealed: - admitted 8-12-20 - 14 years old - diagnosed with: - Bipolar Disorder - Post Traumatic Stress Disorder - Attention-Deficit Hyperactivity Disorder - Oppositional Defiant Disorder - prescribed by his physician on 5-18-21: - melatonin 3 mg two at bedtime -atomoxetine HCL 80 mg one at bedtime - guanfacine ER (extended release) 3 mg one at bedtime - aripiprazole 15 mg one at bedtime Review on 7-7-21 of client #3 ' s facility record revealed: - admitted 3-22-21 - 14 years old	V 120		

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V 120	Continued From page 2 - diagnosed with: - Disruptive Mood Dysregulation Disorder - Major Depressive Disorder - Trauma and Stressor Related Disorder - Attention-Deficit Hyperactivity Disorder, Combined Type - prescribed by his physician of 5-18-21: - oxcarbazepine 300 mg one, twice daily - atomoxetine HCL 25 mg once daily in the morning - amantadine HCL 100 mg one, twice daily - hydroxyzine 25 mg one, twice daily - sertraline HCL 100 mg two daily in the morning - prazosin HCL 1 mg one at bedtime Observation on 7-6-21 at approximately 3:55 pm revealed: - 4 containers on the kitchen counter - each container was clear plastic with opaque lids - the 4 containers were lined up in a corner, against the backsplash - the containers were not lockable - medication bottles were visible in each plastic container - each container separately held each client ' s medications Interview on 7-6-21 with client #1 revealed: - the plastic containers contained their medications - "Med (medication) boxes are usually in the office, except after lunch they just put the boxes out on the counter" - "They go back in the office after supper and chores (are completed)." - "They don ' t stay out all night"	V 120		

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V 120	Continued From page 3 Interview on 7-7-21 with client #2 revealed: - medication boxes were routinely brought out and placed on the kitchen counter - they are brought out before lunch - the boxes are returned to the office, "put back at night" - "None of the kids have messed with them, Mr. [Director/Qualified Professional (D/QP] tries to be proactive" Interview on 7-6-21 with client #3 revealed: - the plastic containers on the kitchen counter did contain their medications - when they are not locked in the office, they are kept on the counter - " ...sometimes they put them up, and sometimes they leave them on the counter" Interview on 7-7-21 with staff #1 revealed: - medications are always stored in the office and "locked up" - the only time they are not locked away, is when they are being administered - it is not okay to leave the medication boxes out of the office between times to administer them to the clients - she was surprised to find out they were left out on the kitchen counter the day before (7-6-21) - "they should have been put up" Interview on 7-8-21 with staff #2 revealed: - all prescribed medications were supposed to be locked in the office - some clients need medications before they eat breakfast - those client ' s medication boxes are brought out of the office before breakfast - the boxes are not supposed to be left out all day - if a client only gets medication at night	V 120		

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V 120	Continued From page 4 (client #2), his box should stay in the office - bringing client #2 ' s medication box out of the office on 7-6-21, "was an oversight" Interview on 7-8-21 with the D/QP revealed: - the medication boxes had been left out on the kitchen counter by him - the boxes were out because he had just finished placing new medications in each client ' s med box - it was not routine to leave the client ' s medication boxes out on the kitchen counter - "I just forgot to put them back when you came (entered the facility for the survey)" Further interview failed to reveal why each client interviewed reported the boxes were routinely left out on the kitchen counter during the day.	V 120		

STATE FORM: REVISIT REPORT

PROVIDER / SUPPLIER / CLIA / IDENTIFICATION NUMBER	MULTIPLE CONSTRUCTION	DATE OF REVISIT
MHL041658 (Y1)	A. Building B. Wing (Y2)	7/8/2021 (Y3)

NAME OF FACILITY	STREET ADDRESS, CITY, STATE, ZIP CODE
WYNMERE PLACE	203 HAMMOND DRIVE GREENSBORO, NC 27406

This report is completed by a State surveyor to show those deficiencies previously reported that have been corrected and the date such corrective action was accomplished. Each deficiency should be fully identified using either the regulation or LSC provision number and the identification prefix code previously shown on the State Survey Report (prefix codes shown to the left of each requirement on the survey report form).

ITEM Y4	DATE Y5	ITEM Y4	DATE Y5	ITEM Y4	DATE Y5
ID Prefix V0293 Reg. # 27G .1701 LSC	Correction Completed 07/08/2021	ID Prefix Reg. # LSC	Correction Completed	ID Prefix Reg. # LSC	Correction Completed
ID Prefix Reg. # LSC	Correction Completed	ID Prefix Reg. # LSC	Correction Completed	ID Prefix Reg. # LSC	Correction Completed
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REVIEWED BY STATE AGENCY ☐	REVIEWED BY (INITIALS)	DATE	SIGNATURE OF SURVEYOR	DATE 7-8-21
REVIEWED BY CMS RO ☐	REVIEWED BY (INITIALS)	DATE	TITLE	DATE

FOLLOWUP TO SURVEY COMPLETED ON	
4/7/2020	☐ CHECK FOR ANY UNCORRECTED DEFICIENCIES. WAS A SUMMARY OF UNCORRECTED DEFICIENCIES (CMS-2567) SENT TO THE FACILITY? ☐ YES ☐ NO