

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL041-850</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>05/29/2026</b>
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NAME OF PROVIDER OR SUPPLIER  <b>LYDIA'S HOME LLC PHASE I</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>2704 GRIMSLEY STREET GREENSBORO, NC 27403</b>
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V 000	<p><b>INITIAL COMMENTS</b></p> <p>An annual survey was completed on 5/29/26. Deficiencies were cited.</p> <p>This facility is licensed for the following service category: 10A NCAC 27G .1700 Residential Treatment Staff Secure for Children or Adolescents.</p> <p>The facility is licensed for 4 and currently has a census of 4. The survey sample consisted of audits of 3 current clients.</p>	V 000		
V 118	<p><b>27G .0209 (C) Medication Requirements</b></p> <p>10A NCAC 27G .0209 MEDICATION REQUIREMENTS (c) Medication administration: (1) Prescription or non-prescription drugs shall only be administered to a client on the written order of a person authorized by law to prescribe drugs. (2) Medications shall be self-administered by clients only when authorized in writing by the client's physician. (3) Medications, including injections, shall be administered only by licensed persons, or by unlicensed persons trained by a registered nurse, pharmacist or other legally qualified person and privileged to prepare and administer medications. (4) A Medication Administration Record (MAR) of all drugs administered to each client must be kept current. Medications administered shall be recorded immediately after administration. The MAR is to include the following: (A) client's name; (B) name, strength, and quantity of the drug; (C) instructions for administering the drug; (D) date and time the drug is administered; and (E) name or initials of person administering the</p>	V 118		

Division of Health Service Regulation LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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V 118	<p>Continued From page 1</p> <p>drug.</p> <p>(5) Client requests for medication changes or checks shall be recorded and kept with the MAR file followed up by appointment or consultation with a physician.</p> <p>This Rule is not met as evidenced by: Based on record reviews and interview, the facility failed to ensure medications were administered to clients on the written order of a physician and failed to ensure that MARs were kept current affecting 2 of 3 clients (#1 and #2). The findings are:</p> <p>Review on 5/28/26 of Client #1's record revealed: -Admission date 3/6/26; -Age 16; -Diagnoses of Intermittent Explosive Disorder, Attention Deficit Hyperactive Disorder (ADHD), Combined Type, Reaction to Severe Stress, Unspecified; -Order dated 3/16/26 for Docusate Sodium 100 milligrams (mg) (stool softener), take 1 capsule by mouth (po) daily.</p> <p>Review on 5/28/26 of Client #1's MARs for the months of April 2026 - May 2026 revealed: -No documentation of Docusate Sodium.</p> <p>Review on 5/28/26 of Client #2's record revealed: -Admission date 8/14/25; -Age 13; -Diagnoses of Major Depressive Disorder, Generalized Anxiety Disorder, Oppositional</p>	V 118		

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V 118	<p>Continued From page 2</p> <p>Defiant Disorder; -Order dated 4/20/26 for Qelbree Extended Release 150 mg. (ADHD), Take 1 capsule po daily.</p> <p>Review on 5/28/26 of Client #2's MAR for May 2026 revealed: -No documentation that the medication had been administered from 5/22/26 - 5/28/26.</p> <p>Interview on 5/28/26 with the Qualified Professional (QP) revealed: -The pharmacy had made an error and hadn't included Docusate Sodium on Client #1's MAR for April 2026 - May 2026; -The pharmacy hadn't sent Client #1's Docusate Sodium to the facility; -Client #2 had been administered Qelbree but staff failed to document the MAR.</p>	V 118		
V 295	<p>27G .1703 Residential Tx. Child/Adol - Req. for A P</p> <p>10A NCAC 27G .1703 REQUIREMENTS FOR ASSOCIATE PROFESSIONALS (a) In addition to the qualified professional specified in Rule .1702 of this Section, each facility shall have at least one full-time direct care staff who meets or exceeds the requirements of an associate professional as set forth in 10A NCAC 27G .0104(1). (b) The governing body responsible for each facility shall develop and implement written policies that specify the responsibilities of its associate professional(s). At a minimum these policies shall address the following: (1) management of the day to day day-to-day operations of the facility; (2) supervision of paraprofessionals</p>	V 295		

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V 295	<p>Continued From page 3</p> <p>regarding responsibilities related to the implementation of each child or adolescent's treatment plan; and</p> <p>(3) participation in service planning meetings.</p> <p>This Rule is not met as evidenced by: Based on record review and interviews the facility failed to have at least one full-time direct care staff who meets or exceeds the requirements of an Associate Professional (AP). The findings are:</p> <p>Review on 5/28/26 of the staff list completed by the Qualified Professional (QP) revealed no AP documented.</p> <p>Interview on 5/28/26 with the QP revealed: -She previously served as the facility AP until the former QP quit approximately a year and a half ago; -At that time, she moved to the QP position and continued to complete AP job duties.</p> <p>Interview on 5/29/26 with the Owner revealed: -She was not aware that the same staff person couldn't serve as the QP and the AP; -"Nobody has said anything about that (working as both QP and AP)."</p>	V 295		
V 736	<p>27G .0303(c) Facility and Grounds Maintenance</p> <p>10A NCAC 27G .0303 LOCATION AND EXTERIOR REQUIREMENTS</p> <p>(c) Each facility and its grounds shall be maintained in a safe, clean, attractive and orderly</p>	V 736		

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V 736	<p>Continued From page 4</p> <p>manner and shall be kept free from offensive odor.</p> <p>This Rule is not met as evidenced by: Based on observation and interviews, the facility was not maintained in a safe, clean, attractive and orderly manner. The findings are:</p> <p>Observation on 5/28/26 at approximately 2:00pm revealed: -Smoke alarm in the back client bedroom chirping; -Toilet seat loose in the hall bathroom; -One light bulb over the sink burned out; -One light bulb missing, 1 light bulb burned out, and part of 1 globe not seated securely in the dining room light fixture; -Eight drawer dresser in a client bedroom off track and missing 3 pulls with 2 of the missing pulls replaced with a shoelace as a temporary handle.</p> <p>Interview on 5/28/26 with Client #1 revealed: -The smoke alarm had been chirping since she was admitted to the facility in 3/2026; -The toilet seat was loose and needed to be repaired.</p> <p>Interview on 5/28/26 with Staff #1 revealed: -She was aware that there was a smoke alarm chirping in the facility; -Not aware of how long the smoke alarm had been chirping because she had gotten so used to hearing it.</p> <p>Interview on 5/29/26 with the Owner revealed: -"Those are new dressers;" -She wasn't aware that a shoelace was being used as a temporary handle in the dresser; -"She (client) must have done that (added</p>	V 736		

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