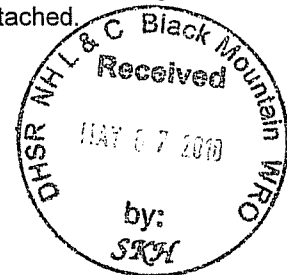


DEPARTMENT OF HEALTH AND HUMAN SERVICES  
CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 05/04/2018  
FORM APPROVED  
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>34G233</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____  B. WING _____		(X3) DATE SURVEY COMPLETED  <b>05/03/2018</b>
NAME OF PROVIDER OR SUPPLIER  <b>WEBSTER GROUP HOME</b>			STREET ADDRESS, CITY, STATE, ZIP CODE <b>103 LITTLE SAVANNAH RD WEBSTER, NC 28788</b>		
(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) COMPLETION DATE	
W 242	<p><b>INDIVIDUAL PROGRAM PLAN</b> CFR(s): 483.440(c)(6)(iii)</p> <p>The individual program plan must include, for those clients who lack them, training in personal skills essential for privacy and independence (including, but not limited to, toilet training, personal hygiene, dental hygiene, self-feeding, bathing, dressing, grooming, and communication of basic needs), until it has been demonstrated that the client is developmentally incapable of acquiring them.</p> <p>This STANDARD is not met as evidenced by: Based on observation, staff interviews and review of records, the facility failed to ensure the individual habilitation plan (IHP) included objective training to address privacy and hygiene needs for 1 of 3 sampled clients (#4).</p> <p>Observations in the group home on 5/2/18 5:13 PM revealed client #4 entering a bathroom and urinating with the door open. Client #4 was then observed leaving the bathroom without washing his hands. Further observations at 5:30 PM revealed client #4 coming out of a bathroom with the door already open, pulling his pants up and fastening his belt. Continued observations at 5:45 PM revealed client #4 washing his hands in the kitchen after prompting from staff. Further observations on 5/3/18 at 7:35 AM revealed client #4 closing a bathroom door after entering following a prompt from staff.</p> <p>Review of the record for client #4 on 5/3/18 revealed an IHP dated 2/1/18. The IHP contained a comprehensive functional assessment dated 1/20/18 which indicated the client needs prompting to wash hands thoroughly and</p>	W 242	<p>The QIDP will develop a training program for Client #4 to ensure thoroughness with all steps involved in the toileting process, including shutting the door and washing hands after using toilet. Evidence of programmatic training will be found on data sheets in the program book and within the QIDP note. Please see the attached training program.</p> <p>The QIDP and Group Home Manager will monitor for implementation of the training program at least three times each week for a period of 3 months. Evidence of monitoring will be found on the attached tracking sheet.</p> <p>All staff will be retrained on the MCH policy regarding the right to privacy and how to assist the persons served in ensuring they have privacy. Staff training will also include the importance and need for ongoing informal training with residents to ensure previously mastered ADL skills are maintained. Evidence of staff training will be found on a MCH In-Service training form. Please see attached.</p>	5/18/18	



LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

*Chris S*

TITLE

**Executive Director**

(X6) DATE

**5.4.2018**

Any deficiency statement ending with an asterisk (\*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

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W 242	Continued From page 1 occasional reminders to wash hands. Continued review of the IHP did not reveal any current programs or guidelines related to privacy or washing hands.  Interview with the facility administrator and the qualified intellectual disabilities professional on 5/3/18 revealed client #4 has a history of not closing the door while using the bathroom and had programs for privacy and hand washing in the past. Further interview confirmed client #4 does not currently have programing objectives for privacy or for washing hands after using the bathroom.	W 242			

Client #4  
Record Number:

Implemented: 5/11/2018  
Revised:  
Discontinued:

**IL (18) # 2: Increase independence in completing all steps of toileting**

**Objective:** By 5/1/019, Client #4 will complete all steps in toileting with no more than 1 prompt on 90% of trials for two consecutive months.

**Responsible Person:** Erin Mooney, QIDP  
**Trainers:** Group home staff  
**Location:** Bathroom  
**Schedule:** Collect data once daily in the afternoon

**Rationale:** Client #4 continues to need prompting in several steps of the toileting process. He can be forgetful of closing the door for his privacy as well as washing his hands. This program will focus on Client #4 completing all steps in the toileting process as independently as possible.

**Procedure:**

1. Anytime Client #4 goes into the bathroom, staff should monitor to ensure Client #4 is completing all steps in the toileting process including:  
Closing the bathroom door behind him;  
Turning on the bathroom light  
Wiping thoroughly;  
And washing his hands after he has finished toileting.
2. Staff should count all prompts Client #4 needs in order to complete these steps.

**Data:** Record all prompts needed for Client #4 to complete all steps in the toileting process, staff initials, and any comments. Data should be collected once per day in the afternoon.

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Erin Mooney, QIDP

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Date



