

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL041-552	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 09/12/2018
NAME OF PROVIDER OR SUPPLIER FROSTBROOK COURT		STREET ADDRESS, CITY, STATE, ZIP CODE 3865 1-A SMOKEY QUARTZ COURT GREENSBORO, NC 27409		
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V 000	INITIAL COMMENTS An annual survey was completed 9/12/2018. Deficiencies were cited. This facility is licensed for the following service category: 10A NCAC 27G .5600C Supervised Living for Adults with Developmental Disabilities.	V 000		
V 112	27G .0205 (C-D) Assessment/Treatment/Habilitation Plan 10A NCAC 27G .0205 ASSESSMENT AND TREATMENT/HABILITATION OR SERVICE PLAN (c) The plan shall be developed based on the assessment, and in partnership with the client or legally responsible person or both, within 30 days of admission for clients who are expected to receive services beyond 30 days. (d) The plan shall include: (1) client outcome(s) that are anticipated to be achieved by provision of the service and a projected date of achievement; (2) strategies; (3) staff responsible; (4) a schedule for review of the plan at least annually in consultation with the client or legally responsible person or both; (5) basis for evaluation or assessment of outcome achievement; and (6) written consent or agreement by the client or responsible party, or a written statement by the provider stating why such consent could not be obtained.	V 112		

Division of Health Service Regulation

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

TITLE

(X6) DATE

Division of Health Service Regulation

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V 112	<p>Continued From page 1</p> <p>This Rule is not met as evidenced by: Based on observations, records review and interviews, the facility staff failed to implement strategies in the treatment/habilitation plans to address 1 of 3 client 's needs (#2). The findings are:</p> <p>Review on 9/7/2018 of client #2's record revealed:</p> <ul style="list-style-type: none"> - Admission date of 9/23/1999 - Diagnoses: - Profound Intellectual Disorder - Autism - Bipolar - Anxiety Disorder Not Otherwise Specified (NOS) - Pica - Further review of assessment dated 9/23/1999 noted: - "Birth and developmental history: [Client #2] was born with fetal anoxia due to pre-maturity." - "no family history is available." - "[Client #2] has been in some type of institutionalized care since childhood." - "[Client #2] is very limited in her speech." - "...will respond to simple requests with one syllable words." - Review of Psychiatric Evaluation Report dated 10/18/2000 noted: - "[Client #2] earned a nonverbal IQ (Intelligence Quotient) of 42 on the SB-5, which is the lowest range the scale measures." - Review of Individual Support Plan (ISP) with an implementation date of 3/1/2018 revealed the following goals: - "...will remain safe by staying within staff eyesight at home and in the community 100% of the time ..." - "...will remain safe by receiving assistance from staff with PICA and food seeking behaviors 100 	V 112		

Division of Health Service Regulation

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V 112	<p>Continued From page 2</p> <p>% of the time ..."</p> <p>- "...will improve safety and life skills by eating foods and drinks on her diet and refrain from eating inedible items..."</p> <p>- "...will stay within staff eye sight to maintain safety while at day program and in the community ..."</p> <p>- The ISP also contained goals for: communication, activities of daily living, socialization goals, chore goals, cognitive stimulation, and focus.</p> <p>- Review of Individual Behavior Support Plan updated 10/17/2018 noted:</p> <p>- "Due to her (client #2) entering the kitchen area without supervision (she waits for the opportunity), a gate has been installed at the kitchen entrance. She cannot open the gate. When staff can provide 1:1 arms-reach supervision the gate will be open and staff will be with her in the kitchen. Foods that she can eat will be out and in her reach for her to access. This is for her medical safety. She had aspiration pneumonia 2x in 2015-2016 and drank non-thickened liquids several times in 2016-2017."</p> <p>Observation on 9/6/2018, at approximately 4:27pm, revealed:</p> <p>- Baby gate locked and blocking the only entrance to the kitchen.</p> <p>- No food items were on the bar area or counter tops.</p> <p>Interview on 9/6/2018 of staff #2 revealed:</p> <p>"(Baby gate is blocking kitchen) because [client #2] will go in the refrigerator and drink and there is only one staff. She's allergic to strawberries and chocolate and that is in the refrigerator and cabinet."</p> <p>"If it is in reach she (client #2) is going to get it."</p>	V 112		

Division of Health Service Regulation

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V 112	Continued From page 3 "It (baby gate) was here when I got here (started employment)." "When I got trained I was told she (client #2) is allergic to strawberries and chocolate and if one person is on shift giving [client #3] a shower [client #2] can get hold of the chocolate in the cabinets and strawberries in the refrigerator." Interview on 9/12/2018 of the Qualified Professional (QP) revealed: "(When baby gate is up) I thought they were offering foods and drinks." "I can let the staff know to put out puddings and stuff that is soft." Interview on 9/10/2018 of the Nurse revealed: - "She [client #2] can't have liquids unless they are thickened and her food has to be pureed or minced." - "She [client #2] should have access to some applesauce or pudding." Interview on 9/12/2018 of the House Manager revealed: "(Baby gate is blocking the kitchen) to stop [client #2] from going in the kitchen because she will eat and drink anything she can put in her mouth." "To be honest not that I am aware of" to treatment plan/goals to address baby gate.	V 112		
V 290	27G .5602 Supervised Living - Staff 10A NCAC 27G .5602 STAFF (a) Staff-client ratios above the minimum numbers specified in Paragraphs (b), (c) and (d) of this Rule shall be determined by the facility to enable staff to respond to individualized client needs. (b) A minimum of one staff member shall be	V 290		

Division of Health Service Regulation

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V 290	<p>Continued From page 4</p> <p>present at all times when any adult client is on the premises, except when the client's treatment or habilitation plan documents that the client is capable of remaining in the home or community without supervision. The plan shall be reviewed as needed but not less than annually to ensure the client continues to be capable of remaining in the home or community without supervision for specified periods of time.</p> <p>(c) Staff shall be present in a facility in the following client-staff ratios when more than one child or adolescent client is present:</p> <p>(1) children or adolescents with substance abuse disorders shall be served with a minimum of one staff present for every five or fewer minor clients present. However, only one staff need be present during sleeping hours if specified by the emergency back-up procedures determined by the governing body; or</p> <p>(2) children or adolescents with developmental disabilities shall be served with one staff present for every one to three clients present and two staff present for every four or more clients present. However, only one staff need be present during sleeping hours if specified by the emergency back-up procedures determined by the governing body.</p> <p>(d) In facilities which serve clients whose primary diagnosis is substance abuse dependency:</p> <p>(1) at least one staff member who is on duty shall be trained in alcohol and other drug withdrawal symptoms and symptoms of secondary complications to alcohol and other drug addiction; and</p> <p>(2) the services of a certified substance abuse counselor shall be available on an as-needed basis for each client.</p>	V 290		

Division of Health Service Regulation

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V 290	<p>Continued From page 5</p> <p>This Rule is not met as evidenced by: Based on record reviews, and interviews, the facility failed to determine staff-client ratios above the minimum numbers to enable staff to respond to individualized client needs, affecting 1 of 3 client's needs (#1). The findings are:</p> <p>Review on 9/7/2018 of client #1's record revealed:</p> <ul style="list-style-type: none"> - Admission date of 10/20/1999 - Diagnoses: - Profound Intellectual Disorder - Impulse Control Disorder - Dementia - Further review of assessment dated 10/20/1999 noted: - "She exhibited physical aggression and a tendency towards self-mutilation when stressed, such as when too many demands were placed upon her." - "...will need to adjust to all the new people she will be around." - Review of Individual Support Plan (ISP) start date of 8/1/2018 revealed the following: - "[Client #1] had a total right knee replacement surgery on 5/8/2017 and was placed in [physical therapy (PT) center] on 5/11/2017 where she has made very little progress toward recuperation. The [PT center] was not very helpful in working with her complex needs and seemed to be extraordinarily hesitant in working with her as someone with Intellectual/Developmental Disabilities, clearly not understanding her needs." - "[Client #1] has refused to bear weight on either of her legs, including the right, and seems to be just fine with remaining in her wheelchair for most of her day (though staff has been able to get her standing only 20-30 seconds, twice a day). The 	V 290		

Division of Health Service Regulation

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V 290	<p>Continued From page 6</p> <p>Group home did agree to take her back but had had little success in getting her back to walking independently. There is still great concern that they may not be able to continue to serve her in the current home given her limited mobility and medical needs that require a greater level of staff support."</p> <p>- Review of Individual Support Plan (ISP) dated 3/1/2018 revealed the following goals:</p> <p>- "[Client #1] will receive daily assistance with ambulation and weight bearing daily."</p> <p>- Task: "[Client #1] will stand and attempt to ambulate with staff assistance. [Client #1] will not slap herself or fall on the floor when she is asked to stand or walk."</p> <p>- "[Client #1] will tolerate assistance during toileting tasks with no aggression."</p> <p>- Task: "[Client #1] will stand and bear weight when she needs to go to the bathroom."</p> <p>- "[Client #1] will improve personal care and hygiene tasks with staff assistance."</p> <p>-Task: "[Client #1] will get into the tub or shower."</p> <p>- The ISP also contained goals for: activities of daily living, chores, grooming, fine motor skills, staying calm/focused, 2-step task, identify body parts, and social skills.</p> <p>Interview on 9/12/2018 of the Qualified Professional (QP) revealed:</p> <p>- "It may get a little gray at night" to staff being able to handle the needs of clients.</p> <p>- "At that time yes it was true." Response when shown the following statement from client #1's ISP: "There is still great concern that they may not be able to continue to serve her in the current home given her limited mobility and medical needs that require a greater level of staff support."</p> <p>Interview on 9/10/2018 of the Nurse revealed:</p>	V 290		

Division of Health Service Regulation

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V 290	<p>Continued From page 7</p> <ul style="list-style-type: none"> - She (client #1) is wheelchair dependent even prior to the break." - "She's (client #1) is transferred from the bed to wheelchair to the wheelchair to the toilet." - "Wheelchair dependent since knee surgery in 2017." - "On the weekends there is just the one staff day and night." - "I wonder with her (client #1), she's one of them, why she's not getting ICF (Intermediate Care Facility) care. It would make her have to do less care for herself but more staff care." <p>Interview on 9/12/18 of the House Manager revealed:</p> <ul style="list-style-type: none"> - Reported during the week days there is one staff present from 4:00 pm until 8:00 am. - Reported during the weekends there is one staff present at all times. - "We try to get her to stand but she (client #1) smacks her face and starts screaming. This has been going on since the knee surgery (5/8/2017)." - "My concern if a fire does happen we can't get them out in less than five minutes, week or weekend when only one staff is present." - "I wish I had more (staff) because [client #2] moves so much and can get into something you have to keep [client #2] in your eye sight all times. If you are working with [client #1], you need someone who is attentive to [client #2] at all times." <p>Interview on 9/6/2018 of staff #2 revealed:</p> <ul style="list-style-type: none"> - "It (meeting the needs of the clients) has been done but on certain occasions more staff is needed that's how I feel." - "Could use more help with [client #1] because she's not doing anything. I am just going to be honest she's just not doing nothing since she 	V 290		

Division of Health Service Regulation

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V 290	Continued From page 8 broke her leg." - "If I am giving her (client #1) a bath it is always better if another staff was there." - "Before (the break) she (client #1) was helping she would lift herself and had more strength." - "It takes more staff to assist her (client #1) when she doesn't want to do anything." Interview on 9/11/2018 of the Legal Guardian for client #1: - "Yes (needs more care) because [client #1] is a handful and then some." - "Maybe someone could work with her more."	V 290		
V 291	27G .5603 Supervised Living - Operations 10A NCAC 27G .5603 OPERATIONS (a) Capacity. A facility shall serve no more than six clients when the clients have mental illness or developmental disabilities. Any facility licensed on June 15, 2001, and providing services to more than six clients at that time, may continue to provide services at no more than the facility's licensed capacity. (b) Service Coordination. Coordination shall be maintained between the facility operator and the qualified professionals who are responsible for treatment/habilitation or case management. (c) Participation of the Family or Legally Responsible Person. Each client shall be provided the opportunity to maintain an ongoing relationship with her or his family through such means as visits to the facility and visits outside the facility. Reports shall be submitted at least annually to the parent of a minor resident, or the legally responsible person of an adult resident. Reports may be in writing or take the form of a conference and shall focus on the client's progress toward meeting individual goals.	V 291		

Division of Health Service Regulation

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V 291	<p>Continued From page 9</p> <p>(d) Program Activities. Each client shall have activity opportunities based on her/his choices, needs and the treatment/habilitation plan. Activities shall be designed to foster community inclusion. Choices may be limited when the court or legal system is involved or when health or safety issues become a primary concern.</p> <p>This Rule is not met as evidenced by: Based on record reviews and interviews, the facility failed to maintain coordination between the facility operator and the professionals who are responsible for the clients' treatment, affecting 1 of 3 client (#1). The findings are:</p> <p>Review on 9/7/2018 of client #1's record revealed:</p> <ul style="list-style-type: none"> - Admission date of 10/20/1999 - Diagnoses: - Profound Intellectual Disorder - Impulse Control Disorder - Dementia - Further review of assessment dated 10/20/1999 noted: - "She exhibited physical aggression and a tendency towards self-mutilation when stressed, such as when too many demands were placed upon her." - "...will need to adjust to all the new people she will be around." - Review of Individual Support Plan (ISP) start date of 8/1/2018 revealed the following: - "[Client #1] had a total right knee replacement surgery on 5/8/2017 and was placed in [local physical therapy (PT) center] on 5/11/2017 where she has made very little progress toward recuperation. The [PT center] was not very 	V 291		

Division of Health Service Regulation

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V 291	<p>Continued From page 10</p> <p>helpful in working with her complex needs and seemed to be extraordinarily hesitant in working with her as someone with Intellectual/Developmental Disabilities, clearly not understanding her needs."</p> <p>- "[Client #1] has refused to bear weight on either of her legs, including the right, and seems to be just fine with remaining in her wheelchair for most of her day (though staff has been able to get her standing only 20-30 seconds, twice a day). The Group home did agree to take her back but had had little success in getting her back to walking independently. There is still great concern that they may not be able to continue to serve her in the current home given her limited mobility and medical needs that require a greater level of staff support."</p> <p>- Review of Individual Support Plan (ISP) dated 3/1/2018 revealed the following goals:</p> <p>- Goal # 6: "[Client #1] will receive daily assistance with ambulation and weight bearing daily."</p> <p>- Task: "[Client #1] will stand and attempt to ambulate with staff assistance. [Client #1] will not slap herself or fall on the floor when she is asked to stand or walk."</p> <p>- Goal #7: "[Client #1] will tolerate assistance during toileting tasks with no aggression."</p> <p>- Task: "[Client #1] will stand and bear weight when she needs to go to the bathroom."</p> <p>- Goal #8: "[Client #1] will improve personal care and hygiene tasks with staff assistance."</p> <p>-Task: "[Client #1] will get into the tub or shower."</p> <p>- The ISP also contained goals for: activities of daily living, chores, grooming, fine motor skills, staying calm/focused, 2-step task, identify body parts, and social skills.</p> <p>Review on 9/7/2018 of incident report dated 8/7/2018 noted:</p>	V 291		

Division of Health Service Regulation

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V 291	<p>Continued From page 11</p> <p>- "On 8/2/19 staff who reported to this investigator [client #1], Person Supported appeared to favor her right leg and noticed swelling. [Agency Nurse] was notified of incident. [Client #1] was instructed to be sent out for x-ray to her right leg. She was followed up in [local hospital] and was diagnosed with displaced fracture of the metadiaphysis of the distal tibia."</p> <p>- "It was determined that [Client #1] was attempting to get on the van while exhibiting self-injurious behaviors which involved her kicking and screaming and hitting her leg. [Client #1] is diagnosed with osteopenia. This is an isolated incident and [Client #1] is currently being monitored to address disruptive behavioral and medication changes were made on July 25, 2018 to address concerns.</p> <p>Review on 9/7/2018 of discharge medical records from local hospital dated 8/2/2018 noted:</p> <p>- "Schedule an appointment as soon as possible for a visit in 1 week. No weight bearing with right leg, keep it elevated as much as possible ..."</p> <p>Interview on 9/12/2018 of the Qualified Professional (QP) revealed:</p> <p>- "If there is any restrictions (for client #1 to not to bear weight) nursing should have it on (the) MAR."</p> <p>- "Yes" to if there was weight bearing in August 2018.</p> <p>- "She was at (PT center) she would scream and get combative. They didn't pursue and put refuse on her chart."</p> <p>- "Yes" to tried only one PT center since leg was broken.</p> <p>- "I can ask her care coordinator about if there is another rehab center we can put her in."</p>	V 291		

Division of Health Service Regulation

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V 291	<p>Continued From page 12</p> <p>Review of client #1's Medication Administration Record (MAR) for August 2018 revealed:</p> <ul style="list-style-type: none"> - Did not have restrictions to not bear weight. <p>Interview on 9/10/2018 of the Nurse revealed:</p> <ul style="list-style-type: none"> - "That should have been dc'd (discontinued) while her leg has been broken" to goal #6. - "She can't do all of that with her leg in a cast" to goal #7 (stand while toileting). - "She wouldn't be able to stand up on her own to wipe herself" to goal #8. <p>Interview on 9/12/18 of the House Manager revealed:</p> <ul style="list-style-type: none"> - "We try to get her (client #1) to stand but she smacks her face and starts screaming. This has been going on since the knee surgery (5/8/2017)." - "Number six (goal) we did that in August." - "Number seven (goal) we did that in August." - "We did number eight (goal) in August." - "No" to other PT Centers tried for client. - "I do" to feeling other physical rehabilitation agencies needed to be tried. - Reported the one PT Center tried for client had two physical therapists and one was a male. - "She doesn't like men she would smack and scream (with male physical therapist)." <p>Interview on 9/10/2018 of staff #4 revealed:</p> <ul style="list-style-type: none"> - "I have no idea (doctor's recommendations after broken leg) if the first shift doesn't tell me anything I don't know nothing." - "I just do my regular routine if they tell me nothing to do different." <p>Interview on 9/12/2018 of staff #2 revealed:</p> <ul style="list-style-type: none"> - "The doctor recommended not putting pressure on her leg." 	V 291		

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL041-552	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 09/12/2018
NAME OF PROVIDER OR SUPPLIER FROSTBROOK COURT		STREET ADDRESS, CITY, STATE, ZIP CODE 3865 1-A SMOKEY QUARTZ COURT GREENSBORO, NC 27409		
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V 291	Continued From page 13 - "Until the cast was off and boot put on (could client #1 put pressure on her leg).	V 291		