


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

PRINTED: 10/03/2018
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 34G195	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 10/02/2018	
NAME OF PROVIDER OR SUPPLIER VOCA-HARRISBURG ROAD GROUP HOME		STREET ADDRESS, CITY, STATE, ZIP CODE 6620 HARRISBURG ROAD CHARLOTTE, NC 28277		
(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>INDIVIDUAL PROGRAM PLAN 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, interview and record review, the facility failed to ensure the individual support plan (ISP) included objective training to address identified dining needs for 1 of 3 sampled clients (#3). The finding is:</p> <p>Observations in the group home on 10/2/18 at 6:25 AM revealed client #3 sitting down at the dining table preparing to eat breakfast. The meal consisted of three medium sized waffles and two large sausage patties. The only eating utensil at the dining table for the client was a fork. Client #3 was observed to spear the waffles and the sausage patties with the fork and then take large bites. A staff member was sitting next to the client throughout the meal and was not observed to re-direct the client or assist the client with getting a knife.</p> <p>Review of the record for client #3 on 10/2/18 revealed an ISP dated 2/14/18, which included a current Community/Home Life Assessment. The assessment indicated client #3 was able to use a knife for dining with physical assistance. Continued review of the record did not reveal any</p>	W 242		10/1/18

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

Tracey [Signature]

TITLE

Program Manager

(X6) DATE

10-9-18

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 current or discontinued programming related to the proper use of eating utensils.	W 242	QIDP will implement training for Client #3 to use a knife during meals. RM and QP conduct weekly meal time observations to ensure client #3 is receiving physical assistance to use his knife. PM during monthly site reviews will conduct meal time observations. Persons responsible: QIDP, RM and PM	12/1/18	
W 249	PROGRAM IMPLEMENTATION CFR(s): 483.440(d)(1) As soon as the interdisciplinary team has formulated a client's individual program plan, each client must receive a continuous active treatment program consisting of needed interventions and services in sufficient number and frequency to support the achievement of the objectives identified in the individual program plan. This STANDARD is not met as evidenced by: Based on observations, record review and interview, the facility failed to assure 1 of 3 sampled clients (#3) received interventions in sufficient number and frequency to support the achievement of an objective prescribed in the individual support plan (ISP). The finding is: Observations in the group home on 10/2/18 at 6:33 AM revealed client #3 finishing his breakfast meal and then placing a plate and a fork on the surface of a pass through window located between the dining room and the kitchen. A staff member was observed to be seated next to the	W 249			

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W 249	Continued From page 2 client and did not direct the client in any way. At 6:35 AM, a staff member was observed taking the plate and fork to the kitchen sink. Review of the record for client #3 on 10/2/18 revealed an ISP dated 2/14/18. The ISP contained a current objective for client #3 to load dishes into the dishwasher with three or less verbal prompts and light physical assistance for 80 percent success of trials for three consecutive months. The instructions for the objective included the client putting all dishes in the dishwasher after each meal. Interview with the qualified intellectual disabilities professional on 10/2/18 confirmed client #3 has a current objective to load dishes into the dishwasher after meals, and confirmed staff should have prompted the client to carry the dishes into the kitchen and then load them into the dishwasher.	W 249	QIDP and RM will conduct weekly Meal time observations to ensure Client #3 is receiving verbal prompts and light physical assistance to put his dishes in the dishwasher. PM will during monthly site review will conduct meal time observation. Person responsible: QIDP, RM and PM		
W 475	MEAL SERVICES CFR(s): 483.480(b)(2)(iv) Food must be served with appropriate utensils. This STANDARD is not met as evidenced by: Based on observation, interview, and record review; the facility failed to ensure a place setting during the breakfast meal included appropriate eating utensils for 1 of 3 sampled clients (#3). The finding is: Observations in the group home on 10/2/18 at 6:25 AM revealed client #3 sitting down at the dining table preparing to eat breakfast. The meal consisted of three medium sized waffles and two	W 475		12/1/18	

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W 475	<p>Continued From page 3</p> <p>large sausage patties. The only eating utensil at the dining table for the client was a fork. Client #3 was observed to spear the waffles and the sausage patties with the fork and then take large bites. A staff member was sitting next to the client throughout the meal and was not observed to re-direct the client or assist the client with getting a knife.</p> <p>Review of the record for client #3 on 10/2/18 revealed an Individual Support Plan (ISP) dated 2/14/18, which included a current Community/Home Life Assessment. The assessment indicated client #3 was able to use a knife for dining with physical assistance.</p> <p>Interview with the qualified intellectual disabilities professional on 10/2/18 confirmed client #3 should have been provided a knife, and should have been physically assisted with cutting the waffles and the sausage patties into bite sized pieces.</p>	W 475	<p>QIDP and RM will conduct weekly Meal time observations to ensure Client #3 has a knife. PM will during monthly site review will conduct meal time observation.</p> <p>Person responsible: QIDP, RM and PM</p>		