

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

PRINTED: 11/05/2018
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 34G042	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED 10/31/2018
NAME OF PROVIDER OR SUPPLIER ERWIN #2			STREET ADDRESS, CITY, STATE, ZIP CODE 202 WEST B STREET ERWIN, NC 28339		
(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 249	<p>PROGRAM IMPLEMENTATION CFR(s): 483.440(d)(1)</p> <p>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.</p> <p>This STANDARD is not met as evidenced by: Based on observations, interviews and record reviews, the facility failed to ensure 4 of 4 audit clients (#1, #2, #4, #6) received a continuous active treatment plan consisting of needed interventions as identified in the Individual Program Plan (IPP) in the areas of meal preparation, food consistency, communication skills, dining guidelines and self-help. The findings are:</p> <p>1. Client #6 was not involved in meal preparation to his maximum potential.</p> <p>During observations of meal preparation in the home on 10/30/18 from 4:08pm - 5:11pm, client #6 assisted by putting frozen vegetables in a pot, placing rolls on a pan and throwing away trash. Staff performed other tasks such as cutting up meat, placing meat in a pot, removing pastries from packages, placing the pastries in a pot, operating oven dials, operating the microwave (four times), stirring food items on the stove and placing food into bowls. During this time, client #6 periodically stood with his hands in his pockets and talked with the staff preparing the food.</p>	W 249			

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

TITLE

(X6) DATE

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 249	Continued From page 1 Interview on 10/30/18 with the staff involved revealed he had worked at the home for one week and had completed orientation. The staff indicated he was not sure what client #6 could do in the kitchen; however, he was just doing what he had seen others do when working in the kitchen with client #6. Additional interview indicated he did not want client #6 too close to the stove because he is unsteady on his feet and may get burned. Review on 10/31/18 of client #6's IPP dated 9/23/18 revealed a service goal (OSG #10) for Cooking Guidelines dated 8/19/14. The goal noted client #6 wants to learn to cook. Additional review of an Adaptive Behavior Inventory (ABI) dated 4/16/18 under meal preparation noted, "He will often ask staff if he can help. [Client #6] does require verbal prompting and at times gestures or models. He requires assistance when using the stove, microwave or chopping knife...Staff will provide [Client #6] with informal training to safely cook." Further review of the ABI indicated the client requires partial assistance to prepare canned or frozen foods using the microwave or oven. Interview on 10/31/18 with the Qualified Intellectual Disabilities Professional (QIDP) confirmed client #6 can perform various tasks in the kitchen with assistance or independently. Additional interview indicated the client has completed several programs for cooking. 2. Client #1's mealtime guidelines were not implemented as written. During breakfast observations in the home on	W 249			

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W 249	<p>Continued From page 2</p> <p>10/31/18 from 7:31am - 7:55am, client #1 consumed scrambled eggs and a biscuit cut into small pieces. The client was not assisted to pour his drink until after all of his eggs and a portion of his biscuit had been consumed. Client #1 did not drink any liquids until the end of the meal.</p> <p>Staff interview on 10/31/18 revealed client #1 should be prompted to take sips of liquid during the meal and to eat slow.</p> <p>Review on 10/31/18 of client #1's Feeding Guidelines (OSG #14) dated 1/17/12 (revised 6/6/18) revealed, "[Client #1] tends to eat each food item separately and saves his drinks for the end of the meal. He will often consume all his liquids at one time, which places him at risk for possible choking or aspiration concerns. Encourage [Client #1] to take small sips of liquid spaced evenly throughout the meal..."</p> <p>Interview on 10/31/18 with the QIDP confirmed the guidelines were current and client #1 should be encouraged to drink throughout the meal as indicated.</p> <p>3. Client #4's communication skills were not encouraged.</p> <p>During observations throughout the survey on 10/30 - 10/31/18, client #4 was non-verbal and communicated by touch or gestures. During this time, the client was not observed to utilize alternate means of expressing himself such as manual sign language or assistive communication devices. Staff were not observed to use manual sign language during interactions with client #4 or encourage the use of assistive communication devices.</p>	W 249			

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W 249	<p>Continued From page 3</p> <p>Staff interview on 10/31/18 revealed client #4 uses an iPad at the vocational center to assist with his communication and a Go Talk device in the home. Additional interview indicated the client usually understands what people are saying to him and he also knows some sign language.</p> <p>Review on 10/31/18 of client #4's IPP dated 12/11/17 revealed, "[Client #4's] Support Staff should utilize his iPad with him so he can communicate his choices throughout his work day." The plan noted, "[Client #4] is non-verbal. His methods of communication consist of manual signs, facial expressions, gestures, actions, pointing, head nod and object manipulation...He can identify objects and pictures of familiar objects. [Client #4] demonstrates compression of body parts, object function, hot, cold, wet, dry, etc. He will not always readily engage others in communicative interactions, but will sometimes grab others and pull them to him. His manual sign vocabulary includes a limited number of signs such as " 'thank you', 'sorry', 'drink', or 'water', 'eat' , 'momma'. and 'daddy' ".</p> <p>Interview on 10/31/18 with the QIDP confirmed client #4 should be assisted to use alternate forms of communication such as his iPad or Go Talk and manual sign language during his day as appropriate.</p> <p>4. The food consistency for client #2 and client #4 was not followed.</p> <p>During afternoon observations in the home on 10/30/18 at 3:44pm, client #2 and client #4 were seated at the table to consume their snack. At this time, no staff were in the area. Client #2</p>	W 249			

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W 249	<p>Continued From page 4</p> <p>consumed two whole chocolate Swiss rolls in three bites. The rolls were about three inches long about the width of a quarter. Client #4 consumed six whole Lance peanut butter sandwich crackers. The client placed a whole sandwich cracker in his mouth one at a time without biting off pieces. None of the snack items were cut into smaller pieces.</p> <p>Staff interview on 10/31/18 revealed client #2 is on a mechanical soft diet and all of his food should be chopped in the chopper. Additional interview indicated client #4 should have his food in bite-size pieces.</p> <p>Review on 10/31/18 of client #2's IPP dated 12/22/17 revealed he is on a regular diet with "the consistency of all food ground mechanically."</p> <p>Review of client #4's IPP dated 12/11/17 indicated a regular diet with "foods cut into quarter sized bites."</p> <p>Interview on 10/31/18 with the QIDP confirmed each client's (#2, #4) diet is correct as indicated in their program plans and should be implemented as written.</p> <p>5. Clients were not encouraged to use a key when necessary.</p> <p>During observations in the home on 10/30/18, staff consistently utilized a key to unlock a kitchen pantry. Although various clients were in the area, the clients were not prompted or encouraged to unlock the pantry. During additional observations on 10/31/18, client #2 attempted to open the locked pantry. A staff then retrieved a key from a kitchen drawer and unlocked the pantry door for</p>	W 249			

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W 249	Continued From page 5 him. Clients were not prompted or assisted to use a key to unlock the pantry. Staff interview on 10/31/18 revealed all of the clients in the home can use keys either independently or with assistance. The staff indicated only client #1 would not be allowed to use the pantry key. Review on 10/31/18 of client #2's Adaptive Behavior Inventory (ABI) dated 12/22/17 revealed he can use a key with total independence. Review of client #6's ABI dated 4/16/18 indicated he can use a key with total independence. Interview on 10/31/18 with the QIDP confirmed all clients, with the exception of client #1, should be given opportunities to unlock the pantry when appropriate.	W 249			
W 382	DRUG STORAGE AND RECORDKEEPING CFR(s): 483.460(l)(2) The facility must keep all drugs and biologicals locked except when being prepared for administration. This STANDARD is not met as evidenced by: Based on observations and interviews, the facility failed to ensure all medications remained locked except during administration. The finding is: Medications were not kept locked. During evening observations in the home on 10/30/18 at 5:26pm, the medication cabinet inside the medication room was unlocked. At 5:34pm,	W 382			

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W 382	Continued From page 6 the medication technician entered the area and locked the medication cabinet. Immediate interview with the medication technician revealed they were not sure when the cabinet was left unlocked. Additional interview indicated they have been trained to ensure all medications remain locked when not being administered. Interview on 10/31/18 with the Qualified Intellectual Disabilities Professional (QIDP) confirmed the medication cabinet should be kept locked when medications are not being administered.	W 382			
W 473	MEAL SERVICES CFR(s): 483.480(b)(2)(ii) Food must be served at appropriate temperature. This STANDARD is not met as evidenced by: Based on observations and interviews, the facility failed to ensure all foods were served at an appropriate temperature. The finding is: Foods were not served at an appropriate temperature. During morning observations in the home on 10/31/18 at 6:46am, staff removed biscuits from the oven. The biscuits were placed into two bowls and covered with a thin layer of plastic wrap. At 6:50am, scrambled eggs were removed from a pan, placed in a bowl and covered with plastic wrap. At 7:25am, clients began serving themselves and consuming their breakfast. Just as clients began serving themselves, another	W 473			

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W 473	<p>Continued From page 7</p> <p>client was assisted to grind up his eggs and a biscuit in a small chopper. This client did not begin consuming his food until 7:34am. The temperature of food items was not taken and the food was not reheated.</p> <p>Staff interview on 10/31/18 revealed they were not aware of any thermometers in the home for taking food temperatures. The staff indicated an appropriate food temperature would be 165 degrees. The staff further stated hot food should be served immediately.</p> <p>Interview on 10/31/18 with the Qualified Intellectual Disabilities Professional (QIDP) confirmed the food should have been reheated since it had been sitting out for so long and thermometers should be available in the home to ensure appropriate food temperatures.</p>	W 473			