STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	34G085	A. BUILDING _____ B. WING _____	11/27/2018

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
OAKDALE GROUP HOME	436 MOCKSVILLE HWY STATESVILLE, NC 28625

(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	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 observation, record review and staff interview, the facility failed to assure 1 of 3 sampled clients (#5) received continuous active treatment and sufficient interventions to address communication and dining needs. The findings are: A. The team failed to assure client #5 received continuous active treatment on 11/26/18 during the 11/26-27/18 survey. Observations in the group home on 11/26/18 at 3:45 PM revealed client #5 sitting in a chair in the living area listening to music on a staff member's phone. At 3:55 PM, client #5 was observed to get up from the chair and approach a staff member and the staff member was observed to verbally and gesturally prompt the client back to the chair. Continued observations at 4:01 PM revealed staff verbally prompting and guiding the client to the kitchen where he spent 3-5 minutes assisting with processing a dinner item and then returned to the chair in the living room. Client #5 continued to listen to music on a phone until getting up at 4:25 PM and approaching a staff member who verbally	W 249		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE | (X6) DATE

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W 249	Continued From page 1 prompted the client back to the chair. Observations at 4:35 PM revealed client #5 to briefly get out of the chair and dance for approximately one minute, and go the bathroom, and then return to the chair in the living area. Continued observations at 4:50 PM revealed client #5 to listen to a relative talk to him on the phone for approximately five minutes and then a staff member was observed verbally prompting the client back to the chair where the client was observed to occasionally glance at the TV and otherwise look around the room. At 5:05 PM client #5, again got up from the chair and approached a staff member who verbally and gesturally directed the client back to the chair. Client #5 remained in the chair un-occupied until staff verbally and physically prompted the client to wash his hands and go to the dinner table. In total, client #5 was noted to spend 90 of 105 observed minutes on 11/26/18 sitting in a chair listening to music or un-occupied. Record review for client # 5 on 11/27/18 revealed a person centered plan (PCP) dated 6/11/18. Review of the current program objectives for the client revealed 5 programs including a communication program and a place setting program. Continued review of the PCP revealed a statement indicating he "really likes to stay busy" as well as "really loves to play music, especially on drums, tambourines, horns , pianos and maracas". Further review of the record revealed a behavior support program dated 7/11/18 which included a "Prevention/Rules for Interactions" section which indicated that staff should ensure client #5 receives a variety of leisure items.	W 249		

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W 249	Continued From page 2 Interview with the qualified intellectual disabilities professional (QIDP) on 11/27/18 confirmed client #5 should have received more options for training and leisure on 11/26/18 to assure continuous active treatment. B. The team failed to assure client #5 received interventions in sufficient frequency to address communication needs. Examples include: Observations in the group home on 11/26/18 at 3:45 PM revealed client #5 sitting in a chair in the living area listening to music on a staff member's phone. The client was observed to be non-verbal. At 3:55 PM, client #5 was observed to get up from the chair and approach a staff member and the staff member was observed to verbally and gesturally prompt the client back to the chair. Continued observations at 4:01 PM revealed staff verbally prompting and guiding the client to the kitchen where he spent 3-5 minutes assisting with processing a dinner item and then returned to the chair in the living room. Client #5 continued to listen to music on a phone until getting up at 4:25 PM and approaching a staff member who verbally prompted the client back to the chair. Observations at 4:35 PM revealed client #5 to briefly get out of the chair and dance for approximately one minute, and go the bathroom, and then return to the chair in the living area. Continued observations at 4:50 PM revealed client #5 to listen to a relative talk to him on the phone for approximately five minutes and then a staff member was observed verbally prompting the client back to the chair where the client was observed to occasionally glance at the TV and otherwise look around the room. At 5:05 PM	W 249		

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W 249	Continued From page 3 client #5, again got up from the chair and approached a staff member who verbally and gesturally directed the client back to the chair. Client #5 remained in the chair un-occupied until staff verbally and physically prompted the client to wash his hands and go to the dinner table. At no time were staff observed using any communication tools with the client on 11/26/18 during the survey. Review of the record for client #5 on 11/27/18 revealed a PCP dated 6/11/18. The PCP included a current communication program developed to increase opportunities for him to utilize independent touching of pictured items to make choices. The program indicated the client would be provided with a communication book containing pictures of routine activities, chores and snacks and indicated training should provide the client opportunity to make choices. Review of the communication book, located in the group home revealed it contained pictures including: Jello; crackers; ball; keyboard; potato chips; cookies; tambourine; van; lactose free milk and soda. Interview with the QIDP on 11/27/18 confirmed client #5's communication program is current and indicated staff should have been using the communication book with the client to offer more leisure/activity choices and when transitioning to dinner. C. The team failed to assure client #5 received interventions in sufficient frequency to address dining needs. Examples include: Observations in the group home on 11/26/18 at 5:30 PM, revealed staff verbally and physically	W 249		

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W 249	Continued From page 4 prompting client #5 to the dining table for the dinner meal. Staff were observed to carry the client's plate, cups and eating utensils to the table for client #5. Review of the record for client #5 on 11/27/18 revealed a PCP dated 6/11/18. The PCP included current programming for client #5 to assist with setting his place at the dining table. The instructions for the program indicated the materials included his plate, napkins, cups and utensils. The instructions also included prompting the client to get the items he needs to set his place at the dining table. Interview with with QIDP on 11/27/18 confirmed the dining program to be current and indicated staff should have assisted the client with running the program at the dinner meal on 11/26/18.	W 249		