STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	34G083	A. BUILDING _____ B. WING _____	R 11/29/2018

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
BLANCHE DRIVE	6208 BLANCHE DRIVE RALEIGH, NC 27607

(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 252}	PROGRAM DOCUMENTATION CFR(s): 483.440(e)(1) Data relative to accomplishment of the criteria specified in client individual program plan objectives must be documented in measurable terms. This STANDARD is not met as evidenced by: Based on record review and interview, the facility failed to ensure data was collected as specified in the Individual Program Plan (IPP). This affected 2 of 3 audit clients (#2, #5). The finding is: 1. Client #2's objective data was not collected as indicated. Review on 11/29/18 of client #2's IPP dated 1/11/18 revealed an objective to purchase one item twice per month with verbal prompts 90% of the time for 8 consecutive months (implemented 8/1/18, data collection 2 times per month) and to evacuate the building according to task analysis with 75% verbal prompting for 12 consecutive months (implemented 9/8/17, data collection 2 times per month). Additional review of the October '18 and November '18 data sheets for each objective showed no data collection. Interview on 11/29/18 with the Home Manager revealed the objectives were current and data should have been collected as indicated. 2. Client #5's objective data was not collected as indicated. Review on 11/29/18 of client #5's IPP dated 9/21/18 revealed an ojective to participate with	{W 252}		

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

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	34G083	A. BUILDING _____ B. WING _____	R 11/29/2018

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{W 252}	Continued From page 1 matching coins (penny and nickel) according to task analysis for 2 consecutive months (implemented 9/10/17, data collection five times per month) and to stay in designated meeting area during a fire drill until staff alerts her to return to the home with verbal prompts 100% of the time for 12 consecutive months (implemented 8/1/18, data collection 3 times per month). Additional review of the October '18 and November '18 data sheets for each objective showed no data collection. Interview on 11/29/18 with the Home Manager revealed the objectives were current and data should have been collected as indicated.	{W 252}		
{W 255}	PROGRAM MONITORING & CHANGE CFR(s): 483.440(f)(1)(i) The individual program plan must be reviewed at least by the qualified intellectual disability professional and revised as necessary, including, but not limited to situations in which the client has successfully completed an objective or objectives identified in the individual program plan. This STANDARD is not met as evidenced by: Based on record review and interview, the facility failed to ensure the Individual Program Plan (IPP) for 2 of 3 audit clients (#4, #5) was revised after they had successfully completed objectives. The findings are: 1. Client #4 had successfully completed an objective; however, training continued. Review on 11/29/18 of client #4's IPP dated 3/1/18 revealed an objective to complete steps of self-medication tasks with verbal prompts for 75% of the time for 8 consecutive months	{W 255}		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	34G083	A. BUILDING _____ B. WING _____	R 11/29/2018

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{W 255}	Continued From page 2 (implemented 10/4/17). Additional review of progress notes for the objective revealed the following: 11/17 - 100% 12/17 - 100% 01/18 - 100% 02/18 - 100% 03/18 - 100% 04/18 - 100% 05/18 - 100% 06/18 - 100% 07/18 - 100% 08/18 - 100% 09/18 - 100% Interview on 11/29/18 with the Home Manager confirmed the objective had been completed. 2. Client #5 had successfully completed an objective; however, training continued. Review on 11/29/18 of client #5's IPP dated 9/21/18 revealed an objective to complete steps of self-medication tasks with physical prompts for 75% of the time for 8 consecutive months (implemented 3/26/16). Additional review of progress notes for the objective revealed the following: 11/17 - 100% 12/17 - 100% 01/18 - 100% 02/18 - 100% 03/18 - 100% 04/18 - 100% 05/18 - 100% 06/18 - 100% 07/18 - 100%	{W 255}		

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{W 255}	Continued From page 3 08/18 - 100% Interview on 11/29/18 with the Home Manager confirmed the objective had been completed.	{W 255}		