

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

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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: Tred W. Hulson, Jr., Administrator TITLE: Administrator (X5) DATE: 11/14/18

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.

**ERWIN II GROUP HOME
PLAN OF CORRECTIONS
For
Recertification Survey conducted 10/30/18 – 10/31/18**

W249 PROGRAM IMPLEMENTATION

Each client will receive continuous active treatment as identified in their IPPs. All staff will be reinserviced on each client's IPP by the Qualified Intellectual Disabilities Professional (Qualified and or the Habilitation Specialist. After a review of all aspects of each IPP, emphasis will be placed upon the following:

- Consistent implementation of all Clients' guidelines with specific focus on Client # 6's Cooking Guidelines (strategies to learn how to cook/prepare a meal).

The QIDP and Habilitation Specialist will revise the Client #6's Cooking Guidelines to specify the components of cooking on which he should receive training.

All Staff members will be inserviced the revised Cooking Guidelines.

- Consistent implementation of all Clients' Mealtime Guidelines with specific focus on Client #1's Mealtime Guidelines.

All Staff members will be reinserviced on Client #1's Mealtime Guidelines by the OT/PT Habilitation Assistant and or the QIDP. Emphasis will be placed on the need for the Staff to provide encouragement to Client #1 to take sips of his liquids (beverages) throughout his meals.

- Consistent implementation of all Clients' Communications Guidelines and Formal Programs with specific focus on Client #4's Communication Guidelines and his Formal Program of using the iPad to communicate.

All Staff members will be reinserviced on Client #4's Communication Guidelines and his Formal Program (usage of the iPad to communicate his needs, wants, choices, etc.) The SLP and or the Habilitation Specialist will reinservice the Staff members on Client #4's Communication Guidelines and his Formal Communication Program for three consecutive months.

- Consistent implementation of all Clients' diet (food) consistencies as ordered by the physician with specific emphasis on Client #2's and Client # 4's diet consistencies

All Staff members will be reinserviced on Client #2's and Client #4's appropriate diet consistencies as indicated by physician orders and outlined in their Mealtime Guidelines. The reinservicing will be conducted for three consecutive months by the OT/PT Habilitation Assistant and or the QIDP. The reinservicing will emphasize the importance of all Clients' food being prepared in the correct diet consistencies as well as monitoring by the Staff to prevent episodes of choking.

Monitoring of adherence to the above will occur through various assessments (Interaction, Mealtime, and Formal Program Assessments) and general observations at a minimum of (2) monthly. The assessments and general observations will be completed by either of the following: QIDP, Habilitation Specialist, Administrator, Home Manager, Vocational Manager, Behavior Specialist, and the OT/PT Hab. Assistant.

Completion Date: 12/20/18

W 382 DRUG STORAGE AND RECORDKEEPING

All Staff members will be reinserviced on the procedures of Medication Administration by the Nurse. Each staff member will receive training on the protecting the health and safety of all the Clients by appropriately keeping all medications locked when not being administered. Special attention will be given to the Control Drugs which are to be doubly locked unless being administered.

Monitoring of adherence to the above will occur through medication pass observations and general observations at a minimum of (2) monthly. The med pass observations and general observations will be completed by either of the following: Nurse, QIDP, Habilitation Specialist, Administrator, Home Manager, Vocational Manager, Behavior Specialist, and the OT/PT Hab. Assistant.

Completion Date: 12/20/18

W 473 MEAL SERVICES

All staff will be reinserviced on mealtime procedures. Emphasis will be placed on serving the food at the proper temperature (140 degrees) after it has been removed from the stove top/oven.

The Home Manager will ensure a food thermometer is available at all times for temperature testing of all food that is not served immediately after removal from its heat source.

The adherence to food being served at the proper temperature will be monitored by the QIDP, Habilitation Specialist, Home Manager, OT/PT Hab. Asst., Behavior Specialist, Nursing, or the Vocational Manager through the completion of mealtime assessments. The mealtime assessments will be completed at least twice monthly.

Completion Date: 12/20/18