

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

PRINTED: 12/06/2018  
FORM APPROVED  
OMB NO. 0938-0391

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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:<br><br><b>34G028</b> | (X2) MULTIPLE CONSTRUCTION<br>A. BUILDING _____<br><br>B. WING _____ | (X3) DATE SURVEY COMPLETED<br><br><b>12/04/2018</b> |
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| NAME OF PROVIDER OR SUPPLIER<br><br><b>LIFE, INC WILLIAM STREET HOME</b> | STREET ADDRESS, CITY, STATE, ZIP CODE<br><b>407 NORTH WILLIAM STREET<br/>GOLDSBORO, NC 27530</b> |
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| (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 |
|--------------------|--|---------------|---|----------------------|
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| W 130 | <p>PROTECTION OF CLIENTS RIGHTS<br/>CFR(s): 483.420(a)(7)</p> <p>The facility must ensure the rights of all clients. Therefore, the facility must ensure privacy during treatment and care of personal needs.</p> <p>This STANDARD is not met as evidenced by:<br/>Based on observations, record review and interview, the facility failed to ensure privacy during medication administration for 2 of 5 (#3, #5) audit clients. The findings are:</p> <ol style="list-style-type: none"> <li>Client #3 was not afforded privacy during medication administration.</li> </ol> <p>During morning medication administration observations in the home on 12/4/18 at 6:45am, the facility's nurse and medication technician explained to client #3 his medications and the reasons why he takes them. Further observations revealed one of his medications was for his behaviors. During the medication administration the doors to the medication room remained opened and other clients were within close proximity to hear how client #3 takes medication to control his behaviors.</p> <p>Review on 12/4/18 of client #3's individual program plan (IPP) dated 6/13/18 states, "...require reminders to shut door."</p> <p>Review on 12/4/18 of client #3's adaptive behavior inventory (ABI) dated 10/10/18 revealed he has total independence to close doors for privacy.</p> <p>During an interview on 12/4/18, the facility's nurse confirmed the doors to medication room should</p> | W 130 |  |  |
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|   |       |           |
|---|-------|-----------|
| 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 130  | <p>Continued From page 1</p> <p>have been closed to ensure the privacy for client #3 during medication administration. Further interview revealed client #3 "probably does not want his peers to know he takes medications to help control his behavior."</p> <p>2. Client #5 was not afforded privacy during his blood pressure checks.</p> <p>During morning medication administration observations in the home on 12/4/18 at 7:44am, the facility's nurse checked client #5's blood pressure in the living room of the home. While client #5's blood pressure was being checked there were other clients within close proximity. At no time was client #5 afforded the opportunity to have his blood pressure checked behind closed doors.</p> <p>Review on 12/4/18 of client #5's ABI dated 5/4/18 indicated the has total independence in closing doors for privacy.</p> <p>During an interview on 12/4/18, the facility's nurse confirmed client #5's blood pressure should have been checked behind closed doors for his privacy.</p> | W 130   |   |                      |   |
| W 249  | <p>PROGRAM IMPLEMENTATION</p> <p>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>   | W 249   |   |                      |   |

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| W 249  | Continued From page 2<br><br>This STANDARD is not met as evidenced by:<br>Based on observation, interviews and record reviews, the facility failed to ensure each client received a continuous active treatment plan consisting of needed interventions and services identified in the individual program plan (IPP) in the areas of dining equipment, meal preparation and behavior. This affected 4 of 5 audit clients (#2, #3, #4, #6). The findings are:<br><br>1. Clients #2, #3, #4 and #6 were not given the opportunity to use a knife at dinner.<br><br>a. During dinner observations in the home on 12/3/18, client #2 consumed a meal of the following: macaroni with cheese, beets, broccoli and dinner roll. Further observations revealed the beets were within 2 inches and the dinner roll was consumed whole. At no time was client #2 given the opportunity to cut his food. Additional observations revealed client #2 did not have a knife at his place setting.<br><br>Review on 12/3/18 of client #2's IPP dated 12/19/17 stated, "I require staff assistance with cutting foods into bite size pieces of 3/4" to 1"...."<br><br>Review on 12/4/18 of client #2's adaptive behavior inventory (ABI) dated 10/8/18 revealed he does have to ability to use a knife for cutting.<br><br>During an interview on 12/4/18, the habilitation coordinator stated she never thought client #2 could use a knife because he is "blind."<br><br>During an interview on 12/4/18, the qualified | W 249   |   |                      |   |

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| W 249  | <p>Continued From page 3</p> <p>intellectual disabilities professional (QIDP) confirmed client #2 should have been given the opportunity to use a knife.</p> <p>b. During dinner observations in the home on 12/3/18, client #3 consumed a meal of the following: macaroni with cheese, beets, broccoli and dinner roll. Further observations revealed the beets were within 2 inches and the dinner roll was consumed whole. At no time was client #3 given the opportunity to cut his food. Additional observations revealed client #3 did not have a knife at his place setting.</p> <p>Review on 12/4/18 of client #3's IPP dated 6/13/18 revealed, "I can also cut my own food into one - inch portions sizes which is recommended."</p> <p>Review on 12/4/18 of client #3's ABI dated 10/8/18 revealed he is totally independent with using a knife.</p> <p>During an interview on 12/4/18, the QIDP confirmed client #3 should have been given the opportunity to use a knife.</p> <p>c. During dinner observations in the home on 12/3/18, client #4 consumed a meal of the following: macaroni with cheese, beets, broccoli and dinner roll. Further observations revealed the beets were within 2 inches and the dinner roll was consumed whole. At no time was client #4 given the opportunity to cut his food. Additional observations revealed client #4 did not have a knife at his place setting.</p> <p>Review on 12/3/18 of client #4's IPP dated 1/23/18 stated, "...Staff assisting me with cutting all foods into one - inch pieces."</p> | W 249   |   |                      |   |

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| W 249  | <p>Continued From page 4</p> <p>Review on 12/4/18 of client #4's ABI dated 5/9/18 revealed he has partial independence with cutting his food.</p> <p>During an interview on 12/4/18, the QIDP confirmed client #4 should have been given the opportunity to use a knife.</p> <p>d. During dinner observations in the home on 12/3/18, client #6 consumed a meal of the following: macaroni with cheese, beets, broccoli and dinner roll. Further observations revealed the beets were within 2 inches and the dinner roll was consumed whole. At no time was client #6 given the opportunity to cut his food. Additional observations revealed client #6 did not have a knife at his place setting.</p> <p>Review on 12/3/18 of client #6's IPP dated 8/16/18 indicated, "...staff cutting food into 1/4" to 1" pieces."</p> <p>Review of client #6's ABI dated 10/8/18 stated he has total independence with using a knife.</p> <p>During an interview on 12/4/18, the QIDP confirmed client #6 should have been given the opportunity to use a knife.</p> <p>2. Clients #3 and #4 were not given the opportunity to participate in meal preparation.</p> <p>During dinner meal preparation in the home on 12/3/18 at 3:50pm staff began making ice tea; he poured the tea mixture into the pitcher, added water and stirred and then put the pitcher into the refrigerator. Further observations revealed at 3:56pm, staff using a electric can opener to open</p> | W 249   |   |                      |   |

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| W 249  | <p>Continued From page 5</p> <p>cans of beets and one can of peas. Additional observations revealed staff pouring the beets into a bowl, placing the bowl into the microwave and turning the microwave on. Staff poured the can of peas into a pot, placed the pot on the stove and turned the stove on. Further observations revealed staff opening two boxes of macaroni and cheese, putting the mixture into a pot on the stove, adding butter and milk and then stirring the macaroni and cheese. During this time clients #3 and #4 walked in and out of the kitchen, but were not given the opportunity to participate in meal preparation. Further observations revealed the QIDP even making the statement, "[Client #3] is bored."</p> <p>During an interview on 12/3/18, the staff revealed both clients #3 and #4 can use the electric can opener. Further interview revealed clients #3 and #4 should have been given the opportunity to participate in meal preparation.</p> <p>Review on 12/4/18 of client #3's IPP dated 6/13/18 stated, "In meal preparation skills, I am very helpful in the kitchen. I can use most kitchen appliances with assistance. he can make a powdered beverage....I enjoy helping as much as possible. I am able to open cans of vegetables using a can opener with minimal assistance."</p> <p>Review on 12/4/18 of client #3's ABI dated 10/10/18 revealed he has partial independence with using a can opener.</p> <p>Review on 12/3/18 of client #4's IPP dated 1/23/18 indicated, "In the areas of domestic skills, I need verbal encouragement to complete some chores. I am agreeable to the chores...."</p> | W 249   |   |                      |   |

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| W 249  | <p>Continued From page 6</p> <p>Review on 12/4/18 of client #4's ABI dated 5/9/18 revealed he has partial independence with using a can opener.</p> <p>During an interview on 12/3/18, the QIDP confirmed clients #3 and #4 should have been given the opportunity to participate in meal preparation.</p> <p>3. During afternoon observations in the home on 12/3/18 at 3:17pm, staff was putting some laundry into the dryer. Further observations revealed client #4 was talking with the staff.</p> <p>During an interview on 12/3/18, the staff revealed the laundry was client #4's. Further interview revealed he was "told [Client #4] cannot do his own laundry."</p> <p>Review on 12/3/18 of client #4's IPP dated 1/23/18 indicated, "In the areas of domestic skills, I need verbal encouragement to complete some chores. I am agreeable to the chores...."</p> <p>Review on 12/4/18 of client #4's ABI dated 5/9/18 stated he has partial independence with selecting laundry supplies and operating the clothes dryer.</p> <p>During an interview on 12/3/18, the QIDP confirmed even though client #4 has never had a formal goal to do his laundry, he should have been given the opportunity.</p> <p>4. Client #6 was not prompted to wipe his mouth.</p> <p>During afternoon observation in the home on 12/3/18 from 3:15pm until 4:07pm, client #6 was observed with dried food on his chin. At no time was client #6 prompted to wipe his chin, until after</p> | W 249   |   |                      |   |

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| W 249  | <p>Continued From page 7 the surveyor began to question staff.</p> <p>During an interview on 12/3/18, the staff revealed client #6 does drool.</p> <p>Review on 12/3/18 of client #6's IPP dated 8/16/18 revealed he will use a napkin when prompted.</p> <p>Review on 12/4/18 of client #6's ABI dated 10/9/18 revealed he has total independence with wiping his mouth.</p> <p>During an interview on 12/3/18, the habilitation coordinator revealed client #6 had snack at 2:30pm and he should have been prompted to wipe his face after he finished eating.</p> <p>5. Clients #3 and #6 were not prompted to not eat food from off the floor and table.</p> <p>a. During dinner observations in the home on 12/3/18, client #3 was observed eating food from off the floor on 9 separate occasions. Further observations revealed client #3 was sitting 3 - 4 inches away from the table while he ate. At no time was client #3 prompted to not eat food from off the floor.</p> <p>Review on 12/4/18 of client #3's ABI dated 10/10/18 stated he has total independence not to eat food from off the floor.</p> <p>During an interview on 12/4/18, the QIDP confirmed client #3 should have been prompted not eat food from off the the floor.</p> <p>b. During dinner observations in the home on 12/3/18, client #6 was observed eating food off</p> | W 249   |   |                      |   |



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| W 249  | Continued From page 8<br>the table. At no time was client #6 prompted to not eat food from off the table.<br><br>Review on 12/4/18 of client #6's ABI dated 10/9/18 stated, "eats without eating food from the table."<br><br>During an interview on 12/4/18, the QIDP confirmed staff should have prompted client #6 not to eat food from off the table.   | W 249   |   |                      |   |
| W 455  | <b>INFECTION CONTROL</b><br>CFR(s): 483.470(l)(1)<br><br>There must be an active program for the prevention, control, and investigation of infection and communicable diseases.<br><br>This STANDARD is not met as evidenced by:<br>Based on observations and interviews, the facility failed to ensure a sanitary environment was provided to avoid transmission of possible infection and prevent possible cross-contamination. This potentially affected 5 clients residing in the home. The finding is:<br><br>Precautions were not taken to promote client health and prevent possible cross-contamination.<br><br>During dinner observations in the home on 12/3/18, client #6 used his personal spoon which he had been using to eat his food, to scrape the serving spoon which was used to scoop the macaroni and cheese. Further observation revealed another client then using the serving spoon to obtain another helping of macaroni and cheese. At no time was client #6 prompted not to use his personal spoon to scrape the serving | W 455   |   |                      |   |

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| W 455  | Continued From page 9<br>spoon for the macaroni and cheese.<br><br>During an interview on 12/3/18, staff revealed they were unaware client #6 used his personal spoon to scrape the serving spoon for the macaroni and cheese.<br><br>During an interview on 12/4/18, the qualified intellectual disabilities professional (QIDP) confirmed client #6 should have been prompted not to use his personal personal spoon the scrape macaroni and cheese from the serving spoon.  | W 455   |   |                      |   |
| W 460  | <b>FOOD AND NUTRITION SERVICES</b><br>CFR(s): 483.480(a)(1)<br><br>Each client must receive a nourishing, well-balanced diet including modified and specially-prescribed diets.<br><br>This STANDARD is not met as evidenced by:<br>Based on observations, record reviews and interviews, the facility failed to ensure each client received a continuous active treatment plan consisting of needed interventions and services identified in the individual program plan (IPP) in the area of diet. This affected 4 of 5 audit clients (#2, #3, #4, #6). The findings are:<br><br>1. Clients #2, #3, #4 and #6 diet consistencies were not followed.<br><br>a. During dinner observations in the home on 12/3/18, client #2 consumed a meal of the following: macaroni with cheese, beets, broccoli and dinner roll. Further observations revealed the beets were within 2 inches and the dinner roll | W 460   |   |                      |   |

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| (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 460  | <p>Continued From page 10</p> <p>was consumed whole. At no time was client #2 given the opportunity to cut his food. Additional observations revealed client #2 did not have a knife at his place setting.</p> <p>Review on 12/3/18 of client #2's IPP dated 12/19/17 stated, "I require staff assistance with cutting foods into bite size pieces of 3/4" to 1"...."</p> <p>Review on 12/3/18 of the diet order memorandum (no date) revealed all of client #2's foods should be cut into 1 inch bite size pieces.</p> <p>Review on 12/4/18 of client #2's adaptive behavior inventory (ABI) dated 10/8/18 revealed he does have to ability to use a knife for cutting.</p> <p>During an interview on 12/4/18, the habilitation coordinator stated she never thought client #2 could use a knife because he is "blind."</p> <p>During an interview on 12/4/18, the qualified intellectual disabilities professional (QIDP) confirmed client #2's diet consistency should have been followed.</p> <p>b. During dinner observations in the home on 12/3/18, client #3 consumed a meal of the following: macaroni with cheese, beets, broccoli and dinner roll. Further observations revealed the beets were within 2 inches and the dinner roll was consumed whole. At no time was client #3 given the opportunity to cut his food. Additional observations revealed client #3 did not have a knife at his place setting.</p> <p>Review on 12/4/18 of client #3's IPP dated 6/13/18 revealed, "...cut all foods into 3/4- 1" pieces...." Further review stated, "I can also cut</p> | W 460   |   |                      |   |

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

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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION                         |  | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:<br><br><b>34G028</b> | (X2) MULTIPLE CONSTRUCTION<br>A. BUILDING _____<br><br>B. WING _____  |                      | (X3) DATE SURVEY COMPLETED<br><br><b>12/04/2018</b> |
|--|--|---|---|----------------------|---|
| NAME OF PROVIDER OR SUPPLIER<br><br><b>LIFE, INC WILLIAM STREET HOME</b> |  |   | STREET ADDRESS, CITY, STATE, ZIP CODE<br><b>407 NORTH WILLIAM STREET<br/>GOLDSBORO, NC 27530</b>                |                      |   |
| (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 460  | <p>Continued From page 11</p> <p>my own food into one - inch portions sizes which is recommended."</p> <p>Review of a note which was located on the refrigerator with the date of 11/7/18 indicated, "ALL foods must be soft and cut into 1/2 pieces. This means all foods should be the size of a butter bean and soft."</p> <p>Review on 12/4/18 of the diet order memorandum (no date) revealed all of client #3's food should be cut into 1/2 pieces.</p> <p>Review on 12/4/18 of client #'s ABI dated 10/8/18 revealed he is totally independent with using a knife.</p> <p>During an interview on 12/4/18, the QIDP confirmed client #3's diet consistency should have been followed.</p> <p>c. During dinner observations in the home on 12/3/18, client #4 consumed a meal of the following: macaroni with cheese, beets, broccoli and dinner roll. Further observations revealed the beets were within 2 inches and the dinner roll was consumed whole. At no time was client #4 given the opportunity to cut his food. Additional observations revealed client #4 did not have a knife at his place setting.</p> <p>Review on 12/3/18 of client #4's IPP dated 1/23/18 stated, "...Staff assisting me with cutting all foods into one - inch pieces."</p> <p>Review on 12/4/18 of the diet order memorandum (no date) revealed all of client #4's food should be cut into 1 inch pieces.</p> | W 460   |   |                      |   |

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|--|--|---|---|----------------------|---|
| NAME OF PROVIDER OR SUPPLIER<br><br><b>LIFE, INC WILLIAM STREET HOME</b> |  |   | STREET ADDRESS, CITY, STATE, ZIP CODE<br><b>407 NORTH WILLIAM STREET<br/>GOLDSBORO, NC 27530</b>                |                      |   |
| (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 460  | <p>Continued From page 12</p> <p>Review on 12/4/18 of client #4's ABI dated 5/9/18 revealed he has partial independence with cutting his food.</p> <p>During an interview on 12/4/18, the QIDP confirmed client #4's diet consistency should have been followed.</p> <p>d. During dinner observations in the home on 12/3/18, client #6 consumed a meal of the following: macaroni with cheese, beets, broccoli and dinner roll. Further observations revealed the beets were within 2 inches and the dinner roll was consumed whole. At no time was client #6 given the opportunity to cut his food. Additional observations revealed client #6 did not have a knife at his place setting.</p> <p>Review on 12/3/18 of client #6's IPP dated 8/16/18 indicated, "...staff cutting food into 1/4" to 1" pieces."</p> <p>Review on 12/4/18 of the diet order memorandum (no date) stated, "ALL FOODS FINELY CHOPPED WITH FOOD CHOPPER - into 1/4' pieces."</p> <p>Review on 12/4/18 of client #6's nursing evaluation dated 8/13/18 revealed, "...all foods finely chopped into 1/4 inch pieces."</p> <p>Review of client #6's ABI dated 10/8/18 stated he has total independence with using a knife.</p> <p>During an interview on 12/4/18, the QIDP confirmed client #6's diet consistency should have been followed. Further interview revealed the home does have a food chopper.</p> | W 460   |   |                      |   |

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| NAME OF PROVIDER OR SUPPLIER<br><br><b>LIFE, INC WILLIAM STREET HOME</b> |   |   | STREET ADDRESS, CITY, STATE, ZIP CODE<br><b>407 NORTH WILLIAM STREET<br/>GOLDSBORO, NC 27530</b>                |                      |   |
| (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 460  | <p>Continued From page 13</p> <p>2. Client #4's diet was not followed.</p> <p>During dinner observations in the home on 12/3/18, client #4 consumed a meal of the following: macaroni with cheese, beets, broccoli and dinner roll. At no time was client #4 offered a Boost to drink.</p> <p>Review on 12/3/18 of client #4's IPP dated 1/23/18 indicated, "Boost is provided to me twice daily to help increase my weight."</p> <p>Review on 12/4/18 of client #4's weight chart for 2018 revealed the following, ..."Apr 128 May 126 Jun 132 July 132 Aug 134 1/2 Sept 134 Oct 136 Nov 130."</p> <p>Review on 12/4/18 of client #4's nursing evaluation dated 1/23/18 stated, "Give one can of Boost twice daily....He continued to receive BOOST...for extra calories."</p> <p>Review on 12/4/18 of the diet order memorandum (no date) revealed, "Give one Boost pudding or one Boost drink with...supper."</p> <p>During an interview on 12/4/18, the QIDP confirmed client #4's diet should have been followed. Further interview revealed the home does have a Boost for client #4.</p> | W 460   |   |                      |   |