

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

PRINTED: 04/04/2019
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 34G148	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 03/26/2019
NAME OF PROVIDER OR SUPPLIER WEST FRIENDLY			STREET ADDRESS, CITY, STATE, ZIP CODE 4011 WEST FRIENDLY AVENUE GREENSBORO, NC 27405	
(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 227	<p>INDIVIDUAL PROGRAM PLAN CFR(s): 483.440(c)(4)</p> <p>The individual program plan states the specific objectives necessary to meet the client's needs, as identified by the comprehensive assessment required by paragraph (c)(3) of this section.</p> <p>This STANDARD is not met as evidenced by: Based on observation, record review and interview, the facility failed to assure the person centered plan (PCP) for 1 sampled client (#6) included objective training to meet the client's identified needs in the areas of pre-vocational, self-help, and daily living skills. The finding is:</p> <p>Afternoon observations on 3/25/19 in the home from 4:00 PM to 4:20 PM revealed client #6 to sit in the living room engaged in table top activities and to take the surveyor on a tour of her bedroom. Further observations from 4:25 PM to 6:00 PM revealed client #6 to count money in the home's office with the home manager (HM) for 20 minutes and to primarily perform meal prep activities for the majority of this time independently which included sweeping, food/drink item prep, obtain serving containers, monitor food items on and inside the kitchen stove, place setting, and wash dishes.</p> <p>Morning observations on 3/26/19 in the home from 7:00 AM to 7:35 AM revealed client #6 to sit in the living room engaged in table top activities and to take her medications. Further observations from 7:35 AM to 8:15 AM revealed client #6 to primarily perform meal prep activities independently which included food/item prep, obtain serving containers, and place setting.</p>	W 227	<p>W227</p> <p>The clinical team will meet to determine the need for objectives in the areas of pre-vocational, self-help and daily living skills based on the Adaptive Behavior Inventory. The Habilitation Specialist will ensure the recommendations are addressed in the form of a formal program. The habilitation specialist will in-service all staff to ensure the programs are implemented per the team meeting. The Qualified Professional will revise the person centered plan to include the result of the team meeting. The clinical team will monitor x2 a week for period of one month and then on a routine basis through interaction assessments to ensure needs are addressed and staff are implementing programs as written. In the future, the Qualified Professional will ensure all Person Centered Plans include objective training to address the needs.</p> <p>5/25/19</p>	

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Black Mountain / WRO

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

TITLE

QP/PM

(X6) DATE

4/10/19

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 227	<p>Continued From page 1</p> <p>Continued observations from 8:35 AM to 8:55 AM revealed client #6 to perform meal cleanup activities to include clean up table and wash dishes.</p> <p>Record review on 3/26/19 of client #6's PCP dated 9/17/18 revealed formal goals to include refrain from physical aggression, learn to wash hands after using bathroom, exercise/stretch her arms (right/left), participate in seasoning a meat dish, dust bookshelf in the home, learn coin equivalences (.50, .75, \$1.00). Further review of client #6's PCP revealed "[Client #6] also wants to work on learning new things over the year and increase her hours of work."</p> <p>Ongoing review on 3/26/19 of client #6's adaptive behavior inventory (ABI) last updated 1/7/19 revealed the following needs: grooming, recites letter of alphabet, prints/letters of alphabet, writes letters, reads sight words, reads complete sentences, tells time, names months/weeks/days of the year, uses community library resources, works alone and completes task, works in interactive setting and completes task, hangs coat/robe on hook/hangers, folds clothing, select/measure laundry supplies, housekeeping. Continued review revealed "[Client #6] does not complete any of these independently but could be taught how to do this." Subsequent review of client #6's ABI revealed needs to observe safety rules in the community and to exhibit proper social behavior with the following written in comments, "had not been to a public event just yet with staff."</p> <p>Interviews on 3/26/19 with the qualified intellectual disabilities professional (QIDP) verified client #6 could benefit from additional</p>	W 227		

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W 227	Continued From page 2	W 227		
W 382	<p>formal objectives.</p> <p>DRUG STORAGE AND RECORDKEEPING CFR(s): 483.460(l)(2)</p> <p>The facility must keep all drugs and biologicals locked except when being prepared for administration.</p> <p>This STANDARD is not met as evidenced by: The facility failed to assure all drugs and biologicals were kept locked except when being prepared for administration as evidenced by observation and interview. The finding is:</p> <p>Medications were not kept locked.</p> <p>During observations of medication administration in the home on 3/26/19 at 7:50 AM, staff left the medication area with a client. During this time, pill packs of client medications were left unlocked, out on a desk, in the medication area.</p> <p>Interview on 3/26/19 at 8:00 AM with the staff (G) involved revealed they have been trained to ensure the medications are locked and secured before leaving the area.</p> <p>Interview on 3/26/19 with the Qualified Intellectual Disabilities Professional (QIDP) and the Home Manager confirmed medication technicians have been trained to ensure the medications are locked and secured before leaving the area during medication administration.</p>	W 382	<p>W382</p> <p>The Nurse will in-service all staff on ensuring all medications are kept locked and not left unattended when they are not being administered. The clinical team will monitor through Medication Administration observation and interaction Assessments 2x a week for one month and then on a routine basis. In the future, the Qualified Professional will ensure all medications are remain locked and not left unattended when not being administered.</p> <p>5/25/19</p>	