

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

PRINTED: 04/25/2019
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 34G270	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED R-C 04/25/2019
NAME OF PROVIDER OR SUPPLIER VOCA-SIXTH STREET GROUP HOME			STREET ADDRESS, CITY, STATE, ZIP CODE 201 NORTH SIXTH STREET SANFORD, NC 27330	
(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 000	INITIAL COMMENTS	W 000		
W 130	<p>A revisit was conducted on 4/25/19 for all previous deficiencies cited on 3/5/19. All deficiencies have been corrected, but new noncompliance was found. The facility is not compliance with all regulations surveyed.</p> <p>PROTECTION OF CLIENTS RIGHTS 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: Based on observations, record review and interviews, the facility failed to ensure privacy for 2 of 2 clients (#2, #6) residing in the home. The findings are:</p> <p>Clients #2 and #6 were not afforded privacy while using the bathroom.</p> <p>During observations in the home on 4/25/19 at 8am, client #6 self propelled herself into the bathroom while in her wheelchair. Further observations revealed client #2 coming around the corner where the toilet is located and pulling up his pants. Further observations revealed while client #2 independently situated herself on the toilet, client #6 stood in the mirror while client #2 used the toilet. At 8:02am, client #6 exited the bathroom. Client #2 called out "Can I have some toilet paper please" from 8:02 until 8:04am. The toilet was heard to flush at 8:05am and client #2 exiting the bathroom one minute later. Additional observations revealed while both clients #2 and #6 were in the bathroom, a chair was used to</p>	W 130	<p>W.130 This deficiency will be corrected by the following actions:</p> <ul style="list-style-type: none"> A. All ISP will be reviewed and assessed B. Privacy assessment will be completed on all people served C. Privacy will be afforded, given and encouraged by all people being served. D. Staff will be in-services on ensuring privacy for all people served. E. Residential Manager will monitor one time a week. F. Qualified Professional will monitor one time a week. 	06.24.2019

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE: Marilyn Wh... (Signature) TITLE: Executive Director (X6) DATE: 4/22/19

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 130	<p>Continued From page 1 . keep the door open.</p> <p>During an interview on 4/25/19, Staff A revealed both clients #2 and #6 need to be verbally prompted by staff to shut the bathroom door for privacy.</p> <p>During an interview on 4/25/19, the home manager (HM) stated, "Staff should be monitoring and assisting clients in the bathroom." Further interview revealed client #2 does know about personal space, but she still needs prompts from staff. The HM revealed client #6 needs prompting from staff to ensure the bathroom door is closed for privacy.</p> <p>Review on 4/25/19 of client #2's individual program plan (IPP) dated 8/21/18 stated, "...she often has to be re-directed to respect the personal space and boundaries of others.</p> <p>Review on 4/25/19 of client #2's community/home life assessment dated 7/30/18 revealed she needs verbal cues to observe privacy.</p> <p>Review on 4/25/19 of client #6's IPP dated 4/3/19 stated, "[Client #6] will be trained informally on ensuring privacy practices."</p> <p>Review on 4/25/19 of client #6's community/home life assessment dated 3/28/19 revealed he is dependent on staff to ensure his privacy.</p> <p>During an interview on 4/25/19, the qualified intellectual disabilities professional (QIDP) revealed both clients #2 and #6 need verbal cues to close the bathroom door for privacy.</p>	W 130			
W 455	INFECTION CONTROL	W 455			

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W 455	<p>Continued From page 2 CFR(s): 483.470(l)(1)</p> <p>There must be an active program for the prevention, control, and investigation of infection and communicable diseases.</p> <p>This STANDARD is not met as evidenced by: Based on observations and interviews, the facility failed to ensure that the infections control prevention procedures were carried out. This potentially affected all clients residing in the home. The finding is:</p> <p>Precautions were not taken to promote client health and prevent possible cross-contamination.</p> <p>During observations in the home on 4/25/19 at 8:02am, client #6 exited the bathroom after using the toilet without washing his hands. Further observations revealed client #6 then went into the kitchen and standing next to Staff A. Additional observations revealed client #2 exiting the bathroom at 8:06am after using the bathroom and not washing her hands. Further observations revealed there were no paper products in the bathroom for the clients to dry their hands.</p> <p>During an interview on 4/25/19, Staff A revealed both clients #2 and #6 need verbal prompts to wash their hands. Further interview revealed the staff in the home is responsible to ensuring papertowels are kept stocked in the bathrooms for the clients.</p> <p>During an interview on 4/25/19, the home manager (HM) reported, "Staff should be monitoring an assisting clients in the bathroom and staff are responsible for keeping papertowels</p>	W 455	<p>W.455 This deficiency will be corrected by the following actions:</p> <ul style="list-style-type: none"> A. All precautions will be taken to ensure health and safety of all people served. B. Protective intervention . equipment/items will be provided and accessible to prevent cross contamination. C. All people served will be in service on equipment/items D. All staff will be in-service on their equipment/items working conditions, an teaching people served on the use of said equipment E. Residential Manager will monitor one time a week. F. Qualified Professional will monitor one time a week 	06.24.2019	

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W 455	<p>Continued From page 3 in the bathrooms."</p> <p>Review on 4/25/19 of client #2's community/home life assessment dated 7/30/18 revealed she needs verbal cues for lathering soap, rinsing/drying her hands and washing her hands after using the toilet.</p> <p>Review on 4/25/19 of client #6's community/home life assessment dated 3/28/19 revealed he is independent in lathering soap and rinsing hands, but needs a verbal cue to wash his hands after using the toilet.</p> <p>During an interview on 4/25/19, the qualified intellectual disabilities professional (QIDP) confirmed both clients #2 and #6 need verbal prompting the wash their hand after using the bathroom.</p>	W 455			