PRINTED: 05/02/2019 FORM APPROVED OMB NO. 0938-0391

	OF DEFICIENCIES F CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	1 ' '	IPLE CONSTRUCTION		(X3) DATE SURVEY COMPLETED	
		34G354	B. WING _			05/01/2019	
	ROVIDER OR SUPPLIER OAD HOME			STREET ADDRESS, CITY, STATI 20 EMORY ROAD ASHEVILLE, NC 28806	E, ZIP CODE		
(X4) ID PREFIX TAG	(EACH DEFICIENC)	ATEMENT OF DEFICIENCIES Y MUST BE PRECEDED BY FULL .SC IDENTIFYING INFORMATION)	ID PREFI TAG	(EACH CORRECTI CROSS-REFERENCI	LAN OF CORRECTION VE ACTION SHOULD B ED TO THE APPROPRIA FICIENCY)		
E 004	CFR(s): 483.475(a) [The [facility] must co Federal, State and loo preparedness require develop establish and emergency prepared requirements of this s * [For hospitals at §48 §485.625(a):] The [howith all applicable Fedemergency prepared [hospital or CAH] must comprehensive emergency prepared [hospital or CAH] must be [mospital or CAH] must	ements. The [facility] must display maintain a comprehensive mess program that meets the section.] 32.15 and CAHs at ospital or CAH] must comply deral, State, and local mess requirements. The set develop and maintain a gency preparedness me requirements of this li-hazards approach. aredness program must mited to, the following The [facility] must develop regency preparedness plan red], and updated at least set \$494.62(a):] Emergency ity must develop and cy preparedness plan that and updated at least mot met as evidenced by: acility records and staff failed to maintain their by reviewing and updating	E	004			

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

TITLE

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.

	DF DEFICIENCIES CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	I ' '	IPLE CONSTRUCTION		(X3) DATE SURVEY COMPLETED	
		34G354	B. WING _		05	5/01/2019	
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E 004	and included docume with staff training date review of the 12/2017 administrative/manage numbers included stathe facility when the E 12/2017 and were no facility. Contact informadministrative/manage included in the plan in conducted on 4/1/19 of disabilities profession manager revealed the current plan available documentation was a updates to this plan. EP Training Program CFR(s): 483.475(d)(1) (1) Training program. ASCs, PACE organization and dialysis facilities] (i) Initial training in empolicies and procedur staff, individuals proviarrangement, and volexpected role. (ii) Provide emergence least annually. (iii) Maintain documer (iv) Demonstrate staff procedures. *[For Hospitals at §48 at §491.12:] (1) Trainin or RHC/FQHC] must	cent EP was dated 12/2017, intation of a tabletop drill and 11/15/17. Continued EP revealed the ement staff contact iff who were employed by EP was implemented in longer employed by the mation for current ement staff was not in use currently. Interviews with the qualified intellectual all and the group home in 12/2017 EP was the most and no further evailable related to any The [facility, except CAHs, eations, PRTFs, Hospices, must do all of the following: Intergency preparedness es to all new and existing ding services under unteers, consistent with their interpretation of the training. It knowledge of emergency is entirely program. The [Hospital	E				

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:		(X2) MULTIPLI A. BUILDING	E CONSTRUCTION	(X3) DATE SURVEY COMPLETED		
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E 037	staff, individuals pro arrangement, and vexpected roles. (ii) Provide emerger least annually. (iii) Maintain documiciv) Demonstrate staprocedures. *[For Hospices at §4 hospice must do all (i) Initial training in expolicies and procedures and procedures employees, services under arrangement expected roles. (iii) Demonstrate staprocedures. (iii) Provide emerger least annually. (iv) Periodically revidemergency preparedemest annually. (iv) Periodically revidemergency preparedement employees (including special emphasis plants procedures necessated to the services and procedures. *[For PRTFs at §44 program. The PRTF (i) Initial training in expolicies and procedustaff, individuals program arrangement, and vexpected roles. (ii) After initial training preparedness training arrangement staff.	ures to all new and existing viding on-site services under colunteers, consistent with their and preparedness training at entation of the training. If knowledge of emergency It 8.113(d):] (1) Training. The of the following: It mergency preparedness and individuals providing at ewand rehearse its dness plan with hospice g nonemployee staff), with acced on carrying out the ary to protect patients and I.184(d):] (1) Training must do all of the following: It mergency preparedness ares to all new and existing viding services under colunteers, consistent with their	E 037			

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E 037	*[For PACE at §460.8 organization must do (i) Initial training in en policies and procedur staff, individuals proviarrangement, contract volunteers, consistent (ii) Provide emergence least annually. (iii) Demonstrate staff procedures, including what to do, where to go case of an emergence (iv) Maintain document *[For CORFs at §485 CORF must do all of (i) Provide initial training preparedness policies and existing staff, ind under arrangement, a with their expected ro (ii) Provide emergence least annually. (iii) Maintain document (iv) Demonstrate staff procedures. All new pand assigned specific the CORF's emergent their first workday. The	ntation of all emergency 3. 44(d):] (1) The PACE all of the following: nergency preparedness ses to all new and existing iding on-site services under stors, participants, and it with their expected roles. by preparedness training at 5 knowledge of emergency informing participants of go, and whom to contact in by. 168(d):](1) Training. The the following: ing in emergency is and procedures to all new ividuals providing services and volunteers, consistent ales. by preparedness training at 1 knowledge of emergency bersonnel must be oriented a responsibilities regarding cy plan within 2 weeks of the training program must the location and use of	E	037			

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E 037	The CAH must do a (i) Initial training in a policies and proced reporting and exting and where necessa personnel, and gue cooperation with fire authorities, to all ne individuals providing and volunteers, cor roles. (ii) Provide emerger least annually. (iii) Maintain docum (iv) Demonstrate sta procedures. *[For CMHCs at §44 CMHC must provide preparedness polici and existing staff, ir under arrangement with their expected documentation of th demonstrate staff k procedures. Therea emergency prepare annually. This STANDARD is Based on review o relative to the emer and staff interviews emergency prepare annually. The findin Review of the facilit	all of the following: emergency preparedness ures, including prompt guishing of fires, protection, ury, evacuation of patients, ests, fire prevention, and efighting and disaster ew and existing staff, g services under arrangement, esistent with their expected ency preparedness training at mentation of the training. aff knowledge of emergency es and procedures to all new endividuals providing services, and volunteers, consistent roles, and maintain ene training. The CMHC must enowledge of emergency effer, the CMHC must provide endness training at least es not met as evidenced by: f the facility's training program gency preparedness plan (EP) , the facility failed to provide endness training for staff at least	E 037			

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E 037	and included docume with staff training date review of the 12/2017 documentation of furt emergency prepared on 5/1/19 with the quaprofessional and the grevealed no knowledge provided to staff relationing on 11 further verified no documentation indicate staff had been preparedness plan sintraining was provided INDIVIDUAL PROGR CFR(s): 483.440(c)(4). The individual program objectives necessary as identified by the control of the staff training was provided INDIVIDUAL PROGR CFR(s): 483.440(c)(4).	cent EP was dated 12/2017, intation of a tabletop drill and 11/15/17. Continued if EP revealed no further ther staff training related to mess. Interviews conducted alified intellectual disabilities group home manager ge of training having been to the EP since the interviews cumentation was available to in trained on the emergency make the original inservice on 11/15/17.	W 2	227			
	Based on observation staff interview, the perfailed to have sufficient identified needs related pre-vocational or educe sampled clients (#1, #100-sampled clients (#1, #100-sa	cational skills for 3 of 3 #3 and #6) and 3 #2, #4 and #5). The					

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W 227	intellectual disabilities the home manager at the clients had media morning. The home clients would be attested to be recycling center. Continued observation 4/30/19 at 3:00 PM recycling to be present at the regroup home managed due to a behavior involved and clients #3, group home. Interview administrator on 4/30/2 amount of time all cliprogram had been remonths due primarily home and at the vocinterview with the howere no longer assis Wheels and indicated attend the vocational to 2 hours only. Review of the record revealed a PCP date within the PCP indicated worker and could be job. The PCP also in stay busy and works vocational center exciting. The PCP also earn money and looked.	terview with the qualified is professional (QIDP) and it that time revealed some of cal appointments during the manager indicated the inding the vocational program is up recycling and take it to constant the group home on evealed clients #3, #4 and #6 inome. Interview with the rrat that time revealed that colving client #3, all six clients itional center on 4/30/19. 2 and #5 went to the grocery #4 and #6 stayed at the	W 22				

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W 227	objectives. Continue revealed an education behavioral inventory ABI indicated the clies working in an interact tasks, reciting the algorithm work schedule. Interconfirmed the client of educational, pre-vocational, pre-vocational or starting self on as the QIDP on 5/1/19 one objective related pre-vocational or vocational or vocational or vocational or vocational or vocational or vocational or preventional objective for identifying continued review of the only one educational objective for identifying continued review of the related to numerical sprinting and reading, confirmed client #5 h	vocational or vocational d review of the PCP nal/vocational adaptive (ABI) dated 3/20/19. The nt had needs related to tive setting and completing shabet and following a daily view with the QIDP on 5/1/19 did not have any current ational or vocational for client #1 on 5/1/19 d 8/24/18. Further review of a client had only one ational, vocational objective of 30 minutes. Continued evealed an ABI dated 3/31/19 that had needs for learning inding as a hobby, sorting and signments. Interview with confirmed client #1 had only to educational,	W 2	27		

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W 227	Continued From pag	ne 8	W 2	227			
	revealed a PCP date the 6/28/18 PCP revealed a PCP date the 6/28/18 PCP revealed and pre-vocational pre-vocation which was for client minutes while at the review of the PCP redocumenting client deducation/pre-vocation identifying name and working in a parallel interactive setting, cappropriate material a pattern, keeping westroying work mat a supervisor. Intervision in the properties of the previous destroying work mat a supervisor. Intervision in the previous destroying work mat a supervisor. Intervison in the previous destroying work mat a supervisor. Intervison in the previous destroying work mat a supervisor. Intervisor in the previous destroying work mat a supervisor. Intervisor in the previous destroying work mat a supervisor. Intervisor in the previous destroying work mat a supervisor in the previous destroying work mat a supervisor. Intervisor in the previous destroying work mat a supervisor in the	If for client #2 on 5/1/19 ad 6/28/18. Further review of ealed client #2 had only one ational/vocational objective #2 to stay on task for 15 vocational center. Continued evealed an ABI dated 4/18/19 #2's needs in the area of on/vocation included digender, working alone, setting, working in an ompleting tasks, selecting s, sequencing materials with ork area clean, not erials and seeking help from ew with the QIDP on 5/1/19 had only one objective related ocational/vocational skill					
	revealed a PCP date the PCP revealed cl educational/pre-voca which was for client independently. Cont PCP revealed an AE client #3 has needs education/pre-vocational stating the stating the current myear. Interview with confirmed client #2 has a property or the property of the property	ational/vocational objective #3 to begin working on a task inued review of the 9/11/18 Il dated 4/10/19 documenting in the area of on/vocational skill acquisition current day of the week, inonth and stating the current					

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W 227	Continued From page acquisition. Review of the record	e 9 for client #4 on 5/1/19	W	227			
W 247	revealed a PCP dated the PCP revealed clie educational/pre-vocat which was for client # staff at the vocational Continued review of t contained a Habilitatic which documented clivocational center for pinformal goals in the apre-vocational skills, management. Interviconfirmed client #2 hat to educational/pre-vocacquisition. INDIVIDUAL PROGR CFR(s): 483.440(c)(6) The individual prograt opportunities for client self-management. This STANDARD is reased on observation interview, the facility fin the home (#1, #2, #provided opportunities management relative or vocation. The findividual progration interview, the facility fin the home (#1, #2, #provided opportunities management relative or vocation. The findividual progration at the validation of the group in the grou	d 2/28/19. Further review of ent #4 had only one citional/vocational objective 4 to engage with clinical center for 15 minutes. The 2/28/19 PCP revealed it on Evaluation dated 4/10/19 cient #4 currently attends the ore-vocational training with areas of increasing work behaviors and money ew with the QIDP on 5/1/19 and only one objective related cational/vocational skill AM PLAN (vi) m plan must include t choice and not met as evidenced by: n, record review and staff railed to assure 6 of 6 clients 43, #4, #5 and #6) were as for choice and self to education, pre-vocation ings are:	W	247			

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W 247	morning. The home clients would be attered later in the day to pict the recycling center. Continued observation 4/30/19 at 3:00 PM into be present at the lagroup home managed due to a behavior involved in the did not visit the voca linstead, clients #1, # store and clients #3, group home. Interview administrator on 4/30 amount of time all cliprogram had been remonths due primarily home and at the voca interview with the howere no longer assist Wheels or "Baskets" clients did attend the usually for 1 to 2 house Review of the group 2019 revealed all cliescheduled to go to the days out of the mont volunteer for "Basket month. Review of the for February 2019 reattended the vocation month, and client #6 center three times due the group home cale	cal appointments during the manager indicated the nding the vocational program is up recycling and take it to one at the group home on evealed clients #3, #4 and #6 nome. Interview with the r at that time revealed that rolving client #3, all six clients tional center on 4/30/19. 2 and #5 went to the grocery #4 and #6 stayed at the ew with the facility 0/19 revealed that the ents attended the vocational educed over the past several at to behaviors at the group actional center. Continued me manager revealed clients ting with delivering Meals on and indicated that when the vocational center, it was ars only. The manager indicated that when the vocational center for 8 in and were scheduled to its for 8 days out of the evocational center census wealed client #5 only and center 4 times during the only attended the vocational uring the month. Review of	W 24	7			

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W 247	the month. Review of census for March 20 attended the vocation the month, client #4 af #5 only attended 4 tin attended 5 times. Recalendar for April 20 home were schedule center for only 8 days other educational or Review of the vocational center 3 till Review of the record revealed a PCP date within the PCP indicated within the PCP indicated within the PCP also in stay busy and works vocational center excitime. The PCP also earn money and look review of the PCP reany educational, preobjectives. Interview revealed client #6 has behaviors and had be day program recently Review of the record revealed a PCP date within the PCP indicated money at work and of Further review of the only one educational	d to volunteer 3 days out of of the vocational center 19 revealed client #2 hal center only 3 times during only attended 4 times, client mes and client #5 only eview of the group home 19 revealed all clients in the d to go to the vocational so out of the month with no vocational specific options. Onal center census for April #6 only attended the mes during the month. for client #6 on 5/1/19 d 6/16/18. Documentation ated the client is a hard very focused once given a adicated the client liked to the whole time while at the cept during lunch and snack indicated client #6 likes to as forward to payday. Further vealed client #6 did not have evocational or vocational or with the QIDP on 5/1/19 d started having more een refusing to attend the	W 24				

	OF DEFICIENCIES F CORRECTION	()		1, ,	(X3) DATE SURVEY COMPLETED	
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NAME OF PROVIDER OR SUPPLIER EMORY ROAD HOME				STREET ADDRESS, CITY, STATE, ZIP CODE 20 EMORY ROAD ASHEVILLE, NC 28806		
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W 247	revealed a PCP dated the PCP revealed it of Evaluation document and using the shredd center, where he earn Evaluation further state educational programs 9/11/18 PCP revealed educational, pre-vocato begin working on a Interview with the horon 5/1/19 confirmed a attending the day proonly 1-2 hours per dateducational/vocational decreased recently, of from clients #3, #4, # confirmed all clients he education/vocation. To assure opportunition management related or vocation were proved EVACUATION DRILL CFR(s): 483.470(i)(1). The facility must hold quarterly for each shift of employees. The shift of employees.	for client #3 on 5/1/19 d 9/11/18. Further review of ontained a Habilitation ing client #3 enjoys recycling er while at the vocational ns income. This Habilitation ited client #3 also enjoys his s. Continued review of the d client #3 has only one ational, vocational objective in activity independently. The manager and the QIDP all six clients had been gram less frequently and for injury, and that other al opportunities had flue primarily to behaviors and #6. The QIDP also had one or no objectives for Therefore, the facility failed the for choice and self to education, pre-vocation wided. S evacuation drills at least fit of personnel. The mot met as evidenced by: acility records and staff failed to hold evacuation by for the second and third fine findings are:	W 2			
	Review of the facility'	s evacuation drill reports for				

AND DLAN OF COPPECTION IDENTIFICATION NUMBER		(X2) MULT A. BUILDIN	TIPLE CONSTRUCTION		(X3) DATE SURVEY COMPLETED	
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W 440	the past survey year of this review revealed survey year (May, Jurevacuation drills were employees; during the survey year (August, 2018) no evacuation shift of employees; durivey year (Novemb December 2019) no effor the 3rd shift of emfourth quarter of the semantial March and April 2019 held for the 3rd shift of the reports for the past survey year (Novemb December 2019) no effor the 3rd shift of the 3rd shift of the 3rd shift of the past surveyed, during the AM, was conducted to period of over six more most recent evacuation drill employees. Interview conducted to manager on 4/30/19 a shift of staff are scheduntil 11:00 PM. This evacuation drills had shift of employees duriting the group home shift of staff are scheduntil 7:00 AM. This in evacuation drills had shift of employees during the surveyed the surveyed and the surveyed the sur	was conducted on 4/30/19. during the first quarter of the ne and July 2018) no sheld for the 2nd shift of se second quarter of the September and October drills were held for the 2nd uring the third quarter of the er, December 2018 and evacuation drills were held ployees; and during the urvey year (February,) no evacuation drills were of employees. facility's evacuation drill urvey year revealed the most I held for the 3rd shift of the hours of 11:00 PM to 7:00 on 10/25/18, Therefore, a on this has passed since the on drill was held for 3rd shift with the group home and 5/1/19 verified the 2nd duled to work from 3:00 PM interview further verified not been held for the 2nd duled to work from 11:00 PM of the condition of the 3rd duled to work from 11:00 PM of the condition of the 3rd duled to work from 11:00 PM of the condition of the 3rd of the third and fourth	W 4			
W 475	MEAL SERVICES		W 4	175		

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		34G354	B. WING _		05	/01/2019	
NAME OF PROVIDER OR SUPPLIER EMORY ROAD HOME				STREET ADDRESS, CITY, STATE, ZIP COD 20 EMORY ROAD ASHEVILLE, NC 28806	•	1 33/01/2310	
(X4) ID PREFIX TAG	(EACH DEFICIEN	STATEMENT OF DEFICIENCIES NCY MUST BE PRECEDED BY FULL R 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 475	This STANDARD is Based on observatoreview, the facility for during the breakfast eating utensils for 5 #2, #3, #4, and #5). Observations in the AM revealed all the client #6, sitting down preparing to eat the french toast, sausant the table were of a utensil. Further of group home manage cutting the french to Continued observation that the french to the continued observation of the french to Continued observation of the french to the continued observation of the french to Continue	ed with appropriate utensils. Is not met as evidenced by: ion, interview and record ailed to ensure place settings t meal included appropriate of 6 clients in the home (#1, The finding is: I group home on 5/1/19 at 8:00 clients in the home except for what the dining table be breakfast meal consisting of ge and a beverage. All clients beserved to have only a fork as beservations revealed the tent to assist client #3 with beast with a pizza cutter. I clions at 8:05 AM revealed I that the home manager I mg his french toast with the ting "it's hard to cut with a rvations at 8:12 AM revealed of french toast into bite size des after waiting 10 minutes. Kitchen at 8:15 AM revealed	W 4	,			
	revealed current per included current ad All client's except for independent with use Interview with the q	ds for client's #1 through #5 rson centered plans which aptive behavior inventories. or client #3 were described as sing a knife to cut. ualified intellectual disabilities /19 confirmed client's #1					

	NT OF DEFICIENCIES (X1) PROVIDER/SUPPLIER/CLIA (X2) MULTIPLE CONSTRUCTION IDENTIFICATION NUMBER: A. BUILDING		(X3) DATE SURVEY COMPLETED		
		34G354	B. WING		05/01/2019
NAME OF PROVIDER OR SUPPLIER EMORY ROAD HOME				STREET ADDRESS, CITY, STATE, ZIP CODE 20 EMORY ROAD ASHEVILLE, NC 28806	
(X4) ID PREFIX TAG	(EACH DEFICIENC	ATEMENT OF DEFICIENCIES Y MUST BE PRECEDED BY FULL LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORR (EACH CORRECTIVE ACTION SI CROSS-REFERENCED TO THE AF DEFICIENCY)	HOULD BE COMPLETION
W 475	through #5 were all c independence with th Therefore, the facility	apable of at least partial le use of a knife for cutting.	W 47	75	