STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	34G056	A. BUILDING _____ B. WING _____	05/21/2019

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
SKILL CREATIONS OF KENANSVILLE	200 SOUTH STOKES STREET KENANSVILLE, NC 28349

(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 242	INDIVIDUAL PROGRAM PLAN CFR(s): 483.440(c)(6)(iii) The individual program plan must include, for those clients who lack them, training in personal skills essential for privacy and independence (including, but not limited to, toilet training, personal hygiene, dental hygiene, self-feeding, bathing, dressing, grooming, and communication of basic needs), until it has been demonstrated that the client is developmentally incapable of acquiring them. This STANDARD is not met as evidenced by: Based on observation, record review and interview the facility failed to assure the individual program plan (IPP) for 1 of 3 audit clients (#1) included training in personal skills essential for independence in privacy. The finding is: Staff failed to develop training for audit client #1 in the area of privacy. During evening observations on 5/20/19 in the facility at 6:31pm audit client #1 went to his bedroom and started to undress. He was naked from the waist down. His bedroom door was open. A female client's bedroom is across the hallway from audit client #1. Her bedroom door was open and she was watching television in her bedroom. Staff were not present for about 10 minutes. During morning observations on 5/21/19 in the facility at 8:50am audit client #1 was in his bedroom. The bedroom door was open. He began to change clothing. He was naked from the waist down. Several clients and staff went back and forth in the hallway.	W 242		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE | (X6) DATE

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W 242	Continued From page 1 Review on 5/20/19 of audit client #1's IPP dated 1/10/19 revealed he can close the door for privacy with prompts from staff. Review of his training objectives revealed the following: Will make his bed with gestures from 5 consecutive months, Will complete morning routine to clean his bedroom for 7 consecutive sessions and will shave his face with gestures for 3 consecutive sessions. There was no training identified in the area of the privacy. Interview on 5/21/19 with the qualified intellectual disabilities professional (QIDP) confirmed audit client #1 does like to change his clothing frequently. Additional interview confirmed there is no training identified for audit client #1 in the area of privacy.	W 242		
W 249	PROGRAM IMPLEMENTATION CFR(s): 483.440(d)(1) 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. This STANDARD is not met as evidenced by: Based on observations, record review and interviews, the facility failed to ensure 1 of 3 audit clients (#1) received a continuous active treatment plan consisting of needed interventions and services as identified in the individual	W 249		

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W 249	Continued From page 2	W 249		

program plan (IPP) in the areas of implementing formal objectives in home living and failed to assist him with toothbrushing. The findings are:

a) Staff did not implement formal objectives for client #1 as per his IPP.

During observations on 5/20/19 at 4pm, staff had group 1 in the dayroom cleaning out grooming kits. Staff C indicated that client #1 was in this group. Client #1 briefly came down to the dayroom area and then returned to his bedroom around 4pm to watch television. Observation of audit client #1 in his bedroom revealed his bed was unmade, clothing was wadded up and hanging out of his dresser. There were socks and underwear on the floor of his bedroom. Audit client #1 remained in his bedroom until 4:30pm when staff asked him to go participate in painting a picture.

Review on 5/20/19 of the schedule for group 1 indicated the afternoon activity was for home living activities and arts and crafts prior to supper.

During observations on 5/20/19 at the facility at 6:30pm revealed audit client #1 in his bedroom #9 with his bedspread off of his bed, drawers to his dresser were open with wads of clothing hanging out of the drawers. Socks and underwear were on the floor of his bedroom.

During observations on 5/21/19 at 8:38am audit client #1 was with staff D in his bedroom. Staff D asked him to help make his bed, he briefly held the sheet and then went into his closet to look for a shirt. Staff D continued to make his bed without prompting and then shut the bedroom door as audit client #1 indicated he was changing his

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W 249	Continued From page 3 clothing. Review on 5/20/19 of audit client #1's IPP dated 1/10/19 revealed the following training objectives: Will make his bed with gestures from 5 consecutive months, will complete morning routine to clean his bedroom for 7 consecutive sessions and will shave his face with gestures for 3 consecutive sessions. Review on 5/21/19 at 9am of audit client #1's data book revealed no data taken on 5/21/19 for the formal programs of making his bed and completing the morning routine of to clean his bedroom. Interview on 5/21/19 with the qualified intellectual disabilites professional (QIDP) revealed audit client #1's formal objectives are current and should be trained daily. b) Direct care staff did not assist audit client #1 with toothbrushing. During observations on 5/20/19 after supper direct care staff C asked client #1 to go to his bedroom and brush his teeth. Audit client #1 left the dayroom/dining area and walked down the hallway telling himself, "You need to brush your teeth." Immediate interview with audit client #1, the surveyor asked him if we could look in his grooming kit. He reached into his closet and handed the surveyor his grooming kit. There was no toothbrush. During morning observations on 5/21/19 audit	W 249		

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W 249	Continued From page 4 client #1 finished breakfast and took his dishes to a rolling cart and put them into a dishpan. Direct care staff D told audit client #1 to go to his bedroom and brush his teeth. Observations on 5/21/19 after breakfast revealed audit client #1 was in his bedroom. The surveyor asked him if he had brushed his teeth. he nodded, "yes." The surveyor asked him if we could look in his grooming kit. There was no toothbrush in his grooming kit. Audit client #1 was observed to board the van on 5/21/19, he smiled as he was carrying his bag to the van. Food debris was seen in his teeth. Review on 5/20/19 of audit client #1's IPP dated 1/10/19 revealed he requires assistance with grooming and toothbrushing to ensure he does a thorough job. Review on 5/20/19 of audit client #1's dental visit dated 8/20/18 revealed good oral hygiene and that he uses a "spin toothbrush". Interview on 5/21/19 with staff D revealed audit client #1 does have any restrictions on personal belongings and has access to his personal hygiene items. Additional interview revealed audit client #1 needs assistance with toothbrushing.	W 249		
W 369	DRUG ADMINISTRATION CFR(s): 483.460(k)(2) The system for drug administration must assure that all drugs, including those that are self-administered, are administered without error. This STANDARD is not met as evidenced by:	W 369		

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W 369	Continued From page 5 Based on observations, record review and interview, the facility failed to ensure all medications were administered without error. This affected 1 of 3 clients (#4) observed during medication administration. The finding is: Nursing staff failed to administer client #4's Buspirone as ordered a by the physician. During the medication administration pass on 5/20/19 at 3:50pm the Nurse administered Buspirone 30mg. (1/2) pill, Seroquel 100mg. (1/2) pill and artificial tears (1) drop to each eye to audit client #4. Review on 5/21/19 of audit client #4's physician orders dated 5/1/19 revealed the following to be administered at 4pm: Seroquel 100mg. (1/2) pill and artificial tears (1) drop to each eye. Further review of the physician orders dated 5/1/19 revealed: Buspirone 30mg. (1/2) pill to be administered at 2pm. Interview on 5/21/19 with the facility Nurse revealed the facility's policy is that medications can be administered one hour before or one hour after the physician orders medication. Further interview revealed administering Buspirone at 3:50pm to audit client #4 would be outside the medication administration window as the physician ordered this medication to be given at 2pm.	W 369		