

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

PRINTED: 03/06/2019
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 34G180	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED 02/26/2019
NAME OF PROVIDER OR SUPPLIER GUILFORD #3			STREET ADDRESS, CITY, STATE, ZIP CODE 2600 PLEASANT RIDGE ROAD SUMMERFIELD, NC 27358		
(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 (#4) included objective training to meet the client's identified needs in the areas of meal prep skills. The finding is:</p> <p>Afternoon observations on 2/25/19 in the home from 3:40 PM to 4:05 PM revealed client #4 to sit and listen to his Walkman in the living room, to briefly participate in meal prep activities (mix bread crumbs into hamburger, empty Koolaid packet into pitcher and stir). Further observations from 4:10 PM to 5:00 PM revealed client #4 to rest on his bed in his room. Continued observations from 5:05 PM to 5:40 PM revealed client #4 to place table settings on the dining table, to eat his dinner meal for 20 minutes and return to his room soon after completing his dinner meal. Subsequent observations revealed client #4 to briefly participate in meal preparation activities for 5 minutes and listen to his Walkman for 20 minutes out of a total of 110 minutes.</p> <p>Morning observations on 2/26/19 in the home from 6:20 AM to 6:30 AM revealed client #4 to independently perform his morning activities of daily living (ADLs). Further observations from 6:35 AM to 7:10 AM revealed client #4 to walk</p>	W 227			

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MAR 11 2019

DHSR NH L & C
Black Mountain / WRO

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

Alexis Evans, QP

TITLE

Qualified Professional

(X6) DATE

3/8/19

Efficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that our 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>and to stand around in the living room, the hallway, the kitchen and the dining areas. Continued observations from 7:15 AM to 7:50 AM revealed client #4 to place clothing protectors on the dining table and to take a pitcher to the dining table. Further observations from 7:55 AM to 8:25 AM revealed client #4 to consume his breakfast, to stand in the hallway, and to rest in his room after complaining of feeling sick. Subsequent observations revealed client #4 was involved in activities for 20 minutes during this observation period of 110 minutes. The remainder of the observation period client #4 remained in his room or walked around the group home areas unengaged in activities or active treatment.</p> <p>Record review on 2/26/19 of client #4's PCP dated 10/22/18 revealed formal goals to include toothbrush, cleaning toilet, coin combination, state the days of the week, and a behavior support plan (BSP). Further review of client #4's PCP revealed he "responds well to praise and reinforcement for good behavior and participation in activities."</p> <p>Record review on 2/26/19 of client #4's current ABI revealed the following needs: prepares a salad, prepares frozen foods in microwave, prepares frozen food in oven, prepares canned foods in microwave, prepares canned foods in oven, prepares meat dishes in microwave, prepares fresh vegetables in microwave, and prepares fresh vegetables in oven.</p> <p>Record review on 2/26/19 of client #4's BSP revealed the following "Allow him sufficient time to respond, then give another verbal/gestural prompt. If he still has not cooperated or acknowledged the request, staff should use GENTLE physical prompting to help him start the task/activity."</p>	W 227	<p>W227</p> <p>The team will meet to determine the need for Meal Preparation objectives for client #4 based on the Adaptive Behavior Inventory. The Habilitation Specialist will ensure the recommendations are addressed in the form of a formal program as needed and 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 results of the team meetings. The clinical team will monitor 2x a week for 1 month then on a routine basis through Interaction Assessments and Mealtime Assessments to ensure participation and independence is encouraged for all people supported to participate in activities to their maximum potential. In the future the Qualified Professional will ensure all Person Centered Plans include objective training to address identified needs.</p>		

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W 227	Continued From page 2 Interviews on 2/25/19 and 2/26/19 with staff (2) revealed client #4 participates in some activities and spends time in his room. Further interview on 2/26/19 with the qualified intellectual disabilities professional (QIDP) verified client #4 could benefit from additional formal objectives.	W 227		
W 436	SPACE AND EQUIPMENT CFR(s): 483.470(g)(2) The facility must furnish, maintain in good repair, and teach clients to use and to make informed choices about the use of dentures, eyeglasses, hearing and other communications aids, braces, and other devices identified by the interdisciplinary team as needed by the client. This STANDARD is not met as evidenced by: Based on observation, record review and interview, the facility failed to furnish and to provide teaching relative to adaptive equipment for 1 of 3 sampled clients (#5). The findings is: The facility failed to ensure teaching and accessibility to adaptive equipment relative to hearing aids for client #5. Afternoon observations on 2/25/19 in the home revealed client #5 to wear her right ear hearing aid. Morning observations on 2/26/19 in the home revealed client #5 did not wear her right ear hearing aid. Review on 2/26/19 of client #5's person centered plan (PCP) dated 4/25/18 revealed she has hearing loss in her right ear. Further review	W 436	W436 The team will meet to determine and review the Adaptive Behavior Inventory for self-help skills in the use and care of a hearing aid for client #5. The Habilitation Specialist will implement a formal program for wear and proper care for the hearing aid for client #5. The Habilitation Specialist will train all staff on implementing the program. The Qualified Professional will modify the Person Centered Plan to address the area of need. The clinical team will monitor to ensure the wear and proper care of adaptive equipment for 2x a week for 1 month then on a routine basis via Personal Appearance Checklist and Interaction Assessments. In the future, Qualified Professional will ensure the Person Centered Plan address all people supported identified needs including the use and care of adaptive equipment.	

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W 436	Continued From page 3 revealed a health service goal titled "Chronic Ear Infections" and implemented by nursing on 11/3/17 identifies a plan of action for cleaning her hearing aid. Interview on 2/26/19 with staff (3) at 8:30 AM outside of the home during van loading, the surveyor asked staff why client #5 was not wearing her right ear hearing aid. Staff responded they forgot about it and stated her hearing aid is kept in the home's medication room to prevent client #5 from misplacing her hearing aid. Continued interview revealed client #5's legal guardian requested the hearing aid be kept in the medication room to keep client #5 from losing her hearing aid. Subsequent interview revealed client #5 has been wearing a hearing aid since her admission to the facility and she has misplaced several hearing aids since then. Interview with the qualified intellectual disabilities professional (QIDP) revealed client #5 has not had any past training to address the need to wear and to properly care for her hearing aid. Further interview with the QIDP revealed a health service goal implemented by nursing 11/3/17 is for staff. Continued interview with the QIDP verified client #5 could benefit from training regarding the use and the care of her hearing aid.	W 436			
W 476	MEAL SERVICES CFR(s): 483.480(b)(3) Food served to clients individually and uneaten must be discarded. This STANDARD is not met as evidenced by: Based on observation and interview, the facility	W 476			

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W 476	<p>Continued From page 4</p> <p>failed to ensure each place setting, during the dinner meal included appropriate eating utensils for 1 of 6 clients in the home (#4). The finding is:</p> <p>Observations on 2/25/19 at 5:08 PM in the home revealed client #4 seated at the dining table preparing to eat his dinner meal consisting of Salisbury Steak, mashed potatoes, green beans and fruit cup. Client #4 was observed to have a fork and a spoon as a part of the place setting. At 5:17 PM staff were observed to ask client #4 if he wanted "it cut" at which time client #4 to respond with "yes" and to also nod his head for yes. Further observations revealed staff did not provide client #4 with a knife at any time during his dinner meal. Continued observations revealed client #4 to cut his Salisbury Steak with his fork in large and small chunks throughout his dinner meal with no staff assistance until he had consumed all of his Salisbury Steak with his meal. Subsequent observations revealed client #4 to finish his dinner meal at 5:30 PM.</p> <p>Review of client #4's current adaptive behavior inventory (ABI) on 2/26/19 revealed using a knife for cutting and using the appropriate utensil for different foods are his strengths.</p> <p>Interview with staff (2) on 2/25/19 revealed client #4 should have received a knife to cut his food and were unsure if he could hold the knife and cut his food. Interview with the qualified intellectual disabilities professional (QIDP) on 2/26/19 confirmed client #4 can use a knife to cut his food and staff should have provided him with a knife to cut his food.</p>	W 476	<p>By: 04/27/19</p> <p>W476 The Qualified Professional will in-service staff on ensuring a full setting of eating utensils for client #4 and all people supported during mealtimes. The clinical team will monitor 2x a week for 1 month and then on a routine basis through Mealtime Assessments to ensure a full setting of eating utensils is available and utilized for client #4 and all people supported during all mealtimes. In the future, the Qualified Professional will ensure staff are trained to ensure a full setting of eating utensils for all people supported are available and utilized during mealtimes.</p>		