

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

PRINTED: 08/30/2019
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 34G141	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED 08/28/2019
NAME OF PROVIDER OR SUPPLIER FRANKLIN GROUP HOME			STREET ADDRESS, CITY, STATE, ZIP CODE 1101 FRANKLIN BLVD GASTONIA, NC 28054		
(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 249	<p>PROGRAM IMPLEMENTATION CFR(s): 483.440(d)(1)</p> <p>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.</p> <p>This STANDARD is not met as evidenced by: Based on observations, interviews and record review, the facility failed to ensure needed interventions in sufficient number and frequency were provided to support the achievement of objectives listed on the individual support plan (ISP) relative to communication for 1 of 3 sampled clients (#1). The finding is:</p> <p>Observations on 8/27/19 and 8/28/19 revealed client #1 to participate in various activities including assisting with meal preparation, participating in a game activity, participating in dinner and breakfast meals, and taking dishes to the kitchen. At no point during the observation was client #1 observed to be using any communication board or picture cue cards as she transitioned to various activities during the survey period.</p> <p>Review of the record for client #1 on 8/28/19 revealed an individual support plan (ISP) dated 8/1/19. Further review of the ISP revealed a communication objective with an 8/9/19 implementation date. Continued review of the communication objective stated that client #1 will</p>	W 249			

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

TITLE

(X6) DATE

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 249	Continued From page 1 use visual picture cues when starting a new activity. Further review of the ISP communication objective stated that staff will present the picture cue three times and once the activity is completed, client #1 will place the picture cue in a picture cue bag. Interview with the qualified intellectual disabilities professional (QIDP) on 8/28/19 verified that client #1 had a communication board with picture cue cards hanging on the wall in her bedroom. Further interview with the QIDP confirmed staff should have been implementing the program during both the afternoon and morning observations and as specifically prescribed.	W 249			
W 474	MEAL SERVICES CFR(s): 483.480(b)(2)(iii) Food must be served in a form consistent with the developmental level of the client. This STANDARD is not met as evidenced by: Based on observation, record review and interview, the facility failed to assure food was served in a form consistent with the developmental level for 1 of 3 sampled clients (#1). The finding is: Observations conducted on 8/27/19 at 4:40 PM revealed client #1 was seated at the dining table and assisted by staff A to serve herself marinated cucumber salad, a meatball sub sandwich and beverages, followed by pineapple fluff for dessert. Staff A was observed to slice open the sub roll and assist client #1 to scoop the meatball/sauce mixture onto the roll. Client #1 was subsequently observed to attempt to eat the sub sandwich by	W 474			

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W 474	Continued From page 2 picking it up in one hand and taking large bites of the sandwich. Further observations conducted on the morning of 8/28/19 at 7:55 AM revealed client #1 was assisted by staff B to take a plate containing two whole waffles with syrup and butter to the dining table and seat herself. Continued observations revealed client #1 pierced one waffle with her fork, then while holding the waffle on the fork begin to take large bites from around the edge of the waffle. Ongoing observations during the 8/28/19 breakfast meal revealed client #1 picked up the second waffle with her fingers and began taking large bites of the waffle until 8:12 AM when staff A passed by the table and assisted client #1 to cut the remainder of her waffle into bite-sized pieces using her fork. Review of the record for client #1, conducted on 8/28/19, revealed an individual support plan (ISP) dated 8/1/19 which contained a nutritional assessment dated 7/14/19 stating client #1 should receive an 1800 calorie diet with bite-sized consistency to prevent choking. Continued review of the record for client #1 revealed physician's orders dated 7/26/19 prescribing an 1800 calorie, low fat, low cholesterol diet with bite-sized consistency. Interview conducted on 8/28/19 with the qualified intellectual disabilities professional verified client #1 should receive an 1800 calorie diet with all food cut into bite-sized pieces to prevent choking.	W 474			
W 475	MEAL SERVICES CFR(s): 483.480(b)(2)(iv) Food must be served with appropriate utensils.	W 475			

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W 475	Continued From page 3 This STANDARD is not met as evidenced by: Based on observation, record review and interview, the facility failed to assure 1 of 3 sampled clients (#1) and 1 non-sampled client (#5) were provided with appropriate utensils to enable them to eat as independently as possible in accordance with their highest functioning level. The findings are: A. The facility failed to assure client #1 was provided with appropriate utensils during the breakfast meal on 8/28/19. Observations conducted on 8/28/19 at 7:55 AM revealed client #1 was assisted by staff B to take a plate containing two whole waffles with syrup and butter to the dining table and seat herself. Continued observations revealed client #1's place setting consisted of a regular plate, a cup and a fork. Further observations during the 8/28/19 breakfast meal revealed client #1 pierced one waffle with her fork, then while holding the waffle on the fork begin to take large bites from around the edge of the waffle. Ongoing observations during the 8/28/19 breakfast meal revealed client #1 picked up the second waffle with her fingers and began taking large bites of the waffle until 8:12 AM when staff A arrived at the table and assisted client #1 to cut the remainder of her waffle into bite-sized pieces using her fork. Review of the record for client #1, conducted on 8/28/19, revealed an individual support plan (ISP) dated 8/1/19 which contained a Comprehensive Functional Assessment (CFA) dated 11/2/18 documenting client #1 drinks from a cup and eats with a fork and spoon independently, and spreads and cuts with a knife with partial independence.	W 475			

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W 475	<p>Continued From page 4</p> <p>Interview conducted on 8/28/19 with the qualified intellectual disabilities professional (QIDP) verified client #1 should have been provided with a place setting consisting of a knife, fork and spoon during the breakfast meal on 8/28/19.</p> <p>B. The facility failed to assure client #5 was provided with the appropriate utensils during the breakfast meal on 8/28/19.</p> <p>Observations conducted on 8/28/19 at 7:20 AM revealed client #5 took his plate containing two waffles with syrup and butter to the dining table and seated himself. Client #5's place setting was observed to consist of a regular plate, a cup and a fork. Further observations during the 8/28/19 breakfast meal revealed client #5 used the fingers of his left hand to stabilize his waffles while he utilized his fork to pull each bite from the edge of the waffles.</p> <p>Review of the record for client #5, conducted on 8/28/19, revealed an ISP dated 1/22/19 which contained a CFA dated 2/8/18 documenting client #5 independently drinks from a cup, eats with a spoon and fork, and spreads and cuts with a knife.</p> <p>Interview conducted on 8/28/19 with the qualified intellectual disabilities professional (QIDP) verified client #5 should have been provided with a place setting consisting of a knife, fork and spoon during the breakfast meal on 8/28/19.</p>	W 475			