

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

PRINTED: 09/26/2019  
FORM APPROVED  
OMB NO. 0938-0391

| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION                                   |   | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:<br><br><b>34G150</b> | (X2) MULTIPLE CONSTRUCTION<br>A. BUILDING _____<br><br>B. WING _____  |                      | (X3) DATE SURVEY COMPLETED<br><br><b>09/24/2019</b> |
|--|---|---|---|----------------------|---|
| NAME OF PROVIDER OR SUPPLIER<br><br><b>IRENE WORTHAM RESIDENTIAL CENTER-AZALEA</b> |   |   | STREET ADDRESS, CITY, STATE, ZIP CODE<br><b>16 AZALEA STREET<br/>ASHEVILLE, NC 28803</b>                        |                      |   |
| (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 247  | <p><b>INDIVIDUAL PROGRAM PLAN</b><br/>CFR(s): 483.440(c)(6)(vi)</p> <p>The individual program plan must include opportunities for client choice and self-management.<br/>This STANDARD is not met as evidenced by:<br/>Based on observation, record review and interview, the facility failed to ensure 5 of 6 clients residing in the home (#1, #2, #3, #4 and #5) were provided opportunities for choice and self management relative to meal preparation. The finding is:</p> <p>Observations in the group home on 9/23/19 at 4:15 PM through 5:00 PM revealed staff preparing tuna noodles, carrots, rolls/bread, and a hot pocket for client #1 in the kitchen for the dinner meal. Examples of meal preparation activities completed by staff included: obtaining cooking pans, ingredients to prepare tuna noodles, carrots and stirring and mixing foods. Continued observations revealed staff to prepare each client's meal in the kitchen, to place items in clients' individual plates, cut food items into pieces based on prescribed diets, and carry all food and drink items to the table. No client was observed to assist with food preparation or to carry food and drink items to the table.</p> <p>Observation on 9/24/19 at the group home at 5:30 AM through 6:45 AM revealed staff preparing scrambled eggs, muffins, and grits in the kitchen for the breakfast meal. Continued observation revealed staff to prepare each client's meal in the kitchen, to place items in clients' individual plates based on prescribed diets, and carry all food and drink items to the table. No client was observed to assist with food preparation or to carry food and drink items to the</p> | W 247   |   |                      |   |

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 247  | <p>Continued From page 1 table.</p> <p>Review of the record for client #1 revealed an individual program plan (IPP) dated 5/16/19. Review of the current IPP revealed the client is able to; feed independently, carries plate and cup to kitchen with verbal cues.</p> <p>Review of the record for client #2 revealed an IPP dated 2/14/19. Review of the current IPP revealed the client is able to follow simple commands, feeds independently, needs hand over hand assistance to serve, carries plate and cup to the sink with verbal cues, enjoys variety of movement activities and a helping hand to staff and peers.</p> <p>Review of the record for client #3 revealed an IPP dated 10/11/18. Review of the current IPP revealed the client is able to; feed independently, carries plate and cup to kitchen with verbal cues.</p> <p>Review of the record for client #4 revealed an IPP dated 10/11/18. Review of the IIP revealed the client is able to; feed independently, carries plate and cup to kitchen with verbal cues.</p> <p>Review of the record for client #5 revealed an IPP dated 2/14/19. Review of the IPP revealed the client is able to follow simple verbal commands, carries plate to kitchen with verbal cues and needs opportunities to participate in a variety of sensory activities to include opening containers in the kitchen.</p> <p>Interview with the qualified intellectual disabilities professional (QIDP) on 9/24/19 confirmed that all clients in the home were capable of assisting with meal preparation at some level. Interview with</p> | W 247   |   |                      |   |

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| W 247  | Continued From page 2<br>the QIDP further verified all clients residing in the home should be given the opportunity to participate in some aspect of meal preparation and service during each meal. | W 247  |   |   |