

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

PRINTED: 06/26/2019
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 34G264	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 06/12/2019
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NAME OF PROVIDER OR SUPPLIER HARTLAND GROUP HOME	STREET ADDRESS, CITY, STATE, ZIP CODE 2307 HARTLAND ROAD MORGANTON, NC 28655
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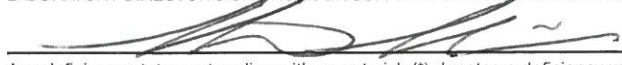
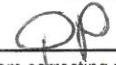
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W 249	<p>PROGRAM IMPLEMENTATION CFR(s): 483.440(d)(1)</p> <p>As soon as the interdisciplinary team has formulated a client's individual program plan, each client must receive a continuous active treatment program consisting of needed interventions 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, record review and staff interviews the facility failed to ensure an objective contained in the Individual Program Plan (IPP) for 1 of 3 sampled clients (#2) was implemented as prescribed related to communication. The finding is:</p> <p>Observations on 6/12/19 at 7:15 AM in the group home revealed client #2 sitting in a living room chair making the manual sign for "eat." Continued observations revealed staff D to verbally prompt client #2 to the medication room for morning medications. Further observations revealed client #2 to resist walking to the medication room and instead the client walked to the dining room table. Subsequent observation revealed staff D to verbally and physically prompt client #2 to walk from the dining room table to the medication room to which client #2 then complied.</p> <p>Observations at 8:15 AM on 6/12/19 revealed client #2 sitting in the living room after her breakfast meal. Continued observations revealed staff E to ask client #2 to go to the bathroom to</p>	W 249	<p>RECEIVED</p> <p>JUL - 5 2019</p> <p>DHSR NH L & C Black Mountain / WRO</p>	
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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

7/1/19

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 toilet and to brush her teeth to which the client refused. Further observations at 8:25 AM revealed staff E to again ask client #2 to walk to the bathroom for toileting. Client #2 again refused to accompany staff D to the bathroom. Subsequent observations at 8:45 AM revealed staff E to verbally and physically prompt client #2 to load the van for transport to day program of which the client complied. During all of the observations described, client #2 was not offered a model nor any manual signs from any staff member. Record review on 6/12/19 for client #2 revealed an (IPP) dated 9/4/18 containing an objective which stated "produce the target sign to increase expressive communication for the targeted task" and "when given a model and a verbal cue with the manual sign for toileting client #2 will imitate the staff member with 80% accuracy by 8/30/19. Interview with the facility qualified intellectual disabilities professional (QIDP) confirmed client #2 should have been given a model and a verbal cue for the manual sign for toileting, for medication administration, and for loading the van for transport.	W 249		8
W 460	FOOD AND NUTRITION SERVICES CFR(s): 483.480(a)(1) Each client must receive a nourishing, well-balanced diet including modified and specially-prescribed diets. This STANDARD is not met as evidenced by: Based on observation, interview and record review, the facility failed to assure that 1 of 3	W 460	Staff in the home will be reinserviced on how to properly train Client #2's communication objective for toileting. Staff will be in-serviced on training communication for Client #2 is implemented as prescribed. Staff will also be in-serviced on proper modeling and verbal cues for communication signs. The QP and/or designee will ensure compliance with this training through direct observation done on at least a weekly basis.	8/11/19

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W 460	<p>Continued From page 2</p> <p>sampled clients (#2) in the home received a nourishing, well balanced modified diet as prescribed. The finding is:</p> <p>Evening observations on 6/11/19 at 5:35 PM revealed client #2 to receive her dinner meal of chicken casserole, green vegetable, a whole slice of bread, beverages and an ice cream sandwich for dessert. Continued observations of the dinner meal revealed staff B to utilize a 2-ounce serving ladle to serve client #2 one 2-ounce serving of chicken casserole, and one 2-ounce serving of the green vegetable and 1 piece of bread. Further observations revealed staff B to ask staff A (who had prepared the meal), if client #2 should receive another ladle of the food items. Staff A answered "no." Continued review of the dinner meal revealed client #2 to pick up her whole piece of bread, eating large pieces at times. Further observations revealed client #2 to complete her entire dinner meal and dessert within 6 minutes and sign "eat" requesting additional food. Staff A stated "she can't have anything else." Client #2 was prompted to take her dinner plate to the kitchen sink by staff B. Client #2 was observed to refuse direction from staff B and signed "eat" several additional minutes while reaching for other client's food. No additional food was offered to client #2. Client #2 left the table at 6:00 PM with staff B, and sat in the living room continuing to sign "eat." Interview with staff B stated client #2 appears hungry often and signs for additional food after each meal.</p> <p>Interview with staff A who was working in the kitchen at 6:00 PM stated "client #2 only gets 1/2 portions because the client has cholesterol problems, that is all she can have." Continued interview with staff A revealed client #2 has been</p>	W 460			

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W 460	<p>Continued From page 3</p> <p>receiving 1/2 portions of food since she arrived at the group home 5-6 weeks ago." Interview with staff B who assisted client #2 stated she is "new to the group home and did not know the client's diet plan." Staff C located client #2's written food plan in the kitchen and stated "client #2 should have been served a chopped, low cholesterol diet, with regular size portions, with no restrictions on second helpings." Interview with the group home manager at 6:10 PM stated "staff have only known client #2 for 6 weeks and no one was familiar with her diet plan, low cholesterol was probably misinterpreted as low calorie."</p> <p>Morning observations of client #2's breakfast meal on 6/12/19 revealed client #2 received 2 scrambled egg whites, 1 slice of toast cut in 2 inch pieces, 1 piece of breakfast ham cut in 1 and a 1/2 inch pieces, and milk. Client #2 was observed to eat her breakfast items after which she requested additional food by signing "eat." Again staff did not offer client #2 any additional food. Client #2 was prompted to leave the table and refused. Client #2 was further observed to continue to ask for additional food. Client #2 was given additional milk, however, no second helping nor any additional food was offered to the client. Client #2 was led to a chair in the living room continuing to sign "eat" until the group home manager offered a piece of cheese after staff was informed by this surveyor that cheese was not offered at the breakfast meal. Review of the breakfast menu at 7:30 AM posted in the kitchen revealed all clients were to receive one ounce slice cheese, toast, egg whites, ham slice and milk.</p> <p>Record review for client #2 on 6/12/19 revealed an Individual Program Plan (IPP)</p>	W 460			

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W 460	<p>Continued From page 4</p> <p>containing a nutritional evaluation dated 9/6/18. Review of the 9/6/18 nutritional evaluation revealed client #2 has a good appetite, she makes her wants and wishes known, she can feed herself." This evaluation further revealed client #2 needs to maintain her present weight and nutritional status, she receives a chopped low cholesterol diet with lowfat snacks."</p> <p>Interview with staff A on 6/12/19 at 7:45 AM who assisted client #2 with her breakfast meal confirmed she had forgotten to give client #2 cheese toast and only offered a piece of regular toast. Continued interview with Staff A revealed the staff was not aware of client #2's need for a chopped diet. Interview with the group home manager at 7:55 AM revealed staff are new and need training on the importance of reading and correctly interpreting client menus in reference to menu items and consistency of foods.</p> <p>Interview with the facility qualified intellectual disabilities professional (QIDP) on 6/12/19 confirmed client #2 should have been served a chopped diet (1/4-1/2 inch pieces), regular portions should have been offered, and seconds as requested. Continued interview with the QIDP revealed there is a list of free foods in the home that should have been offered to client #2 as well such as jello, rice cakes, and other food items if she continues to ask for additional food at meals and or snacks. Further interview with the QIDP and group home manager confirmed training for all staff regarding menus for clients is planned to begin immediately as a result of the needs identified in this survey.</p>	W 460	<p>The QP will ensure that all staff in the home have been properly in-serviced on the diets of all individuals living in the home, including Client #2. In addition to this, staff will be in-serviced on how to properly interpret dietary orders in order to determine whether or not there are specific restrictions on things such as food consistency, portion sizes, additional/double portions, as well as the difference between low cholesterol and low calorie. Staff will be in-serviced on how to properly portion foods to be in compliance with individual diets. Staff will also be in-serviced on 'free foods' that can be offered to any individual, in between meals or in addition to meals, at the request of the individual. The QP and/or designee will ensure compliance with these standards and training through direct observation in the home occurring at least weekly.</p>	8/11/19	