

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

PRINTED: 08/16/2019
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 34G031	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 08/07/2019
NAME OF PROVIDER OR SUPPLIER BLUEWEST OPPORTUNITIES-ORA HOUSE			STREET ADDRESS, CITY, STATE, ZIP CODE 95 ORA STREET ASHEVILLE, NC 28801	
(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 observations, review of records and staff interview, the individual support plans (ISPs) failed to have sufficient objectives to address identified needs related to vocational, pre-vocational or educational needs for 3 of 3 sampled clients (#3, #5 and #6) and failed to address dining skill needs for 1 of 3 sampled clients (#6). The findings are:</p> <p>A. The ISP failed to address vocational, pre-vocational or educational needs for client #5. Examples include:</p> <p>Observation during the 8/6-7/19 survey revealed no observation of client #5 to participate in vocational, pre-vocational or educational training as the client was not in attendance at a vocational site or engaged in any community integration activity during the survey dates.</p> <p>Review of the record for client #5 on 8/7/19 revealed an ISP dated 5/16/19. Documentation within the ISP indicated client #5 can sort objects by color, shape and size. The ISP also indicated the client could not identify coins or bills, but had been working on handling money and making purchases. Continued review of the ISP did not reveal a current adaptive behavior inventory or assessment. The current program objectives</p>	W 227	<p>See Attached</p> <p>RECEIVED</p> <p>SEP - 3 2019</p> <p>DHSR NH L & C Black Mountain / WRO</p>	8/29/19

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

TITLE

(X6) DATE

[Signature] BS, JP

Program Administrator

8/29/19

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 227	<p>Continued From page 1</p> <p>within the ISP included a "Daily Tasks" program, which included activities of daily living skills, educations skills and vocational skills.</p> <p>The description of the long term objective was for the client to increase his independence and skill levels across all activities of daily living and educational and vocational skills. Review of the tasks within this program included bathing, drying hands, oral hygiene, walking and washing dishes. The tasks did not include any vocational, pre-vocational or educational skills.</p> <p>Interview with the qualified intellectual disabilities professional (QIDP) on 8/7/19, confirmed client #5 did not have a current assessment related to vocational, pre-vocational or educational needs. The QIDP further confirmed client #5 did not currently have program objectives specifically related to vocational, pre-vocational or educational needs. Additional interview with the QIDP verified client #5 did not attend a structured daily vocational site or have many opportunities for community integration to address vocational deficits.</p> <p>B. The ISP failed to address vocational, pre-vocational or educational needs for client #6. Examples include:</p> <p>Observation during the 8/6-7/19 survey revealed no observation of client #6 to participate in vocational training as the client was not in attendance at a vocational site or engaged in any community integration activity during the survey dates.</p> <p>Review of the record for client #6 on 8/7/19 revealed an ISP dated 5/7/19. Review of the ISP for client #6 revealed a comprehensive functional assessment dated 5/28/19 that indicated client #6</p>	W 227	See Attached	9/29/19

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W 227	<p>Continued From page 2</p> <p>could count if prompted with the proper numbers. Further review of the current ISP revealed current program objectives to include objectives relative to clothing care, hygiene, hand dry dishes, exercise and food chopper use. Additional review of the ISP revealed no training objectives to address vocational, pre-vocational or educational skills.</p> <p>Interview with the QIDP on 8/7/19, confirmed client #6 did not have current training objectives related to vocational, pre-vocational or educational needs. The QIDP further confirmed the client could benefit from goals to address vocational and educational deficits. Additional interview with the QIDP verified client #6 did not attend a structured daily vocational site or have many opportunities for community integration to address vocational deficits.</p> <p>C. The ISP failed to address vocational, pre-vocational or educational needs for client #3. Examples include:</p> <p>Observation during the 8/6-7/19 survey revealed no observation of client #3 to participate in vocational training as the client was not in attendance at a vocational site or engaged in any community integration activity during the survey dates.</p> <p>Review of the record for client #3 on 8/7/19 revealed an ISP dated 1/14/19. Review of the 1/2019 ISP revealed a comprehensive functional assessment dated 5/29/19 that indicated client #3 "does not do" relative to vocational and educational skills. Further review of the ISP for client #3 revealed current program objectives</p>	W 227	See attached	9/29/19	

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W 227	<p>Continued From page 3</p> <p>included goals relative to dinner, physical activity, oral hygiene, laundry and to trace the letter "D". Additional review of the ISP revealed no additional training objectives to address vocational, pre-vocational or educational skills.</p> <p>Interview with the QIDP on 8/7/19, confirmed client #3 to have one current training objective related to educational needs. The QIDP further confirmed client #3 could benefit from additional goals to address vocational and educational deficits. Additional interview with the QIDP verified client #3 did not attend a structured daily vocational site or have many opportunities for community integration to address vocational deficits.</p> <p>D. The ISP failed to address dining skill needs for client #6. Examples include:</p> <p>Observation of the dinner meal on 8/6/19 at 5:50 PM revealed client #6 to sit at the table and participate in the meal that included jambalaya and cabbage. Further observation revealed client #6 to eat spillage from his plate off the table with his hands, to lick his individual serving plate and bowl after eating and to stand and drink all his beverage at one time at the end of his meal. At no time during the dinner meal was it observed for staff to provide redirection to client #3 relative to dining behavior.</p> <p>Review of record for client #6 revealed an ISP dated 5/7/19. Review of current program objectives within the ISP included objectives relative to clothing care, hygiene, hand dry dishes, exercise and food chopper use. Further review of the ISP revealed no objectives to</p>	W 227	<p>Sec Attached</p>	9/29/19	

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W 227	Continued From page 4 address dining skills. Interview with the QIDP on 8/7/19 revealed client #6 will eat with his hands, lick his plate and eat off the table without redirection from staff. Further interview with the QIDP verified client #6 had no dining guidelines or training objective to address dining skills. The QIDP additionally confirmed client #6 could benefit from training related to dining skills.	W 227		
W 247	INDIVIDUAL PROGRAM PLAN CFR(s): 483.440(c)(6)(vi) The individual program plan must include opportunities for client choice and self-management. This STANDARD is not met as evidenced by: Based on observation, record review and interview, the facility failed to assure 2 of 3 non-sampled clients (#2 and #4) were provided opportunities for choice and self management relative to their prescribed diet. The finding is: A. The facility failed to provide an opportunity for choice and self management relative to the breakfast meal for client #2. Observation in the group home on 8/7/19 at 7:50 AM revealed client #2 to participate in the breakfast meal that included for client #2: a single serving of cheese, grits and toast. Continued observation revealed client #2 to complete his meal and sit at the dining table until verbally prompted to take his dishes to the kitchen. Observation at 8:15 AM revealed client #2 to re-enter the kitchen area and grab a serving bowl with applesauce that the client took multiple bites of until redirected. Additional observation at	W 247	See Attached	9/29/19

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W 247	<p>Continued From page 5</p> <p>8:18 revealed client #2 to return to the kitchen area and again grab the serving bowl with applesauce and to take multiple bites with the serving spoon in the bowl until redirected. At no time during redirection was client #2 offered an additional food option. Observation of the breakfast menu on 8/7/19 revealed the menu to reflect: 1 oz. cheese or egg, 1 c. grits or 1 slice of toast and 1/2 c. grits, 1/2 c. applesauce.</p> <p>Review of records for client #2 on 8/7/19 revealed a nutritional assessment dated 3/7/19. Review of the 3/2019 assessment revealed a prescribed regular diet, allow double portions of protein only.</p> <p>Interview with the qualified intellectual disabilities professional (QIDP) on 8/7/19 verified client #2 is allowed seconds of protein at meals. Further interview with the QIDP verified staff should have offered client #2 a second serving of protein when the client returned to the kitchen and grabbed the serving bowl with applesauce.</p> <p>B. The facility failed to provide an opportunity for choice and self management relative to the breakfast meal for client #4.</p> <p>Observation in the group home on 8/7/19 at 7:45 AM revealed client #4 to participate in the breakfast meal that included for client #4: toast, an egg, grits and applesauce. Continued observation revealed client #4 to complete his meal and request seconds to which staff A responded "No seconds". Client #4 was observed to repeat a request for seconds and directed by staff A to put his dishes in the kitchen. At no time during client #4's request for seconds was the the client offered any other food item.</p>	W 247	See Attached		

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W 247	Continued From page 6 Review of records for client #4 on 8/7/19 revealed a nutritional assessment dated 5/8/19. Review of the 5/2019 assessment revealed a prescribed regular diet with double portions of fruits and vegetables.	W 247		
W 249	Interview with the QIDP on 8/7/19 verified client #4 is allowed seconds of fruits and vegetables as prescribed. Further interview with the QIDP verified staff should have offered client #4 a piece of fruit or appropriate substitute when client #4 requested seconds at the breakfast meal. 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, interviews and review of records, the team failed to ensure objectives listed on the individual support plans (ISPs) for 2 of 3 sampled clients (#5 and #6) were implemented with sufficient frequency to support the achievement of the objectives relative to communication. The findings are: A. The team failed to ensure the communication objective for client #5 was implemented as prescribed. Examples include:	W 249	See Attached	9/29/19

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W 249	Continued From page 7 Observations during the dinner meal on 8/6/19 and during the breakfast meal on 8/7/19 revealed client #5 to eat all of his food items and to drink all, or almost all of his drink items. No staff working in the home on either days were observed prompting the client with any kind of manual sign language before, during or after the meals. Review of the record for client #5 on 8/7/19 revealed an ISP dated 6/3/19. The ISP indicated the client is non-verbal. Further review of the ISP revealed documentation from the speech language professional, which indicated client #6 could benefit from a manual sign language program for expression of basic needs. Review of the current programs for the client revealed an objective titled Manual Sign Use. Review of the program revealed staff were to use modeling and verbal cues for "more" during meals and snacks to get the client to imitate the manual sign used by staff. Interview with the qualified intellectual disabilities professional (QIDP) on 8/7/19 confirmed staff should have been running the program objective for manual sign use at all opportunities, which would have included both meals observed during the survey. B. The team failed to ensure the communication objective for client #6 was implemented as prescribed. Examples include: Observations during the 8/6-7/19 survey revealed client #6 to participate in various activities throughout the survey to include outside leisure	W 249	See Attached	9/29/19	

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W 249	<p>Continued From page 8</p> <p>activity, dinner preparation, medication administration and dinner and breakfast meal participation. Observations further revealed client #6 to be verbally prompted by various staff during activity transitions with no use of a physical schedule. Observation in the group home of a wall in the dining area revealed a schedule board with various pictures on a strip and the name of client #6 on it although the board was never observed to be used with the client during the survey.</p> <p>Review of records for client #6 on 8/6-7/19 revealed an ISP dated 5/7/19. Review of the 5/7/19 ISP revealed a diagnosis that included severe intellectual disability and autism. Further review of the ISP for client #6 revealed schedule guidelines implemented 5/22/13. Review of schedule guidelines for client #6 revealed the client does best when a schedule helps organize his day to reduce stress and make choices that support his independence. Schedule frequency revealed the schedule to be used during awake hours. Continued review of schedule guidelines revealed directives for using the schedule to include: Post current schedule strip on schedule board. When time to begin a new activity, take schedule strip to client #6. Use gestural prompts as much as possible. Point to the picture/symbol for the next task. Give client #6 time to process, then point to direction of activity. Client #6 is to take the picture of the last task and put it in the finished pocket.</p> <p>Interview with the facility QIDP on 8/7/19 confirmed staff should have been implementing schedule guidelines for activity transitions of client #6 at all opportunities, which would have included transitions during survey observations.</p>	W 249	See Attached	9/29/19

**Plan of Correction
Ora Group Home
Annual Recertification Survey
8/6-7/2019**

W227 Individual Program Plan *The individual program plan states the specific objectives necessary to meet the client's needs, as identified by the comprehensive assessment.*

A, B and C

- QIDPs will ensure that Comprehensive Functional assessments are current, and that client ISPs have specific objectives to address identified vocational and educational needs.
- A variety of pre vocational activities will be developed for client #5 and all the residents in the home. Activities will include matching, sorting, writing skills, letter and number identification, color identification, etc.

D. Client # 6 will be moving to the Blue Division, Snowbird on 9/2. This citation and recommended correction will be passed along to Codie New, QIDP for implementation.

A dining program will be created for Client # 6, focusing on all aspects of eating his meal. Beverage consumption and pace, utensil use and proper removal and cleaning of his dishes will be included in the program

All programs will have current goals to meet client needs by September 29, 2019.

Success of this re-training and new program implementation will be measured during observation/coaching sessions and review of data collection and program implementation done by the Program Administrator, Residential Services Director, QPs, and/or the Shift manager

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Black Mountain / WRO

W247 Individual Program Plan *The individual program plan must include opportunities for client choice and self-management.*

- A. and B. DSP's will be retrained on client choice in regards to what is on the menu, following the menu, appropriate substitutions for various menu items, and resident participation in meal preparation.

Success of this re-training will be measured during observation/coaching sessions done by the Program Administrator, Residential Services Director, QPs, and/or the Shift manager.

All retraining and observation/coaching sessions will be completed by September 29, 2019.

W249 Program Implementation *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.*

- A. All DSP's will be retrained in the use of the Communication program during meals and snacks for Client #5. This program will be laminated on a placement to be used at all meals and snacks.
- B. **Client # 6 will be moving to the Blue Division, Snowbird on 9/2. This citation and recommended correction will be passed along to Codie New, QIDP for implementation**
 - 1. DSPs will be re-trained in implementing schedule guidelines for activity transitions at all opportunities. Additionally the QIDP's will ensure that the proper and appropriate schedule pieces are available and well maintained to facilitate the success of schedule use for Client # 6

Success of this re-training will be measured during observation/coaching sessions done by the Program Administrator, Residential Services Director, QPs, and/or the Shift manager.

All retraining and observation/coaching sessions will be completed by September 29, 2019.

Codie New BS/QP 8/29/19
Program Administrator