STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	34G277	A. BUILDING _____ B. WING _____	10/08/2019

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
MASON STREET	**306 N MASON STREET APEX, NC 27502**

(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 229	INDIVIDUAL PROGRAM PLAN CFR(s): 483.440(c)(4)(i) The objectives of the individual program plan must be stated separately, in terms of a single behavioral outcome. This STANDARD is not met as evidenced by: Based on record review and interview, the facility failed to ensure objective statements for 1 of 4 audit clients (#5) were written in terms of a single behavioral outcome. The finding is: Client #5's objectives were not written with single outcomes. Review on 10/7/19 of client #5's Individual Program Plan (IPP) dated 7/19/19 revealed the following objectives were not written in terms of a single behavioral outcome: "When the need arises, [Client #5] will make an informed decision about wearing eyeglasses and placing them safely in a case at night before sleeping with 85% independence for the next 6 months." "[Client #5] will come to med area and when given motivation he will administer medication with 80% independence for 6 months." "When given option from staff to call his parents [Client #5] will call his parents utilizing the residential telephone and dial his parents telephone number if he desires. Staff will assist [Client #5] will correctly dialing the telephone number and mark accordingly to task analysis with 40% independence for 6 months."	W 229		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE | (X6) DATE

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W 229	Continued From page 1 During an interview on 10/8/19, the Qualified Intellectual Disabilities Professional (QIDP) acknowledged client #5's objective statements were not written with single behavioral outcomes.	W 229		
W 249	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 record reviews, the facility failed to ensure each client received a continuous active treatment plan consisting of needed interventions and services identified in the individual program plan (IPP) in the areas of meal preparation and dining skills. This affected 3 of 4 audit clients (#2, #5, #6). The findings are: 1. Clients #2 and #5 did not participate with meal preparation. During morning observations in the home on 10/8/19 at 6:32am, third shift staff began making two ham and cheese sandwiches for client #2 and client #5. Further observations revealed the staff completed preparing both sandwiches without having either client participate.	W 249		

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W 249	Continued From page 2 During an interview on 10/8/19, Staff E stated client #2 can independently make her own sandwich. Additional interview revealed client #5 needs verbal prompts to make his own sandwich. Review on 10/8/19 of client #2's community/home life assessment dated 1/28/19 revealed she needs physical assistance to make her lunch. Review on 10/8/19 of client #5's community/home life assessment dated 7/2/19 revealed he needs physical assistance to make his lunch. During an interview on 10/8/19, the qualified intellectual disabilities professional (QIDP) stated both clients #2 and #5 should be able to make their sandwiches independently. 2. Clients #2, #5 and #6 were not prompted to use a knife. a. During breakfast observations in the home on 10/8/19 at 8:03am, client #2 picked up her two sausage patties with her fingers and biting them both. Further observations revealed there was no knife at client #2's place setting. During an interview on 10/8/19, Staff E revealed client #2 can independently use a knife to cut her food. Review on 10/8/19 of client #2's community/home life assessment dated 1/28/19 revealed she uses a knife independently. During an interview on 10/8/19, the QIDP stated, "I have never seen [Client #2] use a knife." Further interview revealed staff would provide	W 249		

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W 249	Continued From page 3 hand over hand assistance if she needs to use a knife for cutting. b. During breakfast observations in the home on 10/8/19 at 8:08am, client #5 picked up his two sausage patties with his fingers and biting them both. Additional observations revealed client #5 using one hand to hold both his sausage patties and a pear half, while holding a fork in his other hand and breaking them apart. Further observations revealed there was no knife at client #5's place setting. During an interview on 10/8/19, Staff E revealed client #5 can independently use a knife to cut his food. Review on 10/8/19 of client #5's community/home life assessment dated 7/2/19 stated he is independent when it comes to using a knife to cut his food. During an interview on 10/8/19, the QIDP revealed client #5 can independently use a knife to cut his food. c. During breakfast observations in the home on 10/8/19 at 8:47am, client #6 picked up his two sausage patties with his fingers and biting them both. Further observations revealed there was no knife at client #6's place setting. During an interview on 10/8/19, Staff E revealed when she assists client #6, he needs hand over hand assistance to cut his food with a knife. Review on 10/8/19 of client #6's community/home life assessment dated 3/20/19 revealed he can use a knife independently.	W 249		

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W 249	Continued From page 4 During an interview on 10/8/19, the QIDP revealed client #6 needs hand over hand assistance to cut his food with a knife.	W 249		
W 369	DRUG ADMINISTRATION CFR(s): 483.460(k)(2) The system for drug administration must assure that all drugs, including those that are self-administered, are administered without error. This STANDARD is not met as evidenced by: Based on observations, record reviews and interviews, the facility failed to ensure all medications were administered without error. This affected 1 of 2 clients (#6) observed receiving medications. The finding is: Client #6 did not receive his Miralax as ordered. a. During afternoon observations of medication administration in the home on 10/7/19 at 3:40pm, the medication technician (MT) poured an undetermined amount of Miralax powder into a small white disposable souffle cup. The MT filled the small cup to the top and client #6 poured the powder into a bottle and filled it with 8 oz of water. After shaking up the bottle, Client #6 then consumed the Miralax mixture along with other medications. Immediate interview with the afternoon MT revealed they usually utilize the clear medication cups to dispense the Miralax powder and not the white souffle cups; however, there were no clear medications cups in the home.	W 369		

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W 369	Continued From page 5 b. During morning observations of medication administration in the home on 10/8/19 at 7:45am, the MT assisted client #6 to pour two half capfuls of Miralax powder into the marked bottle cap from the Miralax bottle. The client then poured the powder into a bottle with 8 oz of water and shook it up. Client #6 then consumed the Miralax mixture with other medications. Immediate interview with the morning MT revealed client #6 consumes one and a half capfuls of the Miralax powder. Review on 10/8/19 of client #6's current physician's orders dated 9/1/19 revealed an order for Miralax powder, "mix 1 & 1/2 capful with 8 oz of liquid." Interview on 10/8/19 with the facility's nurse confirmed client #6 should receive 1 & 1/2 capfuls of Miralax powder. Additional interview indicated the powder should be dispensed and measured utilizing the marked cap from the Miralax bottle in order to obtain the correct amount of medication.	W 369		