

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

PRINTED: 01/28/2020
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 34G075	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED 01/22/2020
NAME OF PROVIDER OR SUPPLIER CHILES AVENUE GROUP HOME			STREET ADDRESS, CITY, STATE, ZIP CODE 22 CHILES AVENUE ASHEVILLE, NC 28803		
(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 242	<p>INDIVIDUAL PROGRAM PLAN CFR(s): 483.440(c)(6)(iii)</p> <p>The individual program plan must include, for those clients who lack them, training in personal skills essential for privacy and independence (including, but not limited to, toilet training, personal hygiene, dental hygiene, self-feeding, bathing, dressing, grooming, and communication of basic needs), until it has been demonstrated that the client is developmentally incapable of acquiring them.</p> <p>This STANDARD is not met as evidenced by: Based on observation, interview and record review, the facility failed to assure the person centered plans (PCPs) for 2 of 3 sampled clients (#3 and #4) included training in personal skills essential for independence in personal hygiene and self-feeding. The findings are:</p> <p>A. Observations in the group home on 1/21/2020 from 3:53 PM and 4:45 PM revealed client #3 to leave the bathroom without washing his hands and to enter the kitchen area to look at the menu, then to enter the common area to retrieve a newspaper from the television cabinet. Further observation revealed client #3 to set his place at the table, then to place the salad bowl on the table. Staff then prompted client #3 to wash his hands.</p> <p>Review of the record for client #3 revealed a person centered plan (PCP) dated 10/1/19. The 10/2019 PCP included privacy guidelines dated 1/23/19. Further review of the PCP revealed program objectives for cleaning himself every morning, cleaning urine on wash room floor, brushing and flossing teeth as well as applying</p>	W 242			

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 242	<p>Continued From page 1</p> <p>lotion to both arms. Further record review revealed a Functional Skills Assessment (FSA) dated 10/10/19. Review of the FSA revealed the client will wash hands "sometimes". Additional review of the PCP did not reveal a hand washing program objective to meet the need of handwashing after bathroom use or before meals.</p> <p>Interview with qualified intellectual disabilities professional (QIDP) on 1/22/20 confirmed client #3 does not have a current hand washing program objective and staff should prompt the client to wash his hands after using the bathroom and before meals.</p> <p>B. Client #4 failed to have objective training included in the PCP to meet self feeding needs. For example:</p> <p>Observations in the group home on 1/22/20 at 8:15 AM during breakfast revealed the client eating a breakfast casserole. Client #4 was observed to eat at least half of the serving with his fingers. Staff member D prompted the client one time during the meal to use utensils and this prompt was near the end of the meal.</p> <p>Review of the record for client #4 revealed a PCP dated 6/26/19. The PCP indicated the client is blind in both eyes. Further review of the PCP revealed a Functional Skills Assessment dated 6/25/19 which indicated the client needs prompting to use utensils as he frequently uses his fingers to eat. Continued review of the PCP did not reveal a current program objective designed to meet the need of using utensils during meals. Interview with the QIDP on 1/22/20 confirmed client #4 will frequently use his fingers</p>	W 242			

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W 242	Continued From page 2 to eat and confirmed the client does not have a current program objective to meet needs relative to using dining utensils.	W 242			
W 247	<p>INDIVIDUAL PROGRAM PLAN CFR(s): 483.440(c)(6)(vi)</p> <p>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 3 of 6 clients residing in the home (#1, #2 and #5) were provided opportunities for choice and self management relative to dining tasks. The findings are:</p> <p>Observations in the group home on 1/22/20 from 6:45 AM to 8:30 AM revealed the dining table had place settings for all clients which consisted of place mats and cloth napkins. Additional observation revealed a water pitcher and almond milk on the kitchen counter. Further observation revealed staff D later placed cups, a fruit bowl, water pitcher, almond milk and a breakfast casserole on the table. No clients were observed to assist with taking items to the table. Continued observations revealed staff member D to prepare a sandwich for client #1's lunch and to place it into the client's lunch bag.</p> <p>Review of the record for client #1 on 1/22/20 revealed a person centered plan (PCP) dated 5/31/19. The ISP included a current Comprehensive Functional Assessment (CFA) which indicated the client is independent with managing a sandwich.</p>	W 247			

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W 247	Continued From page 3 Review of the record for client #2 revealed a PCP dated 8/31/19. The ISP included a current CFA which indicated the client is capable of taking items to the table with prompting. Further review of the record for client #5 revealed an ISP dated 8/31/19. The ISP included a current CFA which indicated client is capable of taking items to the table with prompting. Interview with the qualified intellectual disability professional (QIDP) on 1/22/20 confirmed all clients in the home are capable of participating in dining tasks.	W 247			
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 observation, interviews and record review, the team failed to implement sufficient interventions to support the achievement of a dining program for 1 of 3 sampled clients (#4). The finding is: Observations in the group home on 1/22/20 at 7:32 AM revealed staff member D to place drinking cups for all clients, a serving bowl with	W 249			

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W 249	<p>Continued From page 4</p> <p>fruit, and a water pitcher onto the dining table without client assistance. Continued observations at 8:10 AM revealed staff D assisting client #4 to the dining table for breakfast. The client was not prompted to do anything except to be seated at the table to eat breakfast. The place setting at that time was observed to include a plate with a plate guard, utensils and a drinking cup.</p> <p>Review of the record for client #4 on 1/22/20 revealed a person centered plan (PCP) dated 6/26/19. The PCP included a current "self help" program implemented 6/27/19. The program description indicated the client was supposed to remove a cup from the kitchen cabinet on the dining room side, using at least hand over hand assistance. Continued review of the program revealed instructions for staff to verbally and physically prompt client #4 to the kitchen cabinet on the dining room side and assist hand over hand with getting a cup, taking the cup out and getting a drink. Interview with the qualified intellectual disabilities professional on 1/22/20 confirmed the self help /cup program was current for client #4. The QIDP further confirmed staff should run the program objective at every opportunity as directed to assure the achievement of the program.</p>	W 249			