

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

PRINTED: 01/24/2020
FORM APPROVED
OMB NO. 0938-0391

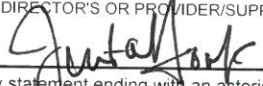
STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 34G201	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 01/14/2020
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NAME OF PROVIDER OR SUPPLIER VOCA-OAK DRIVE GROUP HOME	STREET ADDRESS, CITY, STATE, ZIP CODE 5416 OAK DRIVE CHARLOTTE, NC 28216
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(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
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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 observation, review of records and interview, the team failed to ensure the individual support plans (ISPs) for 4 of 6 sampled clients (#3, #4, #5 and #6) included objective training to address needs relative to vocational skills. The finding is:</p> <p>Observation on 1/13/20 at 12:45 PM at the vocational site for clients #3, #4, #5 and #6 revealed no observation of the clients participating in vocational training as clients #3, #4, #5 and #6 were not in attendance at the vocational program. Review of vocational records on 1/13/20 at the vocational site for clients #3, #4, #5 and #6 revealed no vocational training objectives for any of the clients. Observation of clients #3, #4, #5 and #6 at the vocational site on 1/14/20 at 9:15 AM revealed the clients to participate in no structured activity while staff attempted to engage each client with picture cards, games or socialization.</p> <p>Review of records for client #3 on 1/14/20 revealed an ISP dated 12/12/19. Review of the ISP for client #3 revealed current program objectives relative to eye glasses, laundry, meal preparation and name tracing. Further record review for client #3 revealed a vocational assessment dated 11/12/19 that indicated</p>	W 227	<p>W227</p> <p>The facility will ensure individual support plans (ISPs) will include objective training to address needs relative to vocational training for all individuals including clients (#3, #4, #5, #6). Program Manager will inservice QP of the residential home to formulate and implement needed vocational goals per vocational assessments. Program Manager will also inservice QP of residential home to train Day Program Director on all vocational goals per ISP for all individuals.</p> <p>To prevent further episodes: The QP of the residential home will review individual program plans including vocational goals and vocational assessments monthly to ensure the individual program plan plan will include objective training to address identified needs including vocational needs. Program Manager or designee will review charts monthly via monthly site review to ensure the individual program plan will include objective training to address identified needs including behavioral needs..</p> <p>To be completed y: 3/14/2020 Person(s) Responsible: Program Manager</p>	3/14/2020
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DHSR - Mental Health
FEB 07 2020
Lic. & Cert. Section

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE 	TITLE Program Manager	(X6) DATE 2/4/2020
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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>enrichment training would be beneficial and appropriate.</p> <p>Review of records for client #4 on 1/14/20 revealed an ISP dated 2/15/19. Further review of the 2/2019 ISP revealed a vocational assessment dated 1/15/19. Review of the 1/2019 vocational assessment revealed training in the area of sorting and manipulation skills are recommended.</p> <p>Review of records for client #5 on 1/14/20 revealed an ISP dated 10/1/19. Further review of the 10/2019 ISP revealed a vocational assessment dated 9/2/19. Review of the 9/2019 vocational assessment revealed a need for training has been identified in the area of academic skills. Further review of the current vocational assessment revealed training in the area of sorting and manipulation skills are recommended.</p> <p>Review of records for client #6 on 1/14/20 revealed an ISP dated 12/12/19. Further review of the 12/2019 ISP revealed a vocational assessment dated 11/12/19. Review of the 11/2019 vocational assessment revealed enrichment training would be appropriate due to various deficits in academic skills (reading, writing, time and currency value).</p> <p>Interview with the qualified intellectual disabilities professional (QIDP) at the vocational site on 1/13/20 verified clients #3, #4, #5 and #6 currently had no formal vocational goals at the vocational site. Interview with administration staff on 1/14/20 verified clients #3, #4, #5 and #6 had started attending the current vocational site on 11/4/19. Interview with the residential QIDP further verified clients #3, #4, #5 and #6 had no</p>	W 227		3/14/2020	

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<p>W 227</p> <p>W 252</p>	<p>Continued From page 2 training objectives at the vocational site.</p> <p>PROGRAM DOCUMENTATION CFR(s): 483.440(e)(1)</p> <p>Data relative to accomplishment of the criteria specified in client individual program plan objectives must be documented in measurable terms.</p> <p>This STANDARD is not met as evidenced by: Based on record review and interview, the team failed to collect data as prescribed for the vocational objectives for 1 of 5 sampled clients (#2) and vocational progress notes for 5 of 6 clients (#2, #3, #4, #5 and #6) in order to accurately assess client progress and status. The finding is:</p> <p>A. The team failed to ensure data for 2 of 2 vocational objectives listed in the ISP for client #2 was collected as prescribed. For example:</p> <p>1. Review of client #2's record on 1/14/20 revealed an ISP dated 3/15/19. Review of the ISP revealed a vocational objective to independently complete a volunteer activity for 6 consecutive months at 100% by 2/1/20. The program training frequency indicated data was to be collected two times weekly. Review of data collection relative to the objective revealed in 11/2019 no data was collected, in 12/2019 no data was collected and 1/2020 data was current up to the survey date of 1/13/2020.</p> <p>2. Review of client #2's record on 1/14/20 revealed an ISP dated 3/15/19. Review of the</p>	<p>W 227</p> <p>W 252</p>	<p>W252</p> <p>Program Manager will inservice Day Program Director or designee to ensure all goals are ran as prescribed including documentation.</p> <p>A. Program Manager will inservice Day Program Director or designee to ensure documentation is the outcome of the ran goal or the reason the goal was not ran.</p> <p>B. Program Manager will inservice Day Program Director to ensure vocational progress notes are completed daily via communication book for each person attending day program. Program Manager will inservice QP of the home or designee to review day program progress daily upon return from day program.</p> <p>To prevent further episodes: The QP of the residential home and Day Program Director will review data twice a week including communication books to ensure data is documented as prescribed.</p> <p>Program Manager or designee will review data weekly including communication books to ensure data is documented as pprescribed.</p> <p>To be completed by: 3/14/2020 Person(s) Responsible: Program Manager</p>	<p>3/14/2020</p>
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W 252	<p>Continued From page 3</p> <p>ISP revealed a vocational objective to independently clean area for 6 consecutive months at 80% by 2/1/20. The program training frequency indicated data was to be collected daily. Review of data collection relative to the objective revealed in 11/2019 no data was collected, in 12/2019 no data was collected and in 1/2020 data was current up to the survey date of 1/13/20.</p> <p>Interview with the qualified intellectual disabilities professional (QIDP) at the vocational site on 1/14/20 confirmed that data collection for these objectives was not completed as prescribed. Further interview with the vocational site QIDP revealed data was not reflected as client #2 had been absent from the program many days throughout 11/2019 and 12/2019. Subsequent interview with the vocational site QIDP revealed there was no documentation relative to days client #2 had not attended the vocational program.</p> <p>B. The team failed to ensure vocational progress notes were completed for clients #2, #3, #4, #5 and #6. For example:</p> <p>Review of documentation in the individual daily communication book for clients #2, #3, #4, #5 and #6 revealed documentation for all clients during the morning shifts of 11/2019, 12/2019 and 1/2020 through the current survey date of 1/14/2020. Further documentation review in the individual daily communication book for clients #2, #3, #4, #5 and #6 revealed no documentation relative to the vocational site for 11/2019, 12/2019 and 1/2020 through the current survey date of 1/14/20.</p>	W 252		3/14/2020

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W 252	Continued From page 4 Interview with facility administration revealed clients #2, #3, #4, #5 and #6 began attending the current vocational site on 11/4/19. Interview with the QIDP at the vocational site on 1/13/20 revealed the individual daily communication book for all clients should be completed daily to reflect client status during vocational site attendance. Interview with the residential QIDP revealed all clients take their individual communication book daily to the vocational site. Further interview with the residential QIDP revealed he did not know why entries were not completed for clients while at the facility day program.	W 252		3/14/2020	



Community Alternatives North Carolina

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February 4, 2020

Ms. Kaila Mitchell
Mental Health Licensure & Certification Section
NC Division of Health Service Regulation
952 Old US Highway 70
Black Mountain, NC 28711-4501

DHSR - Mental Health

FEB 07 2020

Lic. & Cert. Section

Dear Kaila Mitchell,

Please find the enclosed plan of correction for deficiencies cited during the recent Recertification Survey completed at the Oak Group Home on 1/14/2020. Deficiencies will be corrected as indicated in plan of correction.

We would like to request an invitation of return visit on or after May 14, 2020.

Thank you for all your assistance that you provide us in helping meet the needs of the people we serve.

Sincerely

Jenita Hooks
Program Manager

Respect and Care

Assisting People to Reach Highest Level of Independence