

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

PRINTED: 02/26/2020  
FORM APPROVED  
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  34G315	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____  B. WING _____		(X3) DATE SURVEY COMPLETED  02/19/2020
NAME OF PROVIDER OR SUPPLIER  CORBEL RESIDENTIAL			STREET ADDRESS, CITY, STATE, ZIP CODE 483 CREEK ROAD ORRUM, NC 28369		
(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 000	INITIAL COMMENTS  At the time of the recertification survey, 2/18 and 2/19/2020, a complaint was also conducted for intake NC00160667. While the complaint was not substantiated two additional deficiencies were also cited in relation to the complaint.	W 000	W000 The facility will ensure all complaints are conducted in a timely manner.	4-18-2020	
W 371	DRUG ADMINISTRATION CFR(s): 483.460(k)(4)  The system for drug administration must assure that clients are taught to administer their own medications if the interdisciplinary team determines that self-administration of medications is an appropriate objective, and if the physician does not specify otherwise.  This STANDARD is not met as evidenced by: Based on observations record review and interview, the facility failed to assure 1 of 3 audit clients (#6) was trained to administer his own insulin before allowing him to do it. The finding is:  Client #6 administered insulin to himself without being monitored and or trained by staff.  During the morning medication pass, client #6 allowed the surveyor to watch his medication pass. When it came time to check his blood sugar he did so independently and then as he prepared to give himself insulin, the medication staff A turned her back and said, "We turn our back because he doesn't like us to watch." He was observed to give himself insulin over top of multiple bruises in the center of his stomach.  Review of client #6's record revealed he is not independent at giving himself medications. His	W 371	W371 Nurse will ensure that clients are taught to administer their own medications if the interdisciplinary team agrees on it. staff will monitor and train client #6.  Nurse will inservice staff on how to use different locations to inject himself. Staff will initial what side he injects. Program manager and Habilitation Specialist will monitor weekly. Nurse and QIDP will monitor monthly.	4-18-2020	

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

TITLE

(X5) DATE

*Melissa Bryant, DP* 3/16/2020

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 371	<p>Continued From page 1</p> <p>assessment had as more lowest level of independence (1s) then he had highest level of independence (3s).</p> <p>Interview with the nurse confirmed staff should watch client #6 to assure he alternates sides of his stomach and gives the insulin appropriately. Management also confirmed client #6 is not trained to be totally independent at giving himself mediations.</p>	W 371	
W 463	<p><b>FOOD AND NUTRITION SERVICES</b> CFR(s): 483.480(a)(4)</p> <p>The client's interdisciplinary team, including a qualified dietitian and physician must prescribe all modified and special diets.</p> <p>This STANDARD is not met as evidenced by: Based on observations and interviews, the facility failed to assure 1 of 3 audit clients received a prescribed diet of low concentrated sweets. This affected client #6. The findings are:</p> <p>Client #6 was not provided a diet with low concentrated sweets.</p> <p>During observations of dinner on 2/18/2020 and breakfast on 2/19/2020, client #6 received high concentrated sugar beverages. For dinner on 2/18/2020 client #6 received a glass of 4C pink lemonade with 21grams of sugar and for breakfast he received Foodlion brand concentrated frozen orange juice with 25 grams of sugar.</p> <p>Review of client #6's individual program plan (IPP) on 2/18/2020 revealed he is an insulin</p>	W 463	<p>W463 The facility will ensure that the interdisciplinary team and the dietitian will prescribe all modified and special diets.</p> <p>Client #6 should have low concentrated juice and sweets. The facility will provide low concentrated food and beverages. Program manager will monitor weekly. QIDP will monitor monthly.</p> <p style="text-align: right;"><i>4-18-2020</i></p>

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W 463 Continued From page 2  
dependent diabetic and should receive a diet with low concentrated sweets.

W 463

Interview with the group home manager and qualified intellectual disability professional (QIDP) on 2/19/2020 revealed that the clients should not have received the beverages with sugar. They stated the facility should be buying no sugar beverages.