

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

PRINTED: 09/17/2020
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 34G069	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED 09/15/2020
NAME OF PROVIDER OR SUPPLIER MARIE G. SMITH GROUP HOME			STREET ADDRESS, CITY, STATE, ZIP CODE 1921 PALMETTO DRIVE ALBEMARLE, NC 28001		
(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 288	<p>MGMT OF INAPPROPRIATE CLIENT BEHAVIOR CFR(s): 483.450(b)(3)</p> <p>Techniques to manage inappropriate client behavior must never be used as a substitute for an active treatment program.</p> <p>This STANDARD is not met as evidenced by: Based on observations, record review, and interviews, the facility failed to ensure all techniques to manage inappropriate behavior were incorporated into an active treatment program for 1 of 3 sampled clients (#2). The finding is:</p> <p>Afternoon observations in the group home on 9/14/20 revealed client #2 to walk in and out of her bedroom various times throughout the observation period. Further observation revealed client #2 to have a chime attached to her bedroom door as she entered and exited her bedroom. Morning observations on 9/15/20 revealed client #2 to walk in and out of her bedroom accompanied by staff throughout the observation period. Further observations revealed the bedroom door bell would chime each time client #2 entered and exited her bedroom.</p> <p>Review of the record for client #2 on 9/15/20 revealed an Individual Support Plan (ISP) dated 2/12/20. Further review of the ISP revealed a behavior support plan (BSP) dated 6/1/19 which includes the following target behaviors: social aggression, property destruction, loud or disruptive behaviors, privacy, self-injurious behaviors (SIBs) genital stimulation, and removing her clothes. Review of the Human</p>	W 288			

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 288	<p>Continued From page 1</p> <p>Rights Committee (HRC) minutes dated 6/26/20 indicates the doorbell chime on client #2's door is used to address health and safety concerns. Continued review of the record for client #2 does not include objectives relative to using a bedroom door chime to address health and safety concerns.</p> <p>Interview with the Group Home Manager on 9/15/20 verified that client #2 has a bell chime on her door that is used for health and safety reasons. Interview with the Qualified Intellectual Disabilities Professional (QIDP) on 9/15/20 verified that the chime on client #2's door is not used as a restrictive measure; however, it was implemented upon admission (1/14/19) and was verbally approved by the client's legally responsible person (LRP) upon admission to the facility. Further interview with the QIDP verified that the door chime for client #2 was reviewed and approved by the agency's Human Rights Committee (HRC) on 6/26/20 for continued use on her bedroom door. Continued interview with the QIDP confirmed that behaviors for client #2 relative to health and safety concerns and the use of the bedroom door chime are not a part of the client's active treatment plan.</p>	W 288			