

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

PRINTED: 09/30/2020
FORM APPROVED
OMB NO. 0938-0391

| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 34G108 | (X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____ | | (X3) DATE SURVEY COMPLETED 09/23/2020 |
|---|--|---|---|----------------------|---|
| NAME OF PROVIDER OR SUPPLIER GATEWOOD | | | STREET ADDRESS, CITY, STATE, ZIP CODE 1508 GATEWOOD AVENUE GREENSBORO, NC 27405 | | |
| (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 Intake #NC00163007, NC00169717 A complaint survey was completed on 9/23/2020. Deficiencies were not cited as a result of the complaint survey for Intake #NC00163007 or #NC00169717. | W 000 | | | |
| W 129 | PROTECTION OF CLIENTS RIGHTS CFR(s): 483.420(a)(7) The facility must ensure the rights of all clients. Therefore, the facility must provide each client with the opportunity for personal privacy. This STANDARD is not met as evidenced by: Based on observations and interviews, the facility failed to ensure 1 of 6 sampled clients (#7) was provided the opportunity for personal privacy relative to a phone call. The finding is: Observations on 9/22/20 at 6:35 PM revealed client #7 to sit in her wheelchair in the hallway of the facility conversing with another client. Continued observation revealed the RM (residential manager) to inform client #7 she had a phone call and escorted the client to the activity area. Further observation revealed client #7 to engage in a personal call from a family member to wish her a happy birthday. The client's family member was overheard stating several times to client #7, that she was having a difficult time hearing the client. Client #7 was observed to increase her voice volume and repeat her response multiple times to the family member. During client #7's phone call, other clients were observed in the activity room yelling, listening to | W 129 | | | |

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 129 | Continued From page 1 music, watching television and engaged in various activities. Subsequent observations revealed client #7 to end the conversation with her family member and to sit in a corner of the common room crying while yelling she wanted to leave. Staff B mentioned "she was having a behavior" and escorted client #7 back into the hallway. Staff B was observed to ask the client what was wrong? and to state "It's your birthday and you shouldn't be crying on your birthday." Interview with the QIDP (qualified intellectual disabilities professional) on 9/23/20 confirmed a phone was accessible in the facility conference room where all clients can hold private telephone conversations. The QIDP also confirmed client #7 should have been offered the opportunity to transfer to the conference room telephone where she would have had privacy and her conversations could not be overheard. | W 129 | | | |
| W 247 | INDIVIDUAL PROGRAM PLAN CFR(s): 483.440(c)(6)(vi) The individual program plan must include opportunities for client choice and self-management. This STANDARD is not met as evidenced by: Based on observations and interviews, the facility failed to ensure 1 of 6 sampled clients (#5) were provided opportunities for choice and self management relative to dining during the breakfast meal. The finding is: Observations on 9/23/20 at 8:45 AM revealed client #5 was escorted into the medication room to receive her morning medications. Further observations revealed client #5 to sit in the activity room from 8:58 AM to 10:00 AM. | W 247 | | | |

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| W 247 | Continued From page 2 Continued observations revealed staff C to escort client #5 into the cafeteria. Subsequent observation revealed staff C to offer and feed client #5 a breakfast meal that consisted of scrambled eggs, grits and juice at 10:00 AM. Additional observation revealed client #5 to eat 100% of her breakfast meal. At no time was client #5 offered the choice or opportunity by staff to have breakfast following her morning medications until over 50 minutes after the client's medication administration. Interview with the residential manager on 9/23/20 revealed per the morning routine, clients are taken into the dining room for breakfast after their morning medication administration. Interview with the QIDP (qualified intellectual disabilities professional) on 9/23/20 revealed the morning medication administration routine was running behind and took longer than usual. Continued interview with the QIDP and the facility nurse confirmed there was no clinical or medical reason documented as to why client #5 should not have been offered the opportunity to eat breakfast after receiving her medications without waiting 50 minutes. | W 247 | | | |
| W 476 | MEAL SERVICES CFR(s): 483.480(b)(3) Food served to clients individually and uneaten must be discarded. This STANDARD is not met as evidenced by: The facility failed to assure the health and safety of 14 of 14 clients in the facility by not ensuring food that was not consumed was discarded prior to the expiration date. The finding is: | W 476 | | | |

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| W 476 | <p>Continued From page 3</p> <p>Observation in the facility on 9/23/20 revealed the dining room to include two refrigerators. Continued observation of the contents in the refrigerators revealed (5) gallons of milk with expired dates of 9/20/20 and 9/21/20. Further observation revealed a 5 pound container of chicken salad with an expiration date of 9/21/20, a 5 pound container of egg salad with an expiration date of 6/18/20 and (4) 5 pound containers of pimento cheese with expiration dates of 2/7/20, 3/21/20, and 5/1/20.</p> <p>Observation of the dinner meal on 9/22/20 revealed no client to receive any milk or any food item from the expired containers. Observation in the facility kitchen on 9/23/20 at 7:35 AM revealed kitchen staff A to prepare breakfast items of oatmeal and grits. Observation of the kitchen refrigerator revealed a opened gallon of milk with an expired date of 9/21/20.</p> <p>Interview with kitchen staff A on 9/23/20 at 7:40 AM revealed no client had ate breakfast and she had used milk to prepare the morning grits. Continued interview with staff A revealed clients on a pureed diet would be offered grits and clients on a regular diet would be offered oatmeal. Subsequent interview with staff A verified she had used milk from the gallon of milk with the expired date of 9/21/20.</p> <p>Interview with the facility residential manager (RM) at 7:45 AM revealed no expired food items should be in the refrigerators of the facility. Continued interview with the facility RM verified food items made with expired milk could not be served to clients. Further interview with the facility RM verified all expired food items would be</p> | W 476 | | | |

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| W 476 | Continued From page 4 thrown away and new milk would be brought to the facility to support dietary needs with the morning meal. It should be noted at 8:11 AM, milk was brought to the facility by a staff member. Interview with kitchen staff A at 8:20 AM revealed the grits that had been made with expired milk was thrown away and new grits had been prepared with a substitute of water. Further interview verified all expired milk and food items had been thrown away. | W 476 | | |