STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	34G194	A. BUILDING _____ B. WING _____	C 12/02/2020

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
VOCA-FREEDOM GROUP HOME	5911 FREEDOM DR CHARLOTTE, NC 28208

(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 331	NURSING SERVICES CFR(s): 483.460(c) The facility must provide clients with nursing services in accordance with their needs. This STANDARD is not met as evidenced by: Based on review of records and interviews, the facility failed to provide 2 of 5 clients (#1 and #5) residing in the group home with nursing services according to their needs. The findings are: A. Nursing services failed to ensure services were provided according to the medical care plan relative to client #1. For example: Review of records for client #1 on 12/2/20 revealed a diagnosis history of severe intellectual disability and urinary tract infections (UTI) due to enlarged prostate with urinary retention. Continued record review for client #1 revealed medical consults for catheter changes during the current calendar year on 1/9/20, 2/13/20, 3/13/20 and 4/11/20. Review of the 4/11/20 medical consult revealed:urinary retention; faulty indwelling suprapubic catheter with evidence of UTI. Continued review of neurology appointments all revealed the need for follow-up in one month for catheter change. Review of a medical consult dated 11/22/20 for client #1 revealed a diagnosis of cystitis, UTI and acute kidney injury. Continued review of the 11/22/20 medical consult revealed antibiotics were given with 1 liter of fluids and suprapubic catheter was replaced. A review of recommendations of the 11/22/20 consult revealed the need for a urology follow-up in 2-3 days for catheter check. Continued review of	W 331		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE | (X6) DATE

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W 331	Continued From page 1	W 331		

recommendations revealed: Treat with Keflex for 7 days; since catheter was replaced, the client may need evaluation for a bigger catheter by urology.

Interview with the facility nurse on 12/2/20 verified client #1 has a suprapubic catheter and a history of UTI's. Continued interview with the facility nurse confirmed client #1 should be seen monthly by the neurologist for a catheter change to reduce the risk of UTI's. Further interview with the facility nurse verified as of the current survey date of 12/2/20 that client #1 had not been to the neurologist since 4/2020. Subsequent interview with the facility nurse verified client #1 had been to the local emergency room for a UTI in 7/2020.

Additional interview with the facility nurse verified client #1 had not been to a urology appointment since the 11/22/20 medical consult. Interview with nursing further revealed the facility home manager (HM) was responsible for scheduling medical appointments and she had not followed up with the HM to determine if the appointment was scheduled. Interview with the facility program manager verified the facility HM had not scheduled the urology appointment for client #1.

B. Nursing services failed to ensure reconciliation of medication orders after a hospitalization for client #5. For example:

Review of the medication administration record (MAR) for client #5 on 12/2/20 revealed an order for Lactulose 30 ml BID with the notation: Medication not available on dates 11/25/20 through the current date of 12/2/20. Review of MAR documentation prior to 11/25/20 was not available for review. Review of client #5's record

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W 331	Continued From page 2 on 12/2/20 revealed quarterly pharmacy notes dated 11/30/20 to reflect Lactulose 30 ml BID as part of client #5's medication regime. Interview with the facility nurse on 12/2/20 revealed client #1 was ordered Lactulose 30 ml BID with a recent hospitalization and was discharged with the medication order with no refills. Continued interview with nursing revealed after client #5 had been administered the Lactulose supply provided with hospital discharge the medication was stopped as there was no new order for the pharmacy to fill. Further interview with nursing confirmed she had attempted to contact client #5's physician regarding the medication although she had not received an answer from the physician to continue or discharge the order. Interview with the facility program manager confirmed client #5 had been hospitalized in 8/2020. Additional interview with the facility nurse verified client #5 was provided a 30 day supply of Lactulose and was administered the medication until it was completed in 9/2020. Nursing staff subsequently verified she had not followed up with client 5's physician since 9/2020 to determine if the client should remain on the Lactulose order or to discharge the order.	W 331		