

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

PRINTED: 05/22/2021
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 34G073	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 05/12/2021
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NAME OF PROVIDER OR SUPPLIER SUNNY HILL GROUP HOME #1	STREET ADDRESS, CITY, STATE, ZIP CODE 261 SUNNY HILL DRIVE LINCOLNTON, NC 28092
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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 person centered plan (PCP) failed to have sufficient guidelines or training to meet identified client needs for 1 of 3 sampled clients (#2). The finding is:</p> <p>Observation the group home on 5/11/21 at 5:37 PM revealed staff to verbally prompt client #2 to brush his teeth after the dinner meal. Continued observation revealed client #2 to access his toothbrush from a hallway bathroom and to walk to the office area of the group home. Further observation revealed client #2 to request toothpaste from staff in the office of the group home and to return to the hallway bathroom with toothpaste on his toothbrush.</p> <p>Observation of the hallway bathroom used by client #2 on 5/11/21 revealed a hygiene caddy located in the bathroom closet with client #2's initials. Observation of the contents in client #2's hygiene caddy revealed no toothpaste.</p> <p>Interview with staff A on 5/11/21 revealed client #2 keeps his hygiene items in the bathroom closet by preference. Continued interview with staff A revealed client #2 keeps his toothpaste in the office by preference and will throw the cap away if not monitored. Staff A further revealed client #2</p>	W 227	<p>Qualified Professional to ensure PCP reflects personal choice and preference for toiletry basket storage.</p> <p>Habilitation Specialist to implement formal goal(s) of toleration of hygiene items in hygiene basket.</p> <p>Behavior analyst to retrain staff on documentation of inappropriate behaviors.</p> <p>The IDT to monitor twice a week for four weeks. In the future, the IDT will continue to monitor through monthly house and QA assessments.</p> <p>DHSR - Mental Health</p> <p>JUN 07 2021</p> <p>Lic. & Cert. Section</p>	07/09/2021
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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE _____ TITLE _____ (X6) DATE _____

Paul Dwyer *Qualified Professional 06/04/21*

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>keeps hygiene and other personal items in multiple places throughout the group home. Further interview on 5/12/21 with staff A and B verified client #2 throws lots of various items away to include staff keys if not closely monitored.</p> <p>Review of records for client #2 on 5/12/21 revealed a PCP dated 10/21/20. Review of the 10/2020 PCP revealed a behavior support plan with target behaviors of verbal aggression, physical aggression, tantrum behavior and refusing habilitation activities. Subsequent review of records revealed no training objective or guidelines to address proper storage of hygiene items or throwing inappropriate items away.</p> <p>Interview with the facility qualified intellectual disabilities professional (QIDP) on 5/12/21 revealed he had become aware that client #2 would throw various things away if not monitored. Interview with the habilitation specialist on 5/12/21 revealed she unaware of client #2's behavior related to the storage of hygiene products or throwing things away. Continued interview with the habilitation specialist verified client #2 should have a program to support proper storage of personal items and throwing inappropriate items away as identified by staff.</p>	W 227		
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