

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 34G166	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 07/22/2021
NAME OF PROVIDER OR SUPPLIER YADKIN II & III			STREET ADDRESS, CITY, STATE, ZIP CODE 3220 & 3224 US HWY 21 HAMPTONVILLE, NC 27020	
(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 192	<p>STAFF TRAINING PROGRAM CFR(s): 483.430(e)(2)</p> <p>For employees who work with clients, training must focus on skills and competencies directed toward clients' health needs.</p> <p>This STANDARD is not met as evidenced by: The facility failed to assure staff training to address the health needs for 3 of 6 clients sampled clients (#1, #2 and #3) relative to toothbrushing in Yadkin II. The findings are:</p> <p>Observations in Yadkin II on 7/22/21 revealed all clients to participate in the breakfast meal at staggered times. Continued observation after the breakfast meal revealed clients to engage in various leisure activities, to complete various chores and to participate in medication administration. Continued observation at 9:05 AM revealed all clients to load the van for transport to the vocational program. At no time during morning observations was it observed for any client to engage in toothbrushing or be prompted to brush their teeth before leaving the group home.</p> <p>Review of records for client #1 on 7/22/21 revealed an adaptive behavior inventory (ABI) dated 7/13/20. Review of client #1's ABI revealed the client has the ability to brush his teeth thoroughly with total independence and the ability to apply toothpaste to his toothbrush with partial assistance. Continued record review for client #1 revealed a dental consult dated 12/22/20 that noted calculus with heavy anterior and posterior buccals.</p>	W 192	<p>The QP will inservice staff on making sure that Clients 1,2 and 3 follow the morning routine of toothbrushing and will ensure prompting as needed.</p> <p>The Clinical team will monitor through observations and Interaction Assessments 2X a week for a period of 1 month on a routine basis to ensure staff are prompting Clients 1,2 and 3 as well as the other clients that live in the house.</p> <p>In the future, the QP will train in following all toothbrushing programs.</p> <p style="text-align: center;">DHSR - Mental Health AUG 13 2021 Lic. & Cert. Section</p>	Sept. 22, 2021

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 192	Continued From page 1 Review of records for client #2 on 7/22/21 revealed an ABI dated 7/9/20. Review of client #2's ABI revealed the client has the ability to brush his teeth thoroughly, apply toothpaste to his toothbrush and clean his gums with total independence. Continued review of records for client #2 revealed a dental consult dated 12/22/20 that noted visible plaque at gumline; patient can brush his teeth but needs staff supervision, encouragement and follow-up to make sure mouth is clean. Review of records for client #3 on 7/22/21 revealed an ABI dated 6/23/20. Review of client #3's ABI revealed the client has the ability to brush his teeth thoroughly, apply toothpaste to his toothbrush and use mouthwash with total independence. Continued review of records for client #3 revealed a dental consult dated 5/18/21 that noted visible plaque at gumline; patient can brush his teeth but needs staff supervision, encouragement and follow-up to make sure mouth is clean. Patient should use a soft toothbrush and fluoride toothpaste twice daily. Interview with the facility program specialist on 7/22/21 verified all clients should be encouraged and prompted by staff to complete oral hygiene after each meal. Continued interview with the program specialist verified staff should have ensured each client had brushed their teeth before leaving their group home. Subsequent interview with the program specialist verified various clients have different skill sets relative to conducting oral hygiene and therefore staff monitoring is important.	W 192	The QP will inservice with staff on making sure Clients 1,2 and 3 follow the morning routine of toothbrushing and will ensure prompting as needed for all clients in the home with regard to toothbrushing. QP will ensure a dental program is developed to address a more thorough toothbrushing regimen for clients 1,2 and 3. In the future, the QP will ensure that all staff are trained in following all toothbrushing programs and are prompting all clients to properly brush their teeth.	Sept. 22, 2021	
W 249	PROGRAM IMPLEMENTATION CFR(s): 483.440(d)(1)	W 249			

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W 249	<p>Continued From page 2</p> <p>As soon as the interdisciplinary team has formulated a client's individual program plan, each client must receive a continuous active treatment program consisting of needed interventions and services in sufficient number and frequency to support the achievement of the objectives identified in the individual program plan.</p> <p>This STANDARD is not met as evidenced by: Based on observations, record review and interviews, the facility failed to assure training objectives listed in the person centered plan (PCP) were implemented as prescribed for 2 of 12 clients (#9 and #11) in Yadkin III. The findings are:</p> <p>A. The facility failed to follow training objectives relative to toileting guidelines for client #9. For example:</p> <p>Afternoon observations in Yadkin III on 7/21/21 at 4:45 PM revealed staff to prompt client #9 to go to the bathroom. Continued observation revealed client #9 to return to the living room area and wipe her hands on a blanket. Further observation at 5:05 PM revealed staff to prompt client #9 to wash her hands to prepare for the dinner meal. Subsequent observation revealed client #9 to enter the bathroom, return to the living room area and again wipe her hands on a blanket. Observation of the group home bathroom revealed no paper towels and the toilet paper roll to sit on the bathroom sink wrapped in its original packaging. At no point during the observation period did staff accompany client #9 to the</p>	W 249	<p>QP will ensure that an inservice will be completed with staff to address monitoring of Client #9 and other individuals when going to the bathroom. Staff will also ensure that there are adequate supplies in the bathroom at all times. All shifts will ensure appropriate monitoring and ensure all clients have access to toileting supplies.</p> <p>QP will inservice all shifts to monitor Client #9 when entering the bathroom to ensure she wipes after toileting and utilizes appropriate hand washing skills.</p> <p>In the future, the QP will ensure that all staff are trained and following all toileting programs in PCP.</p>	Sept. 22, 2021	

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W 249	<p>Continued From page 3 bathroom.</p> <p>Morning observations in Yadkin III on 7/22/21 at 8:15 AM revealed staff to verbally prompt client #9 to go to the bathroom. Further observations revealed client #9 to exit the bathroom, return to the living room area and wipe her hands on her skirt. Observations did not reveal staff to accompany client #9 to the bathroom. At no point during the observation period was staff observed to refill the paper towel dispenser or to unwrap the toilet paper and place it on the toilet paper holder.</p> <p>Review of the records for client #9 on 7/22/21 revealed a PCP dated 3/26/21 which included a toileting skills program. Continued review of records for client #9 revealed that the client has a history of urinary tract infections (UTI), foul odor to urine and urinary incontinence. Further review of the toileting skills program for client #9 indicated that staff will observe client #9 wiping from front to back, staff will monitor client #9 when she enters the bathroom to ensure privacy and staff will monitor to see if she flushes the toilet. Additional review of client #9's toileting program indicated that staff must accompany the client to ensure appropriate wiping and handwashing after toileting.</p> <p>Interview with staff A on 7/22/21 at 9:00 AM verified that the toilet paper was still wrapped in its original packaging and there were no paper towels in the bathroom. Further interview with staff A prompted the staff to assist client #9 to her room to assist her in changing her undergarments. Subsequent interview with staff A confirmed that staff must follow client #9's toileting program as prescribed.</p>	W 249			

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W 249	Continued From page 4 Interview with the facility program specialist on 7/22/21 verified that client #9 should have had a staff member accompany her to the bathroom each time the client goes to the bathroom. Further interview with the program specialist confirmed that all of client #9's goals and interventions were current. Additional interview with the program specialist confirmed that all staff should follow client #9's toileting program as prescribed. B. The facility failed to follow training objectives relative to toileting guidelines for client #11. For example: Observation in Yadkin III on 7/21/21 at 4:48 PM revealed client #11 to enter and use the bathroom while the door remained open. Further observation at 4:50 PM revealed staff to enter the bathroom with client #11 and close the door. Review of client #11's record revealed a PCP dated 3/24/21. Continued review of client #11's PCP revealed a toileting skills program with an implementation date of 6/25/19. Further review of the toileting skills program for client #11 indicated after using the restroom, the client will complete specified toileting skills with a verbal prompt. Subsequent review of the objective revealed client #11's training will concentrate on wiping herself thoroughly from front to back after using the restroom and flushing the toilet. Additional review revealed staff should monitor client #11 when she enters the bathroom to ensure her privacy and to implement training. Staff will observe the client to wipe from front to back after using the restroom and will monitor to see if she	W 249	QP will inservice all staff on ensuring that when Client #11 enters the bathroom she is prompted to close the door for privacy. The staff will then implement her toilet training program as prescribed. The Clinical team will monitor through observation and interaction assessments 2 times a week for a month that staff are monitoring and prompting her for privacy and implementing her toileting program. In the future, the QP will ensure staff are trained and following all toileting programs in the Person Centered Plan.	Sept. 22,2021	

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W 249	Continued From page 5 flushes the toilet. Interview with the facility program specialist on 7/22/21 confirmed the toileting skills program for client #11 was current and verified the guideline related to bathroom privacy should be followed at all opportunities.	W 249			