STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	34G153	A. BUILDING _____ B. WING _____	05/24/2022

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
WILHELM PLACE HOME	630 WILHELM PLACE CONCORD, NC 28026

(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 249	PROGRAM IMPLEMENTATION CFR(s): 483.440(d)(1) 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. This STANDARD is not met as evidenced by: Based on observation, interviews and record reviews, the facility failed to ensure 2 sampled clients (#1 and #4) received a continuous active treatment program consisting of needed interventions as identified in their plan of care (POC) relative to communication, meal preparation and adaptive equipment. The findings are: A. The team failed to ensure a program objective relative to communication was implemented in sufficient frequency to support the need of client #4. For example: Observation in the group home throughout the 5/23/22 - 5/24/22 survey revealed client #4 to participate in various activities in the group home to include a leisure activity, dinner, participating in meal clean up and medication administration. At various times during survey observations on 5/23-24/2022, client #4 was observed to follow directives made verbally by staff when communicating. Review of records for client #4 on 5/24/22	W 249		

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

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W 249	Continued From page 1	W 249		

revealed a POC dated 3/18/22. Review of current training objectives of the 3/22 POC for client #4 revealed two communication programs implemented 4/25/22. Review of client #4's communication program revealed "client #4 will indicate a leisure choice when presented with a 2-item picture choice with 80% accuracy for two consecutive months". Continued review revealed client #4 will complete six new consecutive activities after a gesture prompt during a single session with 90% accuracy for 2 consecutive months.

Continued review of the communication program for client #4 revealed the program should be implemented on first and second shifts during the daily structured routine. Review of program objectives revealed staff will provide the opportunity for client #4 to choose a desired leisure activity when presented with 2-item choices five days a week. Further review of program objectives revealed client #4 will sit at a working table with a carrel to decrease distraction three times a week. Staff will provide client #4 with a supply of 6 preferred activities designed with definite beginning and ending as recommended by TEACCH.

Interview with the facility qualified intellectual disability professional (QIDP) on 5/24/22 verified the communication programs for client #4 are current. Continued interview with the QIDP verified client #4's communication programs should have been implemented as written to support the client's communication needs.

B. The team failed to ensure a program objective was implemented in sufficient frequency to support the needs of client #1 relative to meal

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W 249	Continued From page 2	W 249		

preparation. For example:

Afternoon observations in the group home on 5/23/22 from 4:30 PM - 6:30 PM revealed client #1 to participate in various activities including play with an IPad, assist with meal preparation and participate in the dinner meal. At no point during the observation period was client #1 prompted to scoop 1 menu item out of the bowl and onto her plate.

Morning observations in the group home on 5/24/22 from 6:45 AM - 8:30 AM revealed client #1 to participate in various activities such as participate in grooming, medication administration and the breakfast meal. At no point during the observation period was client #1 prompted to scoop 1 menu item out of the bowl and onto her plate.

Review of the record for client #1 on 5/24/22 revealed a plan of care (POC) dated 9/17/21 which includes the following diagnosis: I/DD, profound; Cerebal Palsy with spastic quadriplegia; loss of hearing (right), profound; and left strabismus. Continued review of the POC for client #1 included the following program goals: pull 10 velcro items off of the tray and place in container, group fitness goal, scoop 1 menu item onto her plate, wash her stomach and complete IPad activities. Further review of the POC habilitation section for client #1 revealed the client should tolerate scooping 1 item of her meal out of a bowl and onto her plate with hand over hand assistance during 1st and 2nd shifts for 5 days a week.

Interview with the QIDP on 5/24/22 revealed that staff should have prompted client #1 to scoop the

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W 249	Continued From page 3 menu item out of her bowl and onto a plate during both dinner and breakfast meals. Continued interview with the QIDP verified that all of client #1's training objectives are current. Further interview with the QIDP verified that staff are trained to run all of client #1's program goals as required.	W 249		