

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

PRINTED: 07/26/2022
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 34G091	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 07/26/2022
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NAME OF PROVIDER OR SUPPLIER LIFE, INC LAVENHAM GROUP HOME	STREET ADDRESS, CITY, STATE, ZIP CODE 3700 LAVENHAM ROAD NEW BERN, NC 28560
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W 130	<p>PROTECTION OF CLIENTS RIGHTS CFR(s): 483.420(a)(7)</p> <p>The facility must ensure the rights of all clients. Therefore, the facility must ensure privacy during treatment and care of personal needs. This STANDARD is not met as evidenced by: Based on observations, record reviews and interviews, the facility failed to ensure privacy was maintained during personal care. This affected 2 of 5 audit clients (#2 and #6). The findings are:</p> <p>A. During observations in the home on 7/25/22 at 4:07pm, Staff C was observed to walk with client #2 down the hallway and into the bathroom. From 4:07pm to 4:14pm, client #2 was observed sitting on the toilet with her pants around her ankles. During the observation, Staff C was observed to walk by the bathroom door. At no time did Staff C prompt client #2 to close the door, nor did Staff C close the door.</p> <p>Review on 7/25/22 of client #2's Individual Program Plan (IPP) dated 3/30/22 revealed client #2 is independent in closing the door for privacy when using the bathroom but staff should monitor as a precautionary measure.</p> <p>Interview on 7/26/22 with the Qualified Intellectual Disabilities Professional (QIDP) II revealed client #2 is independent in closing the bathroom door for privacy. Further interview with the QIDP II confirmed staff should prompt client #2 to close the door and if she doesn't, staff should close the door for her.</p> <p>B. During observations in the home on 7/25/22 at 5:02pm, Staff B was observed to prompt client #6 to go to the bathroom. Client #6 got up and went down the hallway into the bathroom. At 5:03pm,</p>	W 130		
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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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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 130	Continued From page 1 client #6 was observed standing in the bathroom, pants around her ankles, with her buttocks exposed. At no time did staff follow client #6 to ensure the door to the bathroom was closed for privacy. Additional observations in the home on 7/26/22 at 8:10am, client #6 was observed sitting on the toilet. At 6:12am, client #6 was observed to stand up and pull her undergarments and pants up. At no time did staff follow client #6 to ensure the door to the bathroom was closed for privacy. Review on 7/26/22 of client #6's IPP dated 5/13/21 revealed staff monitoring is required to ensure the door to the bathroom is closed for privacy. Interview on 7/26/22 with the QIDP II confirmed staff should have followed client #6 to the bathroom to monitor and ensure the door was closed for privacy.	W 130			
W 227	INDIVIDUAL PROGRAM PLAN CFR(s): 483.440(c)(4) 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. This STANDARD is not met as evidenced by: Based on record review and interviews, the facility failed to ensure client #5's Individual Program Plan (IPP) included objectives to address his needs. This affected 1 of 5 audit clients (#5). The finding is: Review on 7/25/22 of client #5's IPP, dated 10/20/21, revealed his assessed skill level to	W 227			

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W 227	Continued From page 2 include recognizing bills and coins. Further review revealed present objective FA-001 "When presented with a five-dollar bill, I will match three coins correctly." Review on 7/26/22 of client #5's habilitation assessment, dated 4/30/22, revealed present objective FA-001 "I will match three coins correctly". Review on 7/26/22 of client #5's objective data in Therapp revealed present objective FA-001 "I will identify a penny independently". Interview on 7/26/22 with the Qualified Intellectual Disabilities Professional (QIDP) revealed that she was not aware of the objective discrepancy. The QIDP stated that the accurate training objective would be in Therapp and confirmed that identifying a penny was the present objective.	W 227			
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 observations, record reviews and interviews, the facility failed to ensure 4 of 5 audit clients (#3, #4, #5 and #6) received a continuous	W 249			

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W 249	<p>Continued From page 3</p> <p>active treatment program consisting of needed interventions and services as identified in the Individual Program Plan (IPP) in the areas of leisure and opportunities for choice and self management. The findings are:</p> <p>A. During observations in the home throughout the survey on 7/25/22 through 7/26/22, client #3 was observed to mostly sit in a chair in the living room, unengaged in any meaningful leisure activities. At times throughout the observations, client #3 would sit and manipulate a pop-it. At no time was client #3 encouraged to participate in meaningful activities.</p> <p>Review on 7/26/22 of client #3's IPP dated 8/23/21 revealed client #3 tolerates group activities, shares and takes turns with others when prompted, participates in social activities, playing ball, watching sports on TV, bowling, church, walking outside, looking at books and watching TV Land.</p> <p>Interview on 7/26/22 with the Qualified Intellectual Disabilities Professional (QIDP) II confirmed client #3 should be provided with the same opportunity to engage in leisure activities as everyone else and staff should prompt him to engage in meaningful activities.</p> <p>B. During observations in the home throughout the survey on 7/25/22 through 7/26/22, client #4 was observed to mostly sit on the couch in the living room, unengaged in any meaningful leisure activities. At times throughout the observations, client #4 would sit and hold a ball or sleep.</p> <p>Review on 7/25/22 of client #4's IPP dated 9/2/21 revealed client #4 participates in social</p>	W 249			

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W 249	<p>Continued From page 4</p> <p>interactions with peers, watches TV, enjoys sitting on the swing and walking at the mall.</p> <p>Interview on 7/26/22 with the QIDP II confirmed client #4 should be provided with the same opportunity to engage in leisure activities as everyone else and staff should prompt him to engage in meaningful activities.</p> <p>C. During observations in the home throughout the survey on 7/25/22 through 7/26/22, client #6 was observed to mostly sit on the couch in the living room, unengaged in any meaningful leisure activities. Majority of the observation time, client #6 was observed to sit and tap an iPad.</p> <p>Review on 7/26/22 of client #6's IPP dated 5/13/21 revealed client #6 should be encouraged to participate in activities and chores in the home, and her preferred activities include watching or listening to TV, looking at magazines, playing with beads and puzzles.</p> <p>Interview on 7/26/22 with the QIDP II confirmed client #6 should be provided with the same opportunity to engage in leisure activities as everyone else and staff should prompt her to engage in meaningful activities.</p> <p>D. During observations in the home throughout the survey on 7/25/22 through 7/26/22, client #5 was observed to mostly sit on the living room couch, unengaged in any meaningful leisure activities. On 7/25/22 from 3:45pm to 5:58pm, client #5 tapped on his iPad continuously, with the exception of two bathroom breaks. On 7/26/22 from 6:15am to 8:30am, client #5 tapped on his iPad continuously, with the exception of one bathroom break and receiving medication. At</p>	W 249			

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W 249	<p>Continued From page 5</p> <p>no time did staff offer an alternate activity or training activity.</p> <p>Review on 7/25/22 of client #5's IPP revealed that client #5 can help with household chores and in the kitchen. In addition, client #5's leisure skills include playing on the tablet and community outings.</p> <p>Review on 7/26/22 of client #5's Behavior Intervention Plan (BIP) revealed that staff should implement environmental proactive techniques to reduce the probability of behavioral episodes to include a highly structured environment when not doing training or scheduled activities. The BIP further stated that client #5 should always have choices of different types of leisure activities to identify and expand his interests because "if not engaged in an activity, he will spend hours on his tablet".</p> <p>Interview on 7/26/22 with the QIDP II revealed client #5 should be provided with the same opportunity to engage in leisure activities as everyone else and staff should prompt her to engage in meaningful activities.</p>	W 249			