

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

PRINTED: 07/27/2022  
FORM APPROVED  
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>34G211</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>07/26/2022</b>
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NAME OF PROVIDER OR SUPPLIER  <b>MAGNOLIA GROUP HOME</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>928 MAGNOLIA DRIVE ABERDEEN, NC 28315</b>
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W 210	<p>INDIVIDUAL PROGRAM PLAN CFR(s): 483.440(c)(3)</p> <p>Within 30 days after admission, the interdisciplinary team must perform accurate assessments or reassessments as needed to supplement the preliminary evaluation conducted prior to admission.</p> <p>This STANDARD is not met as evidenced by: Based on record review and interview the facility failed to ensure the interdisciplinary team completed preliminary accurate assessments within 30 days after admission. This affected 2 of 2 newly admitted audit clients (#2 and #4). The findings are:</p> <p>A. Review on 7/25/22 of client #2's individual program plan (IPP) dated 6/15/22 revealed she was admitted to the facility on 5/16/22. Further review of her initial interdisciplinary evaluations revealed a speech evaluation could not be located.</p> <p>Interview on 7/25/22 with the Quality Assurance Specialist confirmed a speech evaluation for client #2 had not been completed.</p> <p>B. Review on 7/25/22 of client #4's IPP dated 3/30/22 revealed she was admitted to the facility on 3/1/22. Further review of her initial interdisciplinary evaluations revealed a speech evaluation could not be located.</p> <p>Interview on 7/25/22 with the Quality Assurance Specialist confirmed a speech evaluation for client #4 had not been completed</p>	W 210		
W 227	<p>INDIVIDUAL PROGRAM PLAN CFR(s): 483.440(c)(4)</p> <p>The individual program plan states the specific</p>	W 227		

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 227	<p>Continued From page 1</p> <p>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:</p> <p>Based on observations, interview and record review, the facility failed to assure the individual program plan (IPP) for 1 of 4 audit clients (#6) included objective training to meet the client's positioning and medication administration needs. The findings are:</p> <p>A. During observations at the facility on 7/25/22 from 3:30pm-6:40pm client #6 remained in his wheelchair either in his bedroom, the living area, office or in the dining room. At no time during these observations, was he offered alternate positioning.</p> <p>During observations at the facility on 7/26/22 from 6:00am-8:45am client #6 was positioned in his wheelchair in the living area, his bedroom, the office area or the dining room area. At no time during these observations, was he offered alternate positioning.</p> <p>Interview on 7/25/22 with client #6 in his bedroom area revealed he does not have a chair in his bedroom and the only other alternate positioning he would have in his bedroom would be to transfer to his bed. Additional interview revealed his back sometimes gets tired from sitting in his wheelchair for long periods of time.</p> <p>Review on 7/25/22 of client #6's individual program plan (IPP) dated 2/16/22 revealed client #6 is diagnosed with Status Post Traumatic Brain Injury, Cerebral Palsy, Depression and a Seizure Disorder. Further review of the IPP revealed client #6 is non-ambulatory and uses a wheelchair for</p>	W 227			

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W 227	<p>Continued From page 2</p> <p>mobility. Additional review of the IPP revealed a mechanical hoier lift is used for transfers out of client #6's wheelchair to his bed. There was no information regarding any recommendations for out of wheelchair time or alternate positioning in client #6's IPP.</p> <p>Review on 7/25/22 of client #6's nursing evaluation dated 2/22/22 revealed he is continent of bladder but has bowel incontinence. Further review of this evaluation revealed client #6 has been treated for a lesion in his groin area during the past year.</p> <p>Interview on 7/26/22 with the Director of Quality Assurance confirmed client #6 does not have a chair in his bedroom or any alternate positioning guidelines in his IPP.</p> <p>B. During observations of the medication administration pass on 7/26/22 at 7:00am, staff G assisted client #6 to punch out pills, and told him what medications he was receiving. During the medication pass client #6 received the following: Abilify 5 mg., Cogentin 0.5mg, Celexa 40mg., Keppra 75mg., Protonix 40 mg., Vitamin D3 1,000 units and Aspirin 81 mg. Staff G poured client #6's water and client #6 disposed of his trash.</p> <p>Interview on 7/26/22 with client #6 regarding his medications revealed he understood that his Abilify was to address his diagnosis of Depression. When asked if he knew any of the side effects of his medications, he said, "No, but I probably ought to work on that."</p> <p>Review on 7/26/22 of client #6's IPP dated 2/16/22 revealed he has training goals to assist with putting on his compression socks with 80%</p>	W 227			

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W 227	Continued From page 3 independence, brush his teeth with an electric toothbrush with 80% independence, sweep the dining room floor with a Swiffer brush with 80% independence and range of motion exercises weekly. There is no training in the area of medication administration identified in the IPP.	W 227			
W 249	Interview on 7/26/22 with the Director of Quality Assurance confirmed that medication administration training had not been identified for client #6.  <b>PROGRAM IMPLEMENTATION</b> 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 3 of 4 audit clients (#2, #4 and #6) received a continuous active treatment program consisting of needed interventions and services as identified in the Individual Program Plan (IPP) in the areas of behavioral intervention, self care and home living skills. The findings are:  A. Throughout observations on 7/25/22 from 3:30pm-6:40pm, client #4 was noted to periodically put her thumb in her mouth without	W 249			

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W 249	<p>Continued From page 4</p> <p>redirection from staff. For example: during observations in the living room at 5:00pm, client #4 walked through the room with her thumb in her mouth ( No redirection from staff). At 5:20pm, client #4 was verbally cued to leave the kitchen area by staff B, she walked in and out of the kitchen with her thumb in her mouth. (No redirection from staff). At 6:05pm, client #4 walked back inside from the porch with the Residential Manager (RM) with her thumb in her mouth (No redirection from staff).</p> <p>Review on 7/25/22 of client #4's behavior support program (BSP) H4A revealed client #4 will reduce the frequency of target behaviors to 0 for 10 of 12 months. Further review of this BSP revealed her target behaviors were listed as non-compliance and physical aggression. Additional review of this program revealed staff are to redirect client #4 from putting her fingers in her mouth.</p> <p>Review on 7/25/22 of client #4's IPP dated 3/30/22 revealed staff are to redirect client #4 from putting her hands in her mouth.</p> <p>Interview on 7/26/22 with the Director of Quality Assurance revealed staff should redirect client #4 from putting her hands in her mouth.</p> <p>B. During observations on 7/25/22 from 5:15pm-6:15pm, client #4 was verbally and physically redirected out of the kitchen area where staff A and client #2 were preparing supper. Client #4 reached over client #2 several times and had to be redirected to another area by staff B and the residential manager (RM). At 5:50pm, client #4 attempted to reach over to the stove and was redirected by staff A and the RM to the outside of the facility to a table on the</p>	W 249			

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W 249	<p>Continued From page 5</p> <p>porch. At 6:00pm, client #4 walked into kitchen and attempted to reach over client #2 who was helping with meal preparation. The RM was able to redirect her out of the kitchen area briefly, however several minutes later she walked back into the kitchen area and stood next to the counter. The RM again tried several times to redirect her out of the kitchen. At 6:10pm, she was prompted to sanitize her hands for supper.</p> <p>During observations of supper at 6:15pm, client #4 briefly sat down at the dining room table with clients #1, #2, #3, #5 and #6 and then left to go her bedroom.</p> <p>Interview on 7/25/22 with staff A revealed client #4 has food seeking behaviors and is almost impossible redirect during meal preparation in the kitchen area. When asked if these behaviors had been discussed with the Psychologist, staff A stated, " I am not certain."</p> <p>Interview on 7/25/22 with the RM confirmed client #4's food seeking behaviors are constantly challenging for the direct care staff that work with her. When asked if Psychology staff had been made aware of this issue, the RM stated she did not know if the qualified intellectual disabilities professional (QIDP) had discussed this with the Psychologist.</p> <p>Review on 7/25/22 of client #4's IPP dated 3/30/22 revealed: [client #4] is allowed to eat first at all meals and peers join shortly afterwards. Allows for more time to eat and also decreases attempts to steal food at the table.</p> <p>Interview on 7/26/22 with the quality assurance specialist confirmed staff should redirect client #4</p>	W 249			

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W 249	<p>Continued From page 6</p> <p>from her food seeking behaviors and give her the opportunity to eat before her housemates as described in her IPP.</p> <p>C. Following the supper meal on 7/25/22 client #6, who uses a wheelchair for mobility, took his plate, cups and silverware to the kitchen. After he had taken these items to the kitchen, staff A told him to get his toothbrushing items and to brush his teeth. Client #6 went to his bedroom, retrieved his grooming kit and went into the bathroom alone at 6:30pm and shut the bathroom door. As client #6 came out of the bathroom, the surveyor asked if her had brushed his teeth, he stated, "Yes. "</p> <p>Review on 7/26/22 of client #6's IPP dated 2/16/22 revealed he has a formal toothbrushing goal to brush his teeth with an electric toothbrush with 80% independence for 3 consecutive months.</p> <p>Interview on 7/26/22 with the RM and quality assurance specialist confirmed it was their expectation since client #6 had a formal goal in toothbrushing that direct care staff should accompany him into the bathroom to monitor his level of independence in completing this goal.</p> <p>D. During evening observations at 6:40pm, after client #6 finished brushing his teeth, he took his grooming kit back to his bedroom and remained in his bedroom until the surveyor left the home until 7:00pm. During this time, client #1 and client #2 were finishing their meal at the table. Staff A wiped down the dining room table, poured a pot of hot water into the mop bucket and then began to sweep and mop the dining room floor Client #6 was in his bedroom and did not participate in this</p>	W 249			

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W 249	Continued From page 7 task.  Review on 7/25/22 of client #6's IPP dated 2/16/22 revealed he has a formal objective to use a Swiffer mop to clean the dining room floor after supper with 80% verbal prompts for 3 consecutive review periods.  Interview on 7/26/22 with the quality assurance specialist confirmed client #6 has a formal goal and should be given the opportunity to implement this as frequently as possible.  E. During observations at the facility on 7/26/22 at 8:10am, staff A briefly wiped down the dining room table after mopping the dining room floor after breakfast. Client #2 was seated at the dining room table holding a composition notebook and a pen.  During interview on 7/26/22 client #2 stated, " I usually wipe down the table after breakfast. I don't why I didn't do it this morning."  Review on 7/25/22 of client #2's IPP dated 6/15/22 revealed a formal objective to wipe down the table at home and at the vocational center with 80% accuracy for 3 consecutive reporting periods. Further review of this objective revealed, "Staff should encourage [client #2] to wipe down the table at her home after meals." Interview on 7/26/22 with the quality assurance specialist confirmed client #2 has a formal goal she should be given the opportunity to implement this as frequently as possible.	W 249			
W 460	FOOD AND NUTRITION SERVICES CFR(s): 483.480(a)(1)	W 460			



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W 460	<p>Continued From page 8</p> <p>Each client must receive a nourishing, well-balanced diet including modified and specially-prescribed diets.</p> <p>This STANDARD is not met as evidenced by: Based on observations, record reviews and interviews, the facility failed to ensure prescribed modified diets for 2 of 4 audit clients (#2 and #6) were followed as indicated. The findings are:</p> <p>A. During observations at the facility on 7/25/22 at 6:15pm, client #2 sat down with the other clients for supper. Staff assisted her to serve 1/2 cup rice, 1/2 cup shrimp stir fry, a roll onto her plate. She was also given one small container of mandarin oranges. After client #2 finished her serving, she asked for additional servings of rice and shrimp stir fry. Staff C assisted client #2 to serve second servings of rice and shrimp stir fry onto her plate.</p> <p>Review of the supper menu on 7/25/22 revealed an 1800 calorie diet serving consisted of the following: 4 ounces of shrimp, 3 ounces of stir fry vegetables, 1/2 cup of rice, 1/2 cup of mandarin oranges and 1 roll with selected beverages.</p> <p>Review on 7/25/22 of client #2's individual program plan (IPP) dated 6/25/22 revealed she is prescribed an 1800 calorie weight loss diet and that she should receive low concentrated sweets as she has been diagnosed with Diabetes Mellitus.</p> <p>Review on 7/25/22 of client #2's nutritional evaluation dated 5/19/22 revealed she is prescribed an 1800 calorie weight loss diet and</p>	W 460			

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W 460	<p>Continued From page 9</p> <p>that she should receive low concentrated sweets. Further review of this assessment revealed client #2 has been diagnosed with Diabetes Mellitus, is 61 inches in height and significantly over her desired weight range (DWR).</p> <p>Interview on 7/26/22 with the Residential Manager (RM) and with the Director of Quality Improvement confirmed client #2's diet is current and should be followed.</p> <p>B. During observations at the facility on 7/25/22 at 6:15pm, client #6 propelled in his wheelchair to the dining room table to eat with the other clients for supper. Staff assisted him to serve 1/2 cup rice, 1/2 cup shrimp stir fry, a roll onto his plate and assisted him to pour his beverages. He was also given one small container of mandarin oranges. After client #6 finished his serving, he asked for additional servings of rice and shrimp stir fry. Staff B assisted client #2 to serve second servings of rice and shrimp stir fry onto his plate.</p> <p>Review of the supper menu on 7/25/22 revealed an 1800 calorie diet serving consisted of the following: 4 ounces of shrimp, 3 ounces of stir fry vegetables, 1/2 cup of rice, 1/2 cup of mandarin oranges and 1 roll with selected beverages.</p> <p>Review on 7/25/22 of client #6's physician orders dated 6/10/22 revealed he is prescribed an 1800 calorie weight loss diet.</p> <p>Interview with the facility Nurse and Director of Quality Improvement confirmed client #6's diet is current and should be followed.</p>	W 460			