

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 34G308	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 05/17/2022
NAME OF PROVIDER OR SUPPLIER HEATHCROFT			STREET ADDRESS, CITY, STATE, ZIP CODE 3046 HEATHCROFT COURT CHARLOTTE, NC 28269	
(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 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. This STANDARD is not met as evidenced by: Based on observation, record review and interview, the facility failed to implement training objectives to address identified needs relative to rate of eating. The finding is:</p> <p>Afternoon observations in the group home on 5/16/22 at 5:00 PM revealed client #6 to participate in the dinner meal. The dinner meal consisted of ground beef casserole, baked beans, peas, cut up melons, milk and water. Continued observation revealed client #6 use a high box and spoon only during the dinner meal. Further observation revealed client #6 to eat at a rapid pace. Observations at 5:07 PM revealed client #6 to complete the dinner meal and take her dishes to the kitchen. At no point during the observation was client #6 prompted to slow her rate of eating.</p> <p>Morning observations in the group home on 5/17/22 at 6:25 AM revealed client #6 to participate in the breakfast meal. The breakfast meal consisted of waffles (cut in half), syrup, apple sauce, prune juice, fruit cup, grape juice and coffee. Observations revealed client #6 to eat at a rapid rate with her fingers. Further observations at 6:37 AM revealed client #6 to complete her breakfast meal and take her dishes to the kitchen with staff assistance. Observations did not reveal staff to prompt client #6 to slow her rate of eating.</p>	W 227	<p>In- Service will be completd by QP with all staff regarding following training objectives to address goals on individual plan. OT assessment will be put in file by QP. Goals will be implemented with training objectives for rate of eating and in-serviced by QP. QP will review charts monthly to enusure all identified needs have been addressed.</p> <p>Person - QP or Site Supervisor will be responsible.</p> <p>DHSR - Mental Health JUN 13 2022 Lic. & Cert. Section</p>	

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

Kavandeh Bolin

TITLE

Program Manager

(X6) DATE

6/9/2022

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	Continued From page 1 Review of the record for client #6 on 5/17/22 revealed an ISP dated 2/1/22. Continued review of the ISP for client #6 revealed the following program goals: wipe mouth with napkin, load dishwasher, toothbrush goal, laundry goal, wear glasses to improve vision, vehicle safety, clean bedroom, use the toaster, take out trash and wipe table and an exercise goal. Further review of ISP for client #6 did not reveal training objectives to address rate of eating. The OT assessment for client #6 could not be located during the record review. Interview with the home manager (HM) on 5/17/22 revealed that client #6 eats at a fast pace during most meals. Continued interview with the HM verified that client #6 does not have any training objectives relative to rate of eating. Interview with the qualified intellectual disabilities professional (QIDP) verified that all of client #6's training objectives are current. Further interview with the HM and QIDP verified that client #6 would benefit from a program relative to rate of eating.	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.	W 249	Team will ensure that client has a program objective relative to communication. In-Service will be completed by QP to ensure staff will prompt client to wear wristband for left hand and palm protector on right hand. In-Service will be completed by QP to ensure that training objectives are implemented for all clients. QP and/or site supervisor will monitor weekly to ensure programs are implemented. Person Responsible- QP will complete in-service by 7/9/2022		

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W 249	<p>Continued From page 2</p> <p>This STANDARD is not met as evidenced by: Based on observation, interviews and record review, the facility failed to ensure a continuous active treatment program consisting of needed interventions were implemented as identified in the individual support plan (ISP) for 2 sampled clients (#1, #6). The findings are:</p> <p>A. The team failed to ensure a program objective relative to communication was implemented in sufficient frequency to support the need of client #1. For example:</p> <p>Afternoon observations in the group home on 5/16/22 from 4:00 PM - 5:50 PM revealed client #1 to participate in various activities to include medication administration, participate in the dinner meal, put dishes in the kitchen, participate in a puzzle activity and brush teeth. At no point during the observation period did staff prompt client #1 to wear her wrist band for her left hand and palm protector for her right hand.</p> <p>Morning observations in the group home on 5/17/22 from 6:00 AM - 8:00 AM revealed client #1 to participate in various activities to include participate in the breakfast meal, put dishes in the sink, brush teeth and participate in medication administration. At no point during the observation period was client #1 prompted to wear a palm protector for her right hand or a wear a wrist band for her left hand. Continued observations at 7:45 AM revealed this surveyor to request that staff locate client #1 wrist splint and palm protector. Observations revealed staff were not able to locate client #1's wrist splint and palm protector after asking the client to locate the adaptive equipment in her room.</p>	W 249		
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W 249	<p>Continued From page 3</p> <p>Review of the record for client #1 on 5/17/22 revealed an ISP dated 5/7/21 which included the following program goals: AM/PM toothbrush goal, wear palm protector daily on right hand daily (4 - 8 hours), wear hand splint daily for 4-8 hours on left hand and stay on task. Further review of the ISP and OT assessment dated 5/21 for client #1 revealed the client must wear a wrist splint to keep her wrist in alignment and the palm protector for 4-8 hours daily to keep her fingers from digging into her hands.</p> <p>Interview with the home manager (HM) on 5/17/22 revealed that client #1 does not like to wear her wrist splint and palm protector and will misplace them often. Interview with the HM and qualified intellectual disabilities professional (QIDP) verified that client #1's training objectives are current. Continued interview with the HM and QIDP verified that client #1 should wear her wrist splint and palm protector as prescribed.</p> <p>B. The facility failed to ensure a training objective was implemented for client #6 relative to taking out the trash and cleaning the table. For example:</p> <p>Observation in the group home on 5/16/22 at 5:00 PM revealed client #6 to participate in the dinner meal of lasagna, green peas, fruit, water and punch. Continued observation revealed client #6 to finish meal and take her plate to the kitchen sink. Additional observation revealed client #6 to return to her activity desk in the small living room and resume to have client #6 work on her puzzle activity.</p> <p>Observation in the group home on 5/17/22 at 6:30 AM revealed client #6 to participate in a breakfast meal of waffles, juice, yogurt and coffee.</p>	W 249	<p>The QP will in-service and re-train Heathcroft Group Home DSP staff to ensure proper know and/orledge of client Specific diet orders. QP will observe meal-time weekly to ensure food consistency is accurate and as prescribed.</p> <p>Qualified Professional will complete in-service by July 9, 2022</p>		

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W 249	<p>Continued From page 4</p> <p>Continued observation revealed client #6 to finish breakfast, exit table and taking dishes to the kitchen sink. Further observation revealed client #6 to return to her activity table and resume her puzzle activity. At no point during the observation period did staff prompt client #6 to take out the trash and clean the table.</p> <p>Review of records for client #6 revealed an individual support plan (ISP) dated 2/1/22. Review of the ISP for client #6 revealed training objectives to wipe mouth with napkin, load dishwasher, brush teeth, dry and put away clothes, increase laundry skills, wear glasses to improve vision, vehicle safety, clean bedroom, utilization of appliance (toaster), post meal cleanup (take out trash and wipe table) and an exercise goal.</p> <p>Subsequent review of record for client #6 revealed a life skills assessment dated 1/14/22. Review of the life skills assessment revealed staff must provide a verbal prompt needed for client #6 to take trash out in the correct container and physical assistance needed to wash the counter after use.</p> <p>Interview with the qualified intellectual disabilities professional (QIDP) on 5/17/22 verified client #6 to have training objectives that are completed after meals to load the dishwasher but since the dishwasher is not in working order staff may have forgotten to implement the program. Continued interview with the QIDP verified client #6 has formal training objectives to wipe placemat after meal and take out trash. Further interview with the QIDP verified that staff are responsible for prompting client #6 to complete all training objectives.</p>	W 249	<p>The QP will in-service and re-train Heathcroft Group Home DSP staff to ensure proper know and/orledge of client Specific diet orders. andand will observe meal-time weekly to ensure food consistency is accurate and as prescribed.</p> <p>Qualified Professional will complete in-service by July 9, 2022</p>	
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W 474	<p>MEAL SERVICES CFR(s): 483.480(b)(2)(iii)</p> <p>Food must be served in a form consistent with the developmental level of the client. This STANDARD is not met as evidenced by: Based on observations, record review and interview, the facility failed to provide a specifically prescribed diet for 1 of 3 sampled clients (#6). The finding is:</p> <p>Observation in the group home on 5/17/22 at 6:30 AM revealed client #6 to participate in a breakfast meal of waffles, juice, yogurt and coffee. Continued observation revealed client #6's waffles to be cut in 1/2 pieces. Continued observation revealed client #6 to rapidly eat the waffles with her hand and to cough several times. Observation did not reveal staff to cut client #6's waffles in chopped consistency as prescribed.</p> <p>Review of records for client #6 on 5/17/22 revealed an individual support plan (ISP) dated 2/1/22. Review of the ISP for client #6 revealed a specified diet consisting of 1500 calorie, heart healthy and chopped consistency. Further review of records for client #6 revealed a nutritional assessment dated 2/22.</p> <p>Interview with the facility qualified intellectual disabilities professional (QIDP) on 5/17/22 verified client #6's food should have been chopped and not served in 1/2 pieces. Continued interview with QIDP confirmed that all staff will be in-serviced on ensuring diet order for chopped consistency is followed for all meals.</p>	W 474	<p>The QP will in-service and re-train Heathcroft Group Home DSP staff to ensure proper knowledge of client Specific diet orders. QP and/or site supervisor will observe meal-time weekly to ensure food consistency is accurate and as prescribed.</p> <p>Qualified Professional will complete in-service by July 9, 2022</p>	
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Community Alternatives North Carolina

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www.rescare.com

June 9, 2022

Ms. Clarissa Henry
Mental Health Licensure & Certification Section
NC Division of Health Service Regulation
2718 Mail Service Center
Raleigh, NC 27699-2718

Dear Clarissa Henry,

Please find the enclosed plan of correction for deficiencies cited during the recent Recertification Survey for Heathcroft ICF on May 17, 2022. Deficiencies will be corrected as indicated in the plan of correction.

We would like to request an invitation of return visit on or after July 18, 2022.

Thank you for all your assistance that you provide us in helping meet the needs of the people we serve.

Sincerely

A handwritten signature in black ink that reads "Kasandra Belin".

Kasandra Belin
Program Manager

Respect and Care

Assisting People to Reach Highest Level of Independence