

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

PRINTED: 07/06/2022
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 34G304	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 07/06/2022
NAME OF PROVIDER OR SUPPLIER RALPH SCOTT LIFESERVICES, INC/VETERANS DRIVE			STREET ADDRESS, CITY, STATE, ZIP CODE 500 VETERANS DRIVE ELON COLLEGE, NC 27244	
(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	<p>PROGRAM IMPLEMENTATION CFR(s): 483.440(d)(1)</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, interviews and record reviews, the facility failed to ensure 2 of 4 sampled clients (#1 and #5) received a continuous active treatment program consisting of needed interventions as identified in their individual program plans (IPP's) relative to leisure. The findings are:</p> <p>A. During observations on 7/5/22 at 3:55pm-4:45pm, client #5 was sitting at the dining room table with a Connect 4 game putting chips into the Connect 4 frame. Staff A assisted her in setting the game up and stopped to empty the Connect Four frame several times, once it was full of chips. Several times during this observation, client #5 attempted to put chips into the Connect Four frame, however she did not realize it was full and had not been emptied.</p> <p>Review on 7/6/22 of client #5's individual program plan (IPP) dated 4/25/2022 revealed she has the following diagnoses: Blindness, Autism, Severe Intellectual Disabilities, Generalized Anxiety Disorder and Insomnia. Further review of the IPP revealed, "Can participate in leisure</p>	W 249	<p>W- 249 By August 5th 2022 The IDT will meet to discuss different leisure activities that client # 1 and # 5 would be interested in for active treatment. QP will contact the blind services for client # 5 to discuss more leisure activities appropriate for her skills and abilities. QP will then implement the leisure activities discussed in the meetings and update IPP's for each client. QP will retrain direct care staff on client # 1 and #5 leisure activities in the area of continuous active treatment. Furthermore, continuous active treatment relative to leisure for all other clients will be reviewed with staff. QP will monitor bi weekly then fade out monthly to ensure active treatment is continuous. A copy of trainings will be filed in staff training record.</p>	7/5/22

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

TITLE

(X6) DATE

William Carr

UPA ICF CROSS

7/14/22

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 249	<p>Continued From page 1</p> <p>activities"....can follow one and two step directions and consistently knows the difference between her left and her right.</p> <p>Observation on 7/5/22 of the facility's leisure cabinet revealed the following: Operation board game, Connect 4 game, Bingo game, Candy land game, Bean Bag Toss, several videos and a sensory ball.</p> <p>Interview on 7/6/22 with the habilitation coordinator revealed the facility has not contacted the Division of Blind Services to locate leisure activities for client #5 that would be more appropriate for her skills and abilities.</p> <p>B. During observations in the facility on 7/5/22 from 3:50pm until 4:40pm, client #1 laid in a recliner in the living room while the television was on. Staff B attempted to get client #1 to hold onto a large pom pom, however she refused and did not engage with it. At 4:15pm, client #1 was noted to be asleep in the recliner.</p> <p>Review on 7/5/22 of client #1's IPP dated 7/22/21 revealed she is non-verbal and can be extremely uncooperative, particularly during physician visits. Further review of the physical therapy part of the IPP revealed, "she can benefit from walking and exercising her upper extremities."</p> <p>Observation on 7/5/22 of the facility's leisure cabinet revealed the following: Operation board game, Connect 4 game, Bingo game, candy land game, Bean Bag Toss, several videos and a sensory ball.</p> <p>Interview on 7/5/22 with the Director of ICF Services and the habilitation coordinator revealed</p>	W 249		9/5/22	

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W 249	Continued From page 2 client #1 can be very challenging and has several target behaviors which include: non-compliance, refusal to eat and take medications, banging her head and dumping her plate with food.	W 249			
W 460	Interview with staff A confirmed the facility had not discussed purchasing any additional leisure activities that may benefit client #1 that are matched with her personal interests. FOOD AND NUTRITION SERVICES CFR(s): 483.480(a)(1) Each client must receive a nourishing, well-balanced diet including modified and specially-prescribed diets. This STANDARD is not met as evidenced by: Based on observations, record reviews and interviews, the facility failed to ensure 1 of 4 audit clients (#5) received their specially-modified diets as indicated. The finding is: During observation of meal preparation on 7/5/22 at 5:09pm staff A pureed hamburger helper, green peas and garlic bread in the food processor. While the food was being modified, staff A was observed to add broth to this mixture. The texture appeared ground and had lumps in the mixture. During observations of supper on 7/5/22 at 5:20pm staff B assisted client #5 in serving her food into her built up bowl with a plateguard. The food mixture in her bowl was modified to a ground texture but was noted to have lumps throughout the serving. Client #5 consumed her supper with a spoon without difficulty.	W 460	W- 460 By August 5 th 2022 Dietian will retrain staff on appropriate food modification specific and consistent to client #5 and review all individual's diets. Also, the Dietian will retrain staff on what a well-balanced meal should be for individuals specific for their appropriate diet. The Dietian will also retrain staff on how to properly read and use the menu. QP will monitor Bi weekly and fade out monthly to ensure staff are following the individual's appropriate diet for each individual and the meals are well-balanced and appropriate for each individual and staff are following the menu that the dietian put in place. A copy of all trainings will be filed in staff records.	9/5/22	

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W 460	Continued From page 3 During observations of meal preparation on 7/6/22 at 6:20am, staff C modified scrambled eggs, toast and fruit in the food processor adding broth to the mixture. When staff C was finished modifying food in the food processor, she transferred the mixture into a bowl. The mixture was pureed, did not have any lumps in the mixture and appeared smooth throughout the serving. Observations on 7/6/22 of the breakfast meal at 6:35am revealed client #5 was assisted to serve her food into her modified bowl with a plateguard. She scooped her food using a spoon and ate without difficulty. Review on 7/6/22 of client #5's nutritional evaluation dated 3/7/22 revealed she is to receive a heart healthy pureed diet. Further review revealed she has "poor dentition" which contributes to her need to have her diet texture modified. Interview on 7/6/22 with staff A revealed pureed textures do not have lumps in the mixture and look like, "baby food." Interview on 7/6/22 with staff C revealed she was trained that when modifying textures for clients with specific pureed textures, staff should add broth until the textures looks like baby food or pudding without any lumps in the mixture. Interview on 7/6/22 with the Director of ICF Services and the habilitation coordinator confirmed diets that indicate pureed textures should be uniform throughout without any lumps noted in the mixture. Further interview confirmed	W 460		9/5/22

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W 460	Continued From page 4 this is how staff are trained to modify foods in the food processor to obtain a pureed diet texture.	W 460		9/5/22	