

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

PRINTED: 11/15/2022
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 34G311	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED 11/08/2022
NAME OF PROVIDER OR SUPPLIER RALPH SCOTT LIFESERVICES, INC/ROSEMONT STREET			STREET ADDRESS, CITY, STATE, ZIP CODE 304 ROSEMONT STREET GIBSONVILLE, NC 27217		
(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 250	<p>PROGRAM IMPLEMENTATION CFR(s): 483.440(d)(2)</p> <p>The facility must develop an active treatment schedule that outlines the current active treatment program and that is readily available for review by relevant staff.</p> <p>This STANDARD is not met as evidenced by: Based on observations and confirmed by interviews with staff, the facility failed to ensure the active treatment schedule for 2 of 3 audit clients (#1 and # 5) was flexible enough to accommodate their dining and medication administration needs. The findings are:</p> <p>A. During observations on 11/8/22 in the facility at 6:00am, clients #1, #2, #3, #4 and #5 were sitting at the dining room table preparing to start breakfast. Direct care staff C and the Residential Manager assisted client #1 and client #5 to pour their cereal, milk and serve cinnamon toast onto their plates. As client #5 began scooping his cereal into his mouth with his spoon at 6:04am, staff D asked client #5 to get up from the dining room table to come to the medication closet to get his medications. During additional observations on 11/8/22 at 6:05am, client #5 was observed to receive Vitamin D (5,000 units) Oxybutynin (5 mg), Duloxetine (60 mg), Aripiprazole 5 mg. After consuming his medications with juice, he returned to the dining room table at 6:08am.</p> <p>B. During observations on 11/8/22 in the facility at 6:10am staff D asked client #1 to leave the dining room table where she was eating breakfast which included cereal, cinnamon toast, juice, and water to come to the medication closet to get her morning medications.</p>	W 250			

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 250	<p>Continued From page 1</p> <p>During continued observations in the facility on 11/8/22 at 6:12am, staff D assisted client #1 in administering her medications which included: (1) Emergencee pack, Cetirizine 10mg., Doxepin 50mg., Doxycycline 200 mg., Naltrexone 50 mg., Elderberry capsule, Fluoxetine 20 mg, and Seroquel 50 mg. Client #1 then returned to the dining room table at 6:14am.</p> <p>Interview with staff D on 11/8/22 revealed staff can administer medications an hour before or an after the time prescribed by their physician. When asked if staff routinely administer medications when clients are eating breakfast, staff D stated, "Yes, because [client #4] attends the vocational program and leaves around 8am." Staff D also stated they preferred to administer medications to clients after they had eaten.</p> <p>Interview on 11/8/ 22 with the Residential Manager (RM) revealed they preferred to administer medications to clients after they had eaten so they "would not be receiving medications on an empty stomach."</p> <p>Interview on 11/8/22 with the Qualified Intellectual Disabilities Professional (QIDP) revealed staff always have the option of structuring their active treatment schedule to administer medications an hour before or an hour after medications are prescribed. Further interview acknowledged most of the morning medications are prescribed at 7:00am. The QIDP explained since client #4 leaves for the day program around 8am, staff could start medication administration anytime between 6:00am-8:00am in the mornings. When asked, the QIDP could not locate a daily active treatment schedule which included client #1 and #5's mealtime and medication administration</p>	W 250			

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W 250	Continued From page 2 times.	W 250			
W 254	<p>PROGRAM DOCUMENTATION CFR(s): 483.440(e)(2)</p> <p>The facility must document significant events that contribute to an overall understanding of the client's ongoing level and quality of functioning. This STANDARD is not met as evidenced by: Based on record review and confirmed by interviews with staff, the qualified intellectual disabilities professional (QIDP) failed to review the formal objectives for 2 of 3 audit clients (#1 and #5) to determine if they were making significant progress. The findings are:</p> <p>A. Review on 11/8/22 of client #1's individual program plan (IPP) dated 5/5/22 revealed written formal objectives identify coins (quarter, dime, nickel, and penny) for 120/180 days, will learn 15/20 sign language words and will choose between leisure activities. Review of the progress summaries for these objectives revealed the following:</p> <ol style="list-style-type: none"> 1. Identify coins: 2/3/22: hand over hand assistance. 8/4/22: requires hand over hand assistance. 2. Will learn to use 15/20 sign language cards: No notes since 2/3/22. 3. Will choose between leisure activities: 8/4/22: Continue objective. <p>Interview on 11/8/22 with the QIDP confirmed she did not have any numerical data to summarize client #1's progress for several months and it was difficult to determine client #1's progress towards</p>	W 254			

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W 254	<p>Continued From page 3 completion of these programs.</p> <p>B. Review on 11//8/22 of client #5's IPP dated 10/6/22 revealed formal objectives to independently answer everyday questions about daily activities for 8/10 opportunities, sweep the floor for 120/180 days and independently identify monetary bills and add them for 120/180 days. Review of the progress summaries for these objectives revealed the following:</p> <ol style="list-style-type: none"> 1. Answer questions about everyday activities: No progress summaries for several months. 2. Sweep the dining room floor for 120/180 days: No progress summaries for this objective. 3. Identify monetary bills and add them for 120/180 days: August-November no progress summaries on this objective and limited data collection. <p>Interview on 11/8/22 with the QIDP confirmed she did not have any numerical data to summarize client #5's progress for several months and it was difficult to determine client #5's progress towards completion of these programs.</p>	W 254			