

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

PRINTED: 12/16/2022
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 34G290	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 12/12/2022
NAME OF PROVIDER OR SUPPLIER VOCA-OAKHAVEN DRIVE GROUP HOME			STREET ADDRESS, CITY, STATE, ZIP CODE 12516 OAKHAVEN DRIVE CHARLOTTE, NC 28273	
(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 000	INITIAL COMMENTS	W 000		
W 202	<p>A complaint survey was completed on 12/12/22 for intakes #NC00194164 and #NC00194516. A deficiency was cited.</p> <p>ADMISSIONS, TRANSFERS, DISCHARGE CFR(s): 483.440(b)(4)(ii)</p> <p>If a client is to be either transferred or discharged, the facility must provide a reasonable time to prepare the client and his or her parents or guardian for the transfer or discharge (except in emergencies). This STANDARD is not met as evidenced by: Based on interviews and record review, the facility failed to provide client #1 and the legal guardian with the level of assistance necessary to prepare for a successful transfer from the current group home to an alternative placement. The finding is:</p> <p>Review of documentation during the complaint survey on 12/12/22 revealed a certified letter and qualified professional (QP) notes. Review of the certified letter dated 11/7/22 sent to the legal guardian by the facility program manager (PM) revealed a discharge letter outlining that based on the guardian's request client #1 will be discharged from the facility on 1/6/23. Continued review the letter revealed the PM indicating the guardian should contact the PM at the number provided if they have any questions.</p> <p>Review of qualified intellectual developmental professional (QIDP) notes on 12/12/22 revealed that on 11/4/22 the QIDP left a message for the legal guardian. On 11/8/22 the QIDP attempted to contact the guardian to schedule a conference call. On 11/9/22 the QIDP attempted to contact</p>	W 202		

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 202	<p>Continued From page 1</p> <p>the guardian to reschedule meeting and review documents for discharge. On 11/10/22 the QIDP contacted the legal guardian to schedule exit interview. On 11/11/22 the QIDP conducted a phone meeting with the legal guardian and facility site supervisor (SS) to discuss the client's adjustments back home with family and future plans to include graduating from high school, attending vocational programs, getting back into the community and job readiness program. Continued review of the documentation did not reveal any attempts to secure alternative treatment for the client, no documented attempts to secure funding, medical or other recommended services. No core team meeting minutes discussing treatment or continued services options for the client, no QIDP notes indicating communication with the LME/MCO, and no collaboration with facility nursing for continued medical services or medications.</p> <p>Further review of internal records did not reveal attempts to secure a transition plan to include the facility's options in coordination and transitioning services to Wilson, NC with the LME/MCO and legal guardian prior to the client's discharge from the facility on 1/6/23.</p> <p>Subsequent interview with the PM on 12/12/22 revealed she have not had any further communication with the guardian and that the QIDP has taken the lead on transitioning the client home.</p> <p>Interview with the facility nurse on 12/12/22 revealed transition services for the client (medical services, psychological, medications) were not secured at this time but will be discussed once reviewed.</p>	W 202			

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W 202	Continued From page 2 Interview with the QIDP on 12/12/22 revealed client #1 is currently on therapeutic leave and resides with his father in Wilson, NC. Continued interview with the QIDP revealed the client's guardian came to the group home on 11/7/22 to pick the client up for good but the decision was made that the client will be on therapeutic leave until discharge. Further interview revealed that the facility had not been working with the MCO and legal guardian to create a transition plan for client #1 once he is discharged from the group home on 1/6/23.	W 202			