

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: 34G289	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED 12/14/2022
NAME OF PROVIDER OR SUPPLIER VOCA-SANDBURG GROUP HOME			STREET ADDRESS, CITY, STATE, ZIP CODE 9317 SANDBURG AVENUE CHARLOTTE, NC 28213		
(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, review of records and interview, the person centered plan (PCP) failed to have guidelines or training objectives to meet identified behavioral needs relative to client (#3). The finding is:</p> <p>Observations at the group home on 12/13/22 from 4:15 PM - 5:15 PM revealed client #3 to sit at the dining table, transfer to the living room, participate in the dinner meal, stand up from the table, wash his hands and transition back to the living room. Continued observations revealed client #3 to hit himself in his torso and head on several occasions while being prompt by staff.</p> <p>Observations on 12/14/22 from 6:30 AM - 8:00AM revealed client #3 to sit in the living room, participate in the breakfast meal, return to the living room, participate in medication administration and return to living room where he remained seated. Continued observations revealed client #3 to hit himself several times in the head after being prompted by staff to complete specific tasks. At no point during the observation period did staff redirect client #3 to refrain from hitting himself.</p> <p>Review of records for client #3 on 12/14/22 revealed an individual support plan (ISP) dated 1/17/22. Review of client #3's ISP revealed a diagnosis of autism, profound IDD, schizoaffective disorder, s/p right ear trauma,</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	Continued From page 1 chronic allergic rhinitis, cataract in right eye and hypertension. Continued review of records for client #3 revealed a behavior support plan (BSP) dated 2/15/22 with the following targeted behaviors listed: inappropriate masturbation or touching of genital area, persistent food seeking and bolting. Interview with site supervisor (SS) on 12/14/22 revealed client #3 has been displaying behaviors such as hitting himself in the torso and head for quite some time. Continued interview with the SS revealed client #3 usually displays this behavior when he's frustrated and at times he may need to use the restroom. Continued interview revealed client #3 requires verbal redirection when he is exhibiting these behaviors. Interview with the qualified intellectual disabilities professional (QIDP) on 12/14/22 revealed client #3 has been displaying this type of behavior since she has been employed at the group home. Continued interview with the QIDP revealed she is currently the interim behaviorist for the home. Further interview with the QIDP confirmed client #3 does not have guidelines or training objectives implemented to address current self-injurious behavior and can benefit from implementing formal training objectives to address these behaviors.	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	W 249			

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W 249	<p>Continued From page 2</p> <p>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 observation, interview 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 1 sampled client (#5). The findings are:</p> <p>A. The facility failed to ensure interventions were implemented relative to eyeglasses for client #5. For example:</p> <p>Observations throughout the survey period from 12/13/22-12/14/22 revealed client #5 to participate in various activities without her eyeglasses. Continued observations revealed client #5 to participate in activities such as coloring, helping in the kitchen, a dance activity, participation in medication administration, grooming and mealtimes. Further observations revealed client #5 to squint while participating in a coloring activity. At no point during the observation period did staff offer client #5 her eyeglasses.</p> <p>Review of the record for client #5 on 12/14/22 revealed an individual support plan (ISP) dated 3/5/22 which includes the following program goals: wear her eyeglasses throughout the day, set the table, wash hair, collect mail from mailbox, laundry goal, toothbrush goal, expressive language activities goal, receptive language goal and a toileting goal. Review of</p>	W 249		

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W 249	<p>Continued From page 3</p> <p>vision consults dated 2/19/21 and 3/11/22 did not reveal client #5's eyeglasses were discontinued by a medical professional.</p> <p>Interview with the site supervisor (SS) on 12/14/22 revealed client #5 does not like to wear her glasses. Interview with the qualified intellectual disabilities professional (QIDP) on 12/14/22 revealed client #5 has broken her eyeglasses. Continued interview with the QIDP revealed client #5 eyeglasses should be discontinued because she does not like to wear them. Further interview with the QIDP revealed all of client #5's program goals are current. Additional interview with the QIDP revealed management will follow up with a medical professional to determine if client #5's eyeglasses should be discontinued.</p> <p>B. The facility failed to ensure interventions were implemented relative to a communication goal for client #5. For example:</p> <p>Afternoon observations during the survey period from 12/13/22-12/14/22 revealed client #5 to participate in various activities in the facility. Continued observations revealed two picture communication boards on the wall in the dining area. Further observations did not reveal staff to offer client #5 two picture choices to request what she wants for 2 out of 2 days.</p> <p>Review of the record for client #5 on 12/14/22 revealed an ISP dated 3/5/22. Continued review of the ISP revealed the following program goals: offer two picture choices, toileting goal, receptive language goal, toothbrush goal, wash hair, collect mail from mailbox, set the table and wear her glasses. Further review of the record revealed</p>	W 249			

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W 249	<p>Continued From page 4</p> <p>the following intervention for expressive communication activities: staff will offer two pictures, once sign cue and one gestural cue. "Only offer something she can have. Staff should point to pictures as you sign. If she says no, offer again at a later time. If she declines twice, record the refusal behavior".</p> <p>Interview with the qualified intellectual disabilities professional (QIDP) on 12/14/22 revealed staff should run the communication goals for client #5 on a daily basis. Continued interview with the QIDP revealed client #5's goals are current. Further interview with the QIDP verified staff have been trained to run client #5's communication goals as required.</p>	W 249		