

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

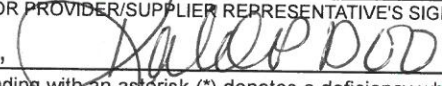
PRINTED: 07/12/2022  
FORM APPROVED  
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>34G060</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>07/06/2022</b>
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NAME OF PROVIDER OR SUPPLIER  <b>SMITH STREET HOME</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>112 SMITH STREET CLEVELAND, NC 27013</b>
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W 130	<p><b>PROTECTION OF CLIENTS RIGHTS</b> CFR(s): 483.420(a)(7)</p> <p>The facility must ensure the rights of all clients. Therefore, the facility must ensure privacy during treatment and care of personal needs. This STANDARD is not met as evidenced by: Based on observation and interview, the facility failed to ensure privacy during toileting for 1 of 3 sampled clients (#3). The findings is:</p> <p>Observations in the group home on 7/5/22 at 5:35 PM revealed client #3 to enter the bathroom leaving the door open. Continued observation revealed staff C to promptly follow client #3 to the bathroom and stand in the doorway with the door open while the client used the toilet. Further observation revealed staff C to then make an inappropriate comment to client #3 regarding use of the toilet.</p>	W 130	<p>W 130</p> <p>The Program Manager will in-service staff on Client #3 right to privacy during toileting. The clinical team will monitor two times a week for one month then on a routine basis through Interaction Assessments and observations and to ensure client #3 and other people supported are afforded the right to privacy during toileting. In the future the Qualified Professional will ensure staff are trained to provide people the right to privacy during toileting.</p>	9/4/22
W 189	<p>Interview with the program manager (PM) on 7/6/22 confirmed staff should ensure privacy to all clients during personal needs.</p> <p><b>STAFF TRAINING PROGRAM</b> CFR(s): 483.430(e)(1)</p> <p>The facility must provide each employee with initial and continuing training that enables the employee to perform his or her duties effectively, efficiently, and competently. This STANDARD is not met as evidenced by: Based on observations and interviews, the facility failed to ensure staff were sufficiently trained in hygiene methods specific to ensuring paper supplies were accessible in bathrooms for 5 of 6 clients (#1, #2, #3, #4, and #6). The finding is:</p> <p>Observation in the group home on 7/5/22 - 7/6/22 revealed two bathrooms utilized by clients #1, #2,</p>	W 189	<p>W 189</p> <p>The Program Manager will in-service the Qualified Professional and Residential Team Leader on ensuring the necessary supplies are available in the group home at all times to ensure hygiene can be completed thoroughly. The clinical team will monitor two times a week for one month then on a routine basis through Interaction Assessments and observation to ensure all necessary products are in the homes and in stock for client's to complete necessary hygiene. In the future the Residential Team Leader will ensure there are adequate suppose in the home to complete hygiene task.</p>	9/4/22

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE  
**Katherine Benton,**  Director of Operations  
 TITLE: Director of Operations  
 (X6) DATE: 7/13/2022

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 189	Continued From page 1 #3, #4 and #6. Continued observations of both bathrooms revealed no toilet paper to be located in either bathroom throughout observations on 7/5/22 or 7/6/22. Observations on 7/5/22 and 7/6/22 revealed clients #1, #2, #3, #4 and #6 at various times to enter into the bathrooms with no toilet paper, close the door and to exit the bathroom. Subsequent observation in the group home on 7/6/22 revealed both bathrooms to remain with no paper supplies throughout the observation period.	W 189			
	Interview with staff A on 7/6/22 confirmed that there were no toilet paper in both bathrooms and then verified there were none in the group home. Continued interview with staff D confirmed that all bathrooms should have an ample supply of paper products. Interview with the program manager on 7/6/22 verified all bathrooms should have an ample supply of paper products available to clients when occupying the bathrooms in the group home.		W 242	9/4/22	
W 242	INDIVIDUAL PROGRAM PLAN CFR(s): 483.440(c)(6)(iii)  The individual program plan must include, for those clients who lack them, training in personal skills essential for privacy and independence (including, but not limited to, toilet training, personal hygiene, dental hygiene, self-feeding, bathing, dressing, grooming, and communication of basic needs), until it has been demonstrated that the client is developmentally incapable of acquiring them. This STANDARD is not met as evidenced by: Based on observations, interviews and record review, the facility failed to provide training in personal skills relative to self-feeding for 1 of 6	W 242	A Team Meeting will be held to discuss client #3 dining skills. The Habilitation Specialist will in-service the staff on the results of the Team Meeting. The Qualified Professional will revise the Person-Centered Plan to reflect the Team Meeting. The clinical tem will monitor two times a week for one month then on a routine basis through Mealtime Assessments to ensure client #3 dining skills are being addressed. In the future the Qualified Professional will ensure the Person-Centered Plan includes interventions to address client needs.		

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W 242	<p>Continued From page 2 clients (#3). The finding is:</p> <p>Observation in the group home on 7/5/22 revealed the dinner meal to consist of baked chicken and gravy, rice, green peas, and pudding. Continued observation revealed client #3 to have a full place setting and to eat independently. Further observation revealed client #3 to eat with their hands throughout the meal and to receive multiple prompts from staff to use utensils, to which client #3 briefly complied. Observation in the group home on 7/6/22 revealed the breakfast meal to consist of scrambled eggs, waffles, apple slices, apple juice and milk. Continued observation revealed client #3 to have a full place setting and to eat independently. Further observation revealed client #3 to eat with their hands throughout the meal without prompts from staff to use utensils.</p> <p>Review of client #3's record on 7/6/22 revealed person-centered plan (PCP) dated 10/20/21. Continued review of the record revealed a occupational therapy (OT) evaluation dated 9/9/21. Review of the OT evaluation revealed client #3 requires no adaptive equipment. Continued review of the OT evaluation revealed client #3 "prefers to finger feed, will pick up spoon or fork with left hand pronated grasp but only briefly attempts before returning to finger feeding if not given frequent verbal and gestural prompts from staff. Client is able to use a regular fork, spoon, cup and plate."</p> <p>Interview with the program manager (PM) on 7/6/22 revealed client #3 has never had formal programming to address their preference to fingerfeed. Continued interview with the PM confirmed client is capable of using utensil with</p>	W 242	Type text here		

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W 242	Continued From page 3 staff support and would benefit from a formal training goal.	W 242			
W 249	<b>PROGRAM IMPLEMENTATION</b> 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.  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 person-centered plan (PCP) for 6 of 6 clients. The findings are:  A. The facility failed to ensure active treatment programs were implemented as prescribed for client #1.  Observations in the group home on 7/5/22 at 4:00 PM - 5:45 PM and on 7/6/22 from 7:00 AM - 9:15 AM revealed client #1 to participate in meals, medication administration, and to take dishes to the kitchen. Continued observation on 7/5/22 at 4:12 PM revealed client #1 to enter the bathroom. Further observation revealed client #1 to use the toilet while the door remained open, then to exit without washing his hands. Subsequent	W 249	W 249 A, B, C, D, E, and F  The Habilitation Specialist and Qualified Professional will in service staff on the Person-Centered Plan for all people supported in the home. The in-service will also include active treatment. The clinical tem will monitor two times a week for one month then on a routine basis through Interaction Assessments and observations to ensure active treatment is occurring and Person-Centered Plans are being implemented as prescribed. In the future the Qualified Professional will ensure staff are trained to provide active treatment and implement Person Centered Plans as prescribed.	9/4/22	

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W 249	<p>Continued From page 4</p> <p>observations during the 7/5/22 to 7/6/22 revealed client #1 to sit in the common area unengaged for long periods of time. Additional observation revealed at no time during observation was client #1 provided choices to participate in a leisure activity or prompt to engage in active treatment programs.</p> <p>Review of the record for client #1 on 7/6/22 revealed a person-centered plan (PCP) dated 1/27/22. Continued review of the PCP revealed training objectives to include; medication, oral hygiene, put on a shirt, wipe mouth during meals, privacy by closing the bathroom door when in use, engage in a leisure activity, improve safety while eating, expressive language and bathe.</p> <p>Interview with the facility program manager (PM) on 7/6/22 verified client #1 training objectives are current and should have been offered and encouraged to participate as implemented.</p> <p>B. The facility failed to ensure active treatment programs were implemented as prescribed for client #2.</p> <p>Observations in the group home on 7/5/22 at 4:00 PM - 5:45 PM and on 7/6/22 from 7:00 AM - 9:15 AM revealed client #2 to participate in meals and medication administration. Continued observations during the 7/5-6/22 survey revealed client #2 spent most of the time sitting on the sofa in the common area unengaged with a blanket covering his entire body. Further observation revealed at no time during observation was client #2 provided choices to participate in a leisure activity or prompt to engage in active treatment programs.</p>	W 249			

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W 249	<p>Continued From page 5</p> <p>Review of the record for client #2 on 7/6/22 revealed a person-centered plan dated 7/27/21. Continued review of the PCP revealed training objectives to include; participate in oral hygiene, assist in punching medication, wash face and place his place setting items.</p> <p>Interview with the facility program manager (PM) on 7/6/22 verified client #2 training objectives are current and should have been offered and encouraged to participate as implemented.</p> <p>C. The facility failed to ensure active treatment programs were implemented as prescribed for client #3.</p> <p>Observations in the group home on 7/5/22 at 4:00 PM - 5:45 PM and on 7/6/22 from 7:00 AM - 9:15 AM revealed client #3 to participate in meals, medication administration, and to take dishes to the kitchen. Continued observations revealed all facility staff to communicate with client #3 with verbal requests. Further observations during the 7/5-6/22 survey revealed client #3 to spend the majority of time sitting on the sofa in the common area unengaged for long periods of time. Subsequent observations revealed at no time during observation was client #3 provided choices to participate in a leisure activity or prompt to engage in active treatment programs or utilization of a real object communication board.</p> <p>Review of the record for client #3 on 7/6/22 revealed a person-centered plan (PCP) dated 10/20/21. Continued review of the PCP revealed training objectives to include; use of real object communication board, press independently, learn to close door for privacy, tolerate oral hygiene, and wash hands.</p>	W 249		
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W 249	Continued From page 6  Interview with the facility program manager (PM) on 7/6/22 verified client #3 training objectives are current and should have been offered and encouraged to participate as implemented. Continued review with the PM verified client 3's communication goal has implemented about a year ago and confirmed it should have been offered to increase his communication skills.  D. The facility failed to ensure active treatment programs were implemented as prescribed for client #4.  Observations in the group home on 7/5/22 at 4:00 PM - 5:45 PM and on 7/6/22 from 7:00 AM - 9:15 AM revealed client #4 to participate in meals, puts cups on the table for dinner, medication administration, and to take dishes to the kitchen. Continued observations during the 7/5-6/22 survey revealed client #4 to spend most of the time in his room and at standing in the hallway unengaged watching staff in the kitchen. Further observations revealed at no time during observation was client #4 provided choices to participate in a leisure activity or prompt to engage in active treatment programs.  Review of the record for client #4 on 7/6/22 revealed a person-centered plan (PCP) dated 8/12/21. Continued review of the PCP revealed training objectives to include; cutting food into appropriate pieces, expressive language making choices, evacuate house during fire drills, and floss teeth.  Interview with the facility program manager (PM) on 7/6/22 verified client #4 training objectives are current and should have been offered and	W 249			

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W 249	<p>Continued From page 7 encouraged to participate as implemented.</p> <p>E. The facility failed to ensure active treatment programs were implemented as prescribed for client #5.</p> <p>Observations in the group home on 7/5/22 at 4:00 PM - 5:45 PM and on 7/6/22 from 7:00 AM - 9:15 AM revealed client #1 to participate in meals and medication administration. Continued observations revealed client #5 to spend the majority of his time in his room. Further observation revealed facility staff to periodically check on client. Subsequent observation revealed at no time during the 7/5-6/22 survey was client #5 provided choices to participate in a leisure activity or prompt to engage in active treatment programs.</p> <p>Review of the record for client #5 on 7/6/22 revealed a person-centered plan (PCP) dated 1/19/22. Continued review of the PCP revealed training objectives to include; privacy, identify imitation dollar, brushing gumline, and expressive language.</p> <p>Interview with the facility program manager (PM) on 7/6/22 verified client #5 training objectives are current and should have been offered and encouraged to participate as implemented.</p> <p>F. The facility failed to ensure active treatment programs were implemented as prescribed for client #6.</p> <p>Observations in the group home on 7/5/22 at 4:00 PM - 5:45 PM and on 7/6/22 from 7:00 AM - 9:15 AM revealed client #1 to participate in meals, medication administration, and to take dishes to</p>	W 249			



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W 249	Continued From page 8 the kitchen. Continued observations revealed client #6 to spend the majority of his time in his room. Further observation revealed facility staff to periodically check on client. Subsequent observation revealed at no time during the 7/5-6/22 survey was client #6 provided choices to participate in a leisure activity or prompt to engage in active treatment programs.  Review of the record for client #6 on 7/6/22 revealed a person-centered plan (PCP) dated 6/11/21. Continued review of the PCP revealed training objectives to include; respecting personal space, shampoo hair and behavior.  Interview with the facility program manager (PM) on 7/6/22 verified client #6 training objectives are current and should have been offered and encouraged to participate as implemented.	W 249		
W 463	<b>FOOD AND NUTRITION SERVICES</b> CFR(s): 483.480(a)(4)  The client's interdisciplinary team, including a qualified dietitian and physician must prescribe all modified and special diets. This STANDARD is not met as evidenced by: Based on observations, interviews and record review, the facility failed to ensure special diets were provided to 2 of 3 non-sampled clients (#2, #5) and 1 of 3 sampled clients (#4). The findings are:  A. The facility failed to provide the prescribed diet for client #2. For example:  Observation in the group home on 7/5/22 revealed the dinner meal to consist of baked chicken and gravy, rice, green peas, pudding,	W 463	W 463 A, B, C  The Program Manager and nursing will in-service staff on all people supported prescribed diet orders. The clinical team will monitor two times a week for one month then on a routine basis through Mealtime Assessments to ensure client #2, #4, and #5 prescribed diets are being followed. In the future the Qualified Professional and nursing will ensure diets are implemented as prescribed.	9/4/22

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W 463	<p>Continued From page 9</p> <p>milk and sugar free beverage. Continued observation revealed client #2 to participate in the meal with assistance from staff. Further observation revealed client #2 to finish the dinner meal without receiving an Ensure supplement. Observation in the group home on 7/6/22 revealed the breakfast meal to consist of scrambled eggs, waffles, apple slices, apple juice and milk. Continued observation revealed client #2 to participate in the meal with assistance from staff. Further observation revealed client #2 to finish the breakfast meal without receiving an Ensure supplement.</p> <p>Review of client #2's record on 7/6/22 revealed person-centered plan (PCP) dated 7/27/21. Continued review of the record revealed a nutritional evaluation dated 6/10/21. Review of the nutritional evaluation revealed client #2's prescribed diet as weight gain diet, ground consistency, Ensure 3x daily.</p> <p>Interview with staff D on 7/6/22 confirmed the client #2 did not received the Ensure supplement for two of two meals observed. Interview with the program manager on 7/6/22 confirmed client's PCP and nutritional evaluation are current. Continued interview with the program manager verified client #2 should have received the Ensure supplement as prescribed.</p> <p>B. The facility failed to provide the prescribed diet for client #5. For example:</p> <p>Observation in the group home on 7/5/22 revealed the dinner meal to consist of baked chicken and gravy, rice, green peas, pudding, milk and sugar free beverage. Continued observation revealed client #5 to participate in the</p>	W 463			

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W 463	<p>Continued From page 10</p> <p>meal with assistance from staff. Further observation revealed client #5 to finish the dinner meal without receiving an Ensure supplement. Observation in the group home on 7/6/22 revealed the breakfast meal to consist of scrambled eggs, waffles, apple slices, apple juice and milk. Continued observation revealed client #5 to participate in the meal with assistance from staff. Further observation revealed client #5 to finish the breakfast meal without receiving an Ensure supplement.</p> <p>Review of client #5's record on 7/6/22 revealed person-centered plan (PCP) dated 1/19/22. Review of the PCP revealed client #5's prescribed diet as 1/4" consistency, weight gain, nectar thick liquids, avoid nuts unless chopped and mixed with other foods, Ensure 3x a day for weight gain.</p> <p>Interview with staff D on 7/6/22 confirmed the client #2 did not received the Ensure supplement for two of two meals observed. Interview with the program manager on 7/6/22 confirmed client's PCP and nutritional evaluation are current. Continued interview with the program manager verified client #2 should have received the Ensure supplement as prescribed.</p> <p>C. The facility failed to provide the prescribed diet for client #4. For example:</p> <p>Observation in the group home on 7/6/22 revealed the breakfast meal to consist of scrambled eggs, waffles, apple slices, apple juice and milk. Continued observation revealed client #4 to participate in the meal independently. Further observation revealed client #4 to finish the breakfast meal without receiving one bowl of</p>	W 463		

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

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STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>34G060</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____  B. WING _____		(X3) DATE SURVEY COMPLETED  <b>07/06/2022</b>
NAME OF PROVIDER OR SUPPLIER  <b>SMITH STREET HOME</b>			STREET ADDRESS, CITY, STATE, ZIP CODE <b>112 SMITH STREET CLEVELAND, NC 27013</b>		
(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 463	Continued From page 11 Fiber One.  Review of client #4's record on 7/6/22 revealed person-centered plan (PCP) dated 8/12/21. Continued review of the record revealed a nutritional evaluation dated 6/10/21. Review of the nutritional evaluation revealed client #4's prescribed diet as 1800 calorie, 1/4" consistency, add 1 bowl of Fiber One cereal with breakfast.  Interview with the program manager on 7/6/22 confirmed client #4's PCP and nutritional evaluation are current. Continued interview with the program manager verified client #4 should have received the Fiber One as prescribed.	W 463			