

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 34G145	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED 03/28/2023
NAME OF PROVIDER OR SUPPLIER PARK AVENUE HOME			STREET ADDRESS, CITY, STATE, ZIP CODE 105 PARK AVENUE CREEDMOOR, NC 27522		
(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 130	<p>PROTECTION OF CLIENTS RIGHTS 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 staff interviews, the facility failed to ensure privacy for 1 of 3 audit clients (#2), during treatment and care of personal needs. The finding is:</p> <p>During observations on 3/27/23 at 4:20pm, client #2 sat in a wheelchair at the dining room table with a plastic grocery bag on the back of his wheelchair with a urinal sticking out of the top of the bag.</p> <p>Further observations on 3/28/23 at 7:10am, client #2 sat in a wheelchair at the dining room table with a plastic grocery bag on the back of his wheelchair with a urinal sticking out of the top of the bag.</p> <p>Interview on 3/27/23 with staff A revealed client #2 has the urinal in the bag on the wheelchair because they take it to the day program with him.</p> <p>Interview on 3/28/23 with the Qualified Intellectual Disabilities Professional (QIDP) confirmed that the client has the urinal on the back of his wheelchair because staff take it with him to the day program. The QIDP confirmed the urinal should be in a grocery bad inside of a bookbag so it is unable to be seen by others.</p>	W 130			
W 252	<p>PROGRAM DOCUMENTATION CFR(s): 483.440(e)(1)</p> <p>Data relative to accomplishment of the criteria specified in client individual program plan</p>	W 252			

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 252	<p>Continued From page 1</p> <p>objectives must be documented in measurable terms.</p> <p>This STANDARD is not met as evidenced by: Based on observations, record reviews and interviews, the facility failed to ensure data relative to the accomplishment of objective criteria was documented in measurable terms. This affected 2 of 3 audit clients (#3 and #6). The findings are:</p> <p>A. Review on 3/27/23 of client #3's Individual Program Plan (IPP) dated 2/22/23 revealed formal training programs for straightening her dresser drawer clothing with data to be collected weekly on Monday and Thursday on 2nd shift; toothbrushing with data to be collected weekly Monday through Friday with data to be collected on 1st and 2nd shift.</p> <p>Review on 3/28/23 of client #3's program plan data sheets for February 2023 revealed 4 days of documentation for straightening dresser drawer clothing, 13 days of documentation on 1st shift and 9 days of documentation on 2nd shift for toothbrushing.</p> <p>B. Review on 3/27/23 of client #6's IPP dated 9/21/22 revealed a formal training program for washing upper body with data to be collected weekly on Monday through Friday on 2nd shift.</p> <p>Review on 3/28/23 of client #6's program plan data sheet for February 2023 revealed 6 days of documentation for washing upper body.</p> <p>Interview on 3/28/23 with the habilitation</p>	W 252			

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

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W 252	Continued From page 2 specialist confirmed several days of documentation were missing for goals for clients #3 and #6.	W 252			
W 460	<p>FOOD AND NUTRITION SERVICES CFR(s): 483.480(a)(1)</p> <p>Each client must receive a nourishing, well-balanced diet including modified and specially-prescribed diets.</p> <p>This STANDARD is not met as evidenced by: Based on observations, record review and interviews, the facility failed to ensure 2 of 3 audit clients (#2 and #6) received their specially prescribed diets as indicated.</p> <p>A. During observations at the day program on 3/27/23 at 12:05pm, the clients sat at the table to begin lunch. Client #2 was served meatloaf, mashed potatoes, chopped turnips and an individual size bag of Doritos. Client #2's meatloaf was cut and the pieces varied in size from 1 inch or larger and Doritos were served whole.</p> <p>Further observations at the home on 3/27/23 at 5:00pm, client #2 received 2 pieces of baked chicken breast. The chicken breast were cut into 1 inch or larger pieces.</p> <p>During observations in the home on 3/28/23 at 7:52am, client #2 received grits and raisin toast. Client #2 consumed his toast whole.</p> <p>Record review on 3/27/23 of client #2's Annual Nutritional Evaluation dated 10/10/22 revealed all foods should be cut 1/2 inch.</p>	W 460			

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W 460	<p>Continued From page 3</p> <p>B. During observations at the day program on 3/27/23 at 12:05pm, client #6 received penne pasta with meatballs and a bag of doritos. Client consumed pasta whole and asked staff to cut her meatballs. Meatballs were cut into approximately 1/2 inch pieces. Doritos were served whole.</p> <p>Further observations in the home on 3/27/23 at 5:00pm, client #6 received baked chicken breast, scalloped potatoes and green beans. Client #6 asked staff to cut up her chicken and pieces were approximately 1 inch. Scalloped potatoes and green beans were whole.</p> <p>Record review on 3/27/23 of client #6's Annual Nutritional Evaluation dated 9/12/22 revealed all foods should be cut 1/4 inch.</p> <p>Interview and review on 3/28/23 of diets posted in the home with the home manager confirmed client #2's food is supposed to cut into 1/2 inch pieces and client #6's food is supposed to be cut into 1/4 inch pieces.</p>	W 460			