STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	34G084	A. BUILDING _____ B. WING _____	03/28/2023

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
SKILL CREATIONS OF GREENVILLE	2701 W 5TH STREET GREENVILLE, NC 27835

(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	PROTECTION OF CLIENTS RIGHTS CFR(s): 483.420(a)(7) 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 observations, record review and interviews, the facility failed to ensure client #5 had the right to privacy during care of his personal needs. This affected 1 of 6 audit clients. The finding is: During morning observations in the home on 3/28/23 at 7:08am, client #5 ran from a bathroom in a back hallway of the home to his bedroom near the front entrance of the home. The client was completely naked. At 7:10am, client #5 ran from his bedroom to the same bathroom again. The client was completely naked. During the observations, Staff I walked closely behind the client as he exited both areas. Interview on 3/28/23 with Staff I revealed she could not be sure if client #5 has a bathrobe. Review on 3/28/23 of client #5's Individual Program Plan dated 11/7/22 revealed client #5 has privacy guidelines in place to assist staff in ensuring his privacy. Interview on 3/28/23 with the Facility Director confirmed client #5 does not have a bathrobe to wear when he enters and exits the bathroom at bath time.	W 130		
W 249	PROGRAM IMPLEMENTATION CFR(s): 483.440(d)(1) As soon as the interdisciplinary team has formulated a client's individual program plan,	W 249		

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.

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	34G084	A. BUILDING _____ B. WING _____	03/28/2023

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
SKILL CREATIONS OF GREENVILLE	2701 W 5TH STREET GREENVILLE, NC 27835

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W 249	Continued From page 1	W 249		

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 observations, record review and interview, the facility failed to ensure clients received a continuous active treatment program consisting of needed interventions and services as identified in the individual program plan (IPP) regarding the formal implementation of objectives and integrative activities. This affected 3 of 6 audit clients (#4, #8 and #14). The findings are:

A. During afternoon observations on 3/37/23 from 3:30pm-4:15pm (45 minutes) client #8 was seated in a wheelchair in group 2 in the front activity room with staff A, staff B, staff C, staff E and staff G supervising activities. Staff A asked the clients in the group if they knew the names of administrative staff. There were no responses from the clients in this group which included client #8. During continued observations on 3/27/23 from 3:30-4:15pm, staff B asked client #8 if she was asleep in her wheelchair as her head nodded several times. Client #8 was not offered other activities during this time.

During additional observations in the facility on 3/27/23 client #14 spent time in his bedroom between 3:45pm-4:15pm. He returned to the front activity room at 4:15pm, in the group which included client #8. Staff A initiated a sign language activity with a non-verbal client and

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	34G084	A. BUILDING _____ B. WING _____	03/28/2023

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
SKILL CREATIONS OF GREENVILLE	2701 W 5TH STREET GREENVILLE, NC 27835

(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 249	Continued From page 2	W 249		

asked client #14 if he knew the signs for help, eat and drink. Client #14 initially tried to participate in this activity however, staff G turned on an IPAD with a music video which made it difficult for client #14 to hear staff A and client #14 rolled his wheelchair away from the table. Client #14 was not offered any additional activities during this time.

During continued observations on 3/27/23 from 4:15pm-5:05pm (50 minutes) staff A attempted to start an activity on client rights. Staff A read client rights off a laminated card, Client #8 was observed to sit in her wheelchair and nod and client #14 sat in his wheelchair in the group, not participating in the activity. No other activities or choices were provided until 5:05pm when staff E assembled a connect 4 game and client #14 took turns putting connect 4 chips into a frame.

Review of the client's active treatment schedule on 3/27/23 which was posted in the activity room revealed clients were to participate in recreation/music therapy arts, crafts, home living chores and cleaning their bedrooms between 3:30pm-5:30pm.

Review on 3/27/23 of client #8's educational evaluation dated 9/28/22 revealed when provided structured leisure activities client #8 likes to look at magazines, participate in music activities, arts and crafts activities and can make choices with vocalizations and gestures.

Review on 3/27/23 of client #14's individual program plan (IPP) dated 8/31/22 revealed he is verbal and make leisure choices such as participating in music and arts and crafts activities.

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	34G084	A. BUILDING _____ B. WING _____	03/28/2023

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
SKILL CREATIONS OF GREENVILLE	2701 W 5TH STREET GREENVILLE, NC 27835

(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 249	Continued From page 3 During observations on 3/27/23 at 3:50pm client #14 was in his bedroom and commented on the many pictures that were taped on his bedroom wall. He stated, "I did those." Interview with the habilitation coordinator on 3/27/23 revealed the program schedule for the afternoon should be followed and that staff have several choices of programs and activities to choose from to involve clients during afternoon structured activities. B. During observations on 3/27/23 of supper at 6:15pm, client #8 sat in her wheelchair wearing an adult clothing protector with a plate, plateguard, napkin, mugs with handles and adaptive utensils. Staff D assisted client #8 to serve pureed barbeque chicken nuggets, carrots, beans and ice cream onto her plates and bowl. Client #8 also had an Ensure supplement at her placesetting. Staff H tried several times to assist client #8 with scooping however, she struck him several times and he backed away until she started her meal. Staff H then assisted client #8 as needed. Client #8 had a large amount of spillage on her clothing protector, around her mouth and on the table. Staff D did not offer client #8 a napkin and at 6:45pm had soaked her clothing protector and had food around her mouth. Staff D used client#8's clothing protector to wipe her mouth. Staff D removed client #8's plate at the end of the meal and cleaned her placesetting. During observations on 3/28/23 of breakfast at 8:15am, client #8 was assisted in serving oatmeal, pureed toast and yogurt onto her plate with a plateguard. Client #8 also was provided an	W 249		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	34G084	A. BUILDING _____ B. WING _____	03/28/2023

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
SKILL CREATIONS OF GREENVILLE	2701 W 5TH STREET GREENVILLE, NC 27835

(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 249	Continued From page 4	W 249		

Ensure supplement by staff G. Client #8 had a napkin at her placesetting and was assisted to put an adult clothing protector at the beginning of the meal. Client #8 was not prompted to use her napkin by staff G and by the end of the meal at 8:35am, her clothing protector was soaked and she had a large amount of food on her face and on her hands. Staff G used client #8's clothing protector to wipe her mouth at the end of the meal. Staff G assisted client #8 to put her plates, cups into a bin and then staff cleaned her placesetting at the table.

Review on 3/28/23 of client #8's educational evaluation dated 9/28/22 revealed she can feed herself and needs to be prompted frequently to use her utensils instead of her hands. Further review revealed client #8 requires prompting to use her napkin during the meal.

Review on 3/27/23 of client #8's IPP dated 10/19/22 revealed she has a formal program to wipe her placesetting at the table after meals which was implemented on 8/4/22.

Interview with the habilitation coordinator and the qualified intellectual disabilities professional revealed client #8's formal programs are current and that she should be assisted with a napkin at meals.

C. During evening observations in the home on 3/27/23 from 3:28pm - 6:12pm, client #4 was not engaged in activities. The client was positioned in her wheelchair or in a chair near other clients with her head on her tray top. Staff periodically rubbed the client's shoulder or called her name. Client #4 remained unresponsive and unengaged.

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	34G084	A. BUILDING _____ B. WING _____	03/28/2023

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
SKILL CREATIONS OF GREENVILLE	2701 W 5TH STREET GREENVILLE, NC 27835

(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 249	Continued From page 5 Interview on 3/27/23 with Staff K revealed client #4 takes a lot of medication and sleeps a lot. Additional interview indicated the client can participate in activities when she is awake and alert. Review on 3/28/23 of client #4's IPP dated 5/11/22 revealed, "Depending on the activity [Client #4] will share materials when prompted. [Client #4] will typically interact with staff...[Client #4] likes music..." The plan noted, "[Client #4] does require frequent prompting to participate in programming. [Client #4] seems to enjoy programming involving music and will at most times participate more readily in these activities. [Client #4] learns best by role playing and observing." Additional review of the plan indicated, "[Client #4] participates in many activities that take place in a group setting... [Client #4's] participation in group activities as well as structured leisure times should continue." The IPP noted, "Staff continue to use graduated guidance to allow [Client #4] to be as independent as possible in this process." Further review of client #4's Programming Intervention Strategies dated 5/11/22 revealed, "...staff will attempt to wake/arouse [Client #4] with a light physical touch on her should and calling her name. If [Client #4] does not wake, staff will continue to attempt to wake [Client #4] for programming activity/goal training. Once [Client #4] is alert, staff will proceed with activity/task using graduated guidance to engage [Client #4]..." Interview on 3/28/23 with the Facility Director confirmed staff should continue to attempt to	W 249		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	34G084	A. BUILDING _____ B. WING _____	03/28/2023

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
SKILL CREATIONS OF GREENVILLE	2701 W 5TH STREET GREENVILLE, NC 27835

(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 249	Continued From page 6 engage client #4 for her participation in activities. D. During dinner observations in the home on 3/27/23 at 6:25pm, Staff M began feeding client #4 her meal. Client #4's head was downward towards her plate, her were eyes closed and her body leaned to the right side. Throughout the meal, the staff consistently pushed the client's head up and placed food into her mouth. The staff used the same technique to assist the client with drinking from a cup with a straw. Interview on 3/27/23 with Staff M revealed client #4 usually consumes her food in this manner and this is how she was trained to feed the client. Review on 3/28/23 of client #4's Feeding Guidelines dated 10/19/03 revealed, "If necessary, staff should use graduated guidance to feed herself...If necessary, staff may feed her the remainder of her meal." Additional review of Programming Intervention Strategies dated 5/11/22 noted for activities such as feeding, staff should "attempt to wake/arouse [Client #4] with a light physical touch on her shoulder and calling her name..." The guidelines indicated, "PLEASE BE SURE THAT [CLIENT #4] IS COMPLETELY ALERT before feeding/meals." Interview on 3/28/23 with th Facility Director confirmed client #4's guidelines should be followed as written.	W 249		
W 340	NURSING SERVICES CFR(s): 483.460(c)(5)(i) Nursing services must include implementing with other members of the interdisciplinary team, appropriate protective and preventive health	W 340		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	34G084	A. BUILDING _____ B. WING _____	03/28/2023

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
SKILL CREATIONS OF GREENVILLE	2701 W 5TH STREET GREENVILLE, NC 27835

(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 340	Continued From page 7 measures that include, but are not limited to training clients and staff as needed in appropriate health and hygiene methods. This STANDARD is not met as evidenced by: Based on observations, record review and interviews, the facility failed to ensure staff were sufficiently trained to appropriately document on the Medication Administration Record (MAR) while administering medications. The finding is: During observations of medication administration in the home on 3/27/23 at 4:17pm, client #3's MAR was noted to have been signed in the space for her Refresh Tears eye drops .5%. At 4:19pm, the Medication Technician (MT) administered one drop into client #3's left eye. Additional observations at 4:22pm revealed the MT signed the MAR after dispensing pills for client #4 into a pill cup. At 4:23p, client #4 ingested the pills. During an interview with the MT on 3/27/23, when asked if she normally signs the MAR prior to client's receiving their medications, the MT indicated the MAR should be signed after medications are given. Review on 3/28/23 of the facility's Medication Administration policy (Revised 2022) revealed, "Documentation on the MAR is completed immediately after the client swallows or is given his/her medication or treatment before going on to the next client...MAR's should never be completed before the client actually receives their medication/treatment." Interview on 3/28/23 with the Facility Director confirmed the policy should have been followed.	W 340		
W 460	FOOD AND NUTRITION SERVICES	W 460		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	34G084	A. BUILDING _____ B. WING _____	03/28/2023

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
SKILL CREATIONS OF GREENVILLE	2701 W 5TH STREET GREENVILLE, NC 27835

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W 460	Continued From page 8 CFR(s): 483.480(a)(1) Each client must receive a nourishing, well-balanced diet including modified and specially-prescribed diets. This STANDARD is not met as evidenced by: Based on observations, record review and interviews, the facility failed to ensure client #1's prescribed diet was followed as written. This affected 1 of 6 audit clients. The finding is: A. During lunch observations at the day program on 3/27/23 at 11:40am, client #1 ingested a ham and cheese sandwich, potato chips, fruit cup (peaches), applesauce, tomato juice and water. The client's potato chips were in a Ziploc sandwich bag which was completely full. Closer observations revealed the chips covered the entire plate when emptied out. Client #1 consumed his entire lunch meal. Review on 3/28/23 of the lunch menu (for 3/27/23) revealed 1 serving of chips was the serving size for a regular diet. Interview on 3/27/23 with Staff J revealed the Ziploc bag of chips is prepared by the kitchen cook. The staff acknowledged there were a lot of chips in each client's serving. Interview on 3/28/23 with the Staff L indicated 8 oz would equal one serving of chips and an 8 oz serving spoon would be used to measure each serving. B. During dinner observations in the home on 3/27/23 at 6:12pm, client #1 served himself two	W 460		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	34G084	A. BUILDING _____ B. WING _____	03/28/2023

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
SKILL CREATIONS OF GREENVILLE	2701 W 5TH STREET GREENVILLE, NC 27835

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W 460	Continued From page 9	W 460		

boneless chicken wings, beans, carrots, a slice of wheat bread, cup of ice cream, tea, milk and water. Just before he began to eat, client #1 asked for more chicken and is allowed to serve himself two more pieces of chicken. It should be noted that other clients at the table were served two chicken wings. Client #1 consumed his entire dinner meal.

Review on 3/28/23 of the dinner menu (for 3/27/23) revealed 4oz of chicken wings was the serving size for a regular diet.

C. During breakfast observations in the home on 3/28/23 at 8:09am, client #1 began serving himself oatmeal, a slice of wheat bread, a cup of yogurt, milk, juice and water. The client used a large spoon to place an undetermined amount of oatmeal onto his plate. Client #1 consumed the food items and asked for more oatmeal. The client was told he had already consumed his servings. As the staff left area, client #1 retrieved the bowl of oatmeal, served himself another large spoonful and consumed it.

Interview on 3/28/23 with Staff C revealed a serving spoon should have been used to measure the appropriate serving of oatmeal. When asked how much oatmeal was served, the staff stated, "I'm not sure."

Review on 3/28/23 of the breakfast menu (for 3/28/23) revealed 1/2 cup of oatmeal was the serving size for a regular diet.

Additional review on 3/28/23 of client #1's nutritional evaluation dated 10/28/22 indicated, "...Current regular diet is slightly below his estimated calorie needs. Some weigh loss is

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	34G084	A. BUILDING _____ B. WING _____	03/28/2023

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
SKILL CREATIONS OF GREENVILLE	2701 W 5TH STREET GREENVILLE, NC 27835

(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 460	Continued From page 10 likely to occur, which is desirable due to morbid obese status...Recommendation: Continue current dietary plan. Monitor weight and meal consumption during adjustment period." Interview on 3/28/23 with the Facility Director confirmed client #1 consumes a regular diet and staff should be following the menu as well as using appropriate serving spoons to ensure correct portions are served.	W 460		