

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

PRINTED: 04/06/2023  
FORM APPROVED  
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>34G202</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>C</b> <b>04/05/2023</b>
NAME OF PROVIDER OR SUPPLIER  <b>LIFE, INC LAKEVIEW</b>			STREET ADDRESS, CITY, STATE, ZIP CODE <b>102 MIDWAY LANE</b> <b>ROANOKE RAPIDS, NC 27870</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 000	INITIAL COMMENTS	W 000		
W 342	<p>NURSING SERVICES CFR(s): 483.460(c)(5)(iii)</p> <p>Nursing services must include implementing with other members of the interdisciplinary team, appropriate protective and preventive health measures that include, but are not limited to training direct care staff in detecting signs and symptoms of illness or dysfunction, first aid for accidents or illness, and basic skills required to meet the health needs of the clients.</p> <p>This STANDARD is not met as evidenced by: Based on record review and interviews, the facility failed to ensure staff were sufficiently trained in reporting medical concerns. This affected 1 audit client (#1). The finding is:</p> <p>Interview with the residential manager (RM) revealed on 3/29/23 client #1's Mother arrived at the facility and decided to take her home to utilize therapeutic leave. The RM stated that client #1 has been at home on therapeutic leave since 3/29/23.</p> <p>Interview on 3/30/23 with staff A revealed she worked on 3/29/23. Further interview confirmed client #1 exhibited target behaviors of self-injury, aggression and agitation on 3/29/23. Staff A stated she was bathing client #1 when client #1's Mother arrived at the facility and stepped into the bathroom and noted several bruises on client #1's arms, legs and wanted to know what happened. Staff A explained client #1 had engaged in several target behaviors on 3/29/23 which resulted in her</p>	W 342		

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 342	<p>Continued From page 1</p> <p>receiving crisis medication. Staff A stated client #1's Mother decided to sign her out for therapeutic leave and that she had not returned her to the facility as of 3/30/23.</p> <p>Interview on 3/30/23 with staff C revealed client #1 exhibited target behaviors of self-injury, aggression and agitation on 3/29/23 and the previous shift told her client #1 had received crisis medication. Further interview confirmed client #1's Mother took her on therapeutic leave after arriving at the facility on 3/29/23.</p> <p>Interview on 3/30/23 with the qualified intellectual disabilities professional (QIDP) confirmed she had been notified of client #1's target behaviors on 3/29/23 and was told she had received crisis medications. The QIDP stated client #1's Mother had signed her out on therapeutic leave on 3/29/23 and had not returned to the facility as of 3/30/23. The QIDP stated she had received 2 incident reports for bruises to the back of client #1's left leg and a bruise on client #1's pelvic area that staff suspected may be the result of client #1's self-injurious and aggressive behaviors during 3/28/23 and on 3/29/23.</p> <p>Interviews on 3/30/23 and on 4/5/23 with representatives of the local sheriff's department confirmed they had interviewed several direct care staff, client #1's Mother and were reviewing camera footage provided by the facility for 3/28/23 and 3/29/23. Interviews confirmed evidence seemed to indicate client #1 had engaged in several self-injurious behaviors after a surgical procedure on 3/23/23 which may have resulted in bruises to her arms, legs and abdomen. During the interview on 4/5/23 the sheriff's department representative also shared</p>	W 342			

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W 342	<p>Continued From page 2</p> <p>pictures of bruises to client #1 which included: bruise on her right upper arm, large bruise on her abdomen, bruise on her right leg, bruise on her right arm and bruise on her left forearm.</p> <p>Review on 4/5/23 of incident reports provided by the RM revealed the following:</p> <p>A. Incident report dated 3/27/23 which revealed a bruise on the back of client #1's leg about the size of a 50 cent piece discovered when client #1 was in the bathroom by staff D.</p> <p>B. Incident report dated 3/29/23 which revealed a bruise on client #1's pelvic (lower abdomen) area when staff C took client #1 to the bathroom.</p> <p>Review on 3/29/23 of the facility's injury reporting policy dated 12/5/21 revealed,"an accident/injury report is to be completed for all consumer injuries and accidents that cause or could cause an injury/harm to a consumer. Accidents involve occurrences of falls, self-injurious behaviors, aggression by other clients and so forth that could cause injury."</p> <p>Interview on 4/5/23 with the RM and the Director of Social Work confirmed they were conducting an internal investigation of client #1's injuries that was initiated when client #1's Mother contacted the local sheriff's department on 3/29/23. Further interview revealed staff A had failed to document the additional bruises she discovered when bathing client #1 on the evening of 3/29/23 which included: a bruise on her upper right arm, bruise on the back of her right arm and bruising on her left forearm. Additional interview confirmed staff are aware of the incident reporting policy and this should be consistently followed.</p>	W 342			

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