

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

PRINTED: 04/12/2023
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 34G332	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED 04/11/2023
NAME OF PROVIDER OR SUPPLIER NORWOOD AVENUE HOME			STREET ADDRESS, CITY, STATE, ZIP CODE 2510 NORWOOD AVENUE GOLDSBORO, NC 27530		
(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 129	<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 provide each client with the opportunity for personal privacy. This STANDARD is not met as evidenced by: Based on observation, record reviews, and interviews, the facility failed to assure the right to privacy for 1 of 6 audit clients (#5). The finding is:</p> <p>Observation on 4/10/23 at 5:15pm in client #5's bedroom revealed a large window, extending to ground level, directly beside client #5's bed. No curtains, blinds, or covering were used on client #5's window.</p> <p>Interview on 4/11/23 with Staff D revealed that client #5 did not allow curtains to stay on the window and tore them down frequently.</p> <p>Review on 4/10/23 of client #5's mental health plan (MHP), dated 4/21/22, revealed a target behavior of property damage.</p> <p>Interview on 4/11/23 with the qualified intellectual disabilities professional (QIDP) revealed that blinds had been put on the window and may have been pulled down. The QIDP stated that client #5 frequently pulled window coverings down. The QIDP stated that client #5 needed privacy in his bedroom.</p> <p>Interview on 4/11/23 with the program director revealed that client #5 needed privacy. The QIDP stated that a special privacy film may be applied to the window to address client #5's need for privacy.</p>	W 129			
W 436	<p>SPACE AND EQUIPMENT CFR(s): 483.470(g)(2)</p>	W 436			

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 436	<p>Continued From page 1</p> <p>The facility must furnish, maintain in good repair, and teach clients to use and to make informed choices about the use of dentures, eyeglasses, hearing and other communications aids, braces, and other devices identified by the interdisciplinary team as needed by the client. This STANDARD is not met as evidenced by: Based on observations, record review and interviews, the facility failed to ensure 1 of 6 audit clients (#6) was taught to use and make informed choices regarding the use of his eyeglasses. The finding is:</p> <p>During observations throughout the survey on 4/10 - 4/11/23, client #6 did not wear eyeglasses. The client was not prompted or encouraged to wear eyeglasses.</p> <p>Review of client #6's eye exam, dated 7/20/21, revealed a prescription for full-time glasses.</p> <p>Review of client #6's individual program plan (IPP), dated 1/10/23, revealed a prescribed full-time glasses.</p> <p>Review of client #6's comprehensive functional assessment (CFA), dated 1/10/23, revealed client #6 should wear glasses full-time.</p> <p>Interview on 4/11/23 with Staff D revealed that client #6 should be wearing his glasses.</p> <p>Interview on 4/11/23 with the qualified intellectual disabilities professional (QIDP) revealed client #6 often chooses to not wear glasses. The QIDP stated staff should prompt client #6 to wear his glasses.</p>	W 436			

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W 436	Continued From page 2 Interview on 4/11/23 with the program director revealed that staff should prompt client #6 to wear full-time glasses.	W 436			