

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 34G095	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED 05/10/2023
NAME OF PROVIDER OR SUPPLIER OAK STREET GROUP HOME-ST. MARK			STREET ADDRESS, CITY, STATE, ZIP CODE 1801 OAK STREET CHARLOTTE, NC 28269		
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W 227	<p>INDIVIDUAL PROGRAM PLAN CFR(s): 483.440(c)(4)</p> <p>The individual program plan states the specific objectives necessary to meet the client's needs, as identified by the comprehensive assessment required by paragraph (c)(3) of this section. This STANDARD is not met as evidenced by: Based on observation, record review and interview, the facility failed to assure the individual habilitation plan (IHP) included interventions to support 2 of 3 sampled clients (#2, #4) during mealtimes. The findings are:</p> <p>Observations in the group home on 5/10/23 at 6:45 AM revealed clients to participate in the breakfast meal. The breakfast meal consisted of the following: Cheese grits, biscuits, jelly, butter, watermelon pieces and water. Continued observations at 7:00 AM revealed client #2 to participate in the breakfast meal as her scoop plate continued to slide forward. Observations revealed client #2 to use her left hand to hold the plate in place to prevent it from slipping forward.</p> <p>Subsequent observations at 7:00 AM revealed client #4 to participate in the breakfast meal as her high sided divided dish continued to slide off of the placemat. Continued observations revealed various staff to continuously prompt client #4 to pull her plate in front of her.</p> <p>Review of the record for client #2 on 5/10/23 revealed an IHP dated 10/11/22. Continued review of the record for client #2 revealed an occupational therapy assessment (OT) dated 2/20/20 which indicated the client has the following adaptive equipment: deep dish plate or lip plate, curved spoon and fork and communication devices. Review of the record did</p>	W 227			

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 227	Continued From page 1 not reveal a dycem mat to use during mealtimes. Review of the record for client #4 revealed an IHP dated 2/21/23. Continued review of the record for client #4 revealed an OT assessment dated 3/1/22 which indicated the client has the following adaptive equipment: AFOs, gait belt and build up handle utensils. Further review of the record did not reveal a dycem mat to aid in improving independence during mealtimes. Interview with the home manager (HM) on 5/10/23 revealed clients #2 and #4 are independent during mealtimes with the assistance of adaptive equipment and staff prompts. Interview with the qualified intellectual disabilities professional (QIDP) revealed clients #2 and #4 have not had dycem mats as a part of their interventions and/or mealtime guidelines. Further interview with the QIDP revealed clients #2 and #4 could benefit from using dycem mats during mealtimes to improve their level of independence.	W 227			
W 249	PROGRAM IMPLEMENTATION 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:	W 249			

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W 249	<p>Continued From page 2</p> <p>Based on observation, interview and record review, the facility failed to ensure a continuous active treatment program consisting of needed interventions were implemented as identified in the individual habilitation plan (IHP) for 1 of 3 sampled clients (#2). The finding is:</p> <p>Afternoon observations in the group home on 5/9/23 at 5:20 PM revealed client #2 to sit at the dining table and participate in the dinner meal. The dinner meal consisted of the following: Fried chicken, fried okra pieces, mashed potatoes and gravy, lemonade and birthday cake. Continued observations at 5:25 PM revealed client #2 to stuff her mouth with large pieces of chicken. Observations revealed staff to prompt client #2 to take a drink with her mouth full. Observations at 5:30 PM revealed client #2 to again to fill her mouth with large pieces of chicken skin. Further observations revealed staff I to pull the chicken apart into bite size pieces. At no point during the observation did staff prompt client #2 to take a sip of drink after two bites of food.</p> <p>Review of the record for client #2 on 5/10/23 revealed an IHP dated 10/11/22 which indicated the following program goals: Choose a household activity when present with two photos, exercise goal for right knee, rate of eating goal (take a sip of drink between two bites of food) and wipe the table after breakfast. Continued review of the record for client #2 revealed a nutritional assessment dated 8/8/22 which indicated the following diet: high fiber, heart healthy, chopped meats to decrease choking, other foods chopped as tolerated and double portions at lunch and dinner.</p> <p>Interview with the home manager (HM) on</p>	W 249			

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W 249	Continued From page 3 5/10/23 revealed the clients were having a special meal in celebration of another client's birthday. Continued interview with the HM revealed staff should have prompted client #2 to take a drink between two bites of food as prescribed. Interview with the qualified intellectual disabilities professional (QIDP) on 5/10/23 revealed staff have been trained to follow the rate of eating training objective for client #2 due to her seizure disorder diagnosis and history of choking. Continued interview with the QIDP verified staff should follow client #2's program goals and diet order as prescribed.	W 249			
W 474	MEAL SERVICES CFR(s): 483.480(b)(2)(iii) Food must be served in a form consistent with the developmental level of the client. This STANDARD is not met as evidenced by: Based on observation, record review and interview, the facility failed to assure prescribed diets were implemented and food consistency was served in a form according to the developmental level of 4 of 6 clients (#1, #2, #3, #4). The findings are: Observation in the home on 5/9/2023 at 5:30 PM revealed client #1 to participate in a dinner meal consisting of the following: crispy fried chicken, mashed potatoes, fried okra pieces, lemonade, and water. Continued observation of the dinner meal revealed client #1 to receive and consume a whole chicken leg with fried okra pieces and mashed potatoes with a plastic spoon. At no point during the dinner meal was staff observed to cut client #1's crispy chicken into a chopped consistency.	W 474			

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W 474	Continued From page 4 Subsequent observation at 5:30 PM revealed client #2 to consume a whole chicken leg with fried okra pieces and mashed potatoes and cup of water. Continued observation revealed client #2 to place a large piece of chicken skin in her mouth with minimal chewing and the home manager (HM) to prompt the client to take a drink while attempting to swallow the large piece of chicken skin. Further observation revealed staff I to break up the chicken into bite size pieces. At no point during the observation did staff cut the chicken into a chopped consistency. In addition, at no point did staff add 1 tablespoon of olive oil to client #2's dinner meal. Additional observation at 5:30 PM revealed client #4 to participate with 1:1 assistance by staff in the dinner meal consisting of fried chicken, fried okra pieces, mashed potatoes, lemonade and water. At no point during the observation did staff cut the chicken and okra into a chopped consistency. In addition, at no point did staff add 1 teaspoon of olive oil to client #4's dinner meal. Observations on 5/10/23 6:50 AM revealed client #2 to participate in the breakfast meal which consisted of the following: cheese grits, one biscuit, diced watermelon, and water. Continued observation revealed client #2 to eat the biscuit in whole form. At no point during the observation did staff cut client #2's biscuit into a chopped consistency. Subsequent observations at 7:00 AM revealed client #1 to participate in the breakfast meal. The breakfast meal consisted of the following: cheese grits, one biscuit, diced watermelon, and water. Continued observations revealed client #1	W 474			

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W 474	<p>Continued From page 5</p> <p>to eat the biscuit in whole form. Observations did not reveal staff to cut client #1's biscuit into a chopped consistency.</p> <p>Review of records for client #1 on 5/10/23 revealed an Individual Habilitation Plan (IHP) dated 4/18/2023. Continued review of the IHP revealed a diet order as follows: heart healthy, chopped as tolerated by client, double portions meat and poultry, serve vegetables and fish at lunch, push water intake, snacks of ½ cup yogurt, sliced apples w/almond butter and turkey or almond butter sandwich.</p> <p>Review of records for client #2 on 5/10/23 revealed an IHP dated 10/11/22. Further review of the IHP revealed goals as follows: choose a household activity when presented two photos, exercise goal (right knee), rate of eating goal (take a sip to drink between two bites of food) and wipe table after breakfast. Continued review of the IHP revealed a diet order as follows: heart healthy, chopped meats, other foods as tolerated (to decrease choking), double portions at lunch and dinner, add one teaspoon of olive oil at dinner, provide a shake with ice cream (snack) and one slice of toast with almond butter (snack). At no point did staff chop client #2's dinner meal or add the olive oil to the meal as prescribed by the IHP.</p> <p>Review of records for client #3 revealed an IHP dated 2/21/2023. Continued review of the IHP a diet order as follows: chopped consistency to improve ability to chew and swallow foods safely and efficiently, heart healthy as tolerated, double portions breakfast, lunch, and dinner, add 1 teaspoon of almond butter to hot cereal at breakfast, Breakfast: water, decaf coffee or herb</p>	W 474			

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W 474	<p>Continued From page 6</p> <p>tea, Lunch: water, ice herb tea Dinner: water, herb tea.</p> <p>Review of records for client #4 revealed an IHP dated 12/01/22. Continued review of the IHP revealed a diet order as follows: high fiber, high calorie, high fat, chopped as tolerated by the client, one teaspoon olive oil at lunch and dinner, add ketchup or spaghetti sauce to all meals as needed, teaspoon almond butter and 1 teaspoon wheat germ to hot cereal, prune juice 4oz, 1 cup vanilla yogurt and ensure plus add 2/3 cup vanilla ice cream.</p> <p>Interview with the home manager (HM) on 5/10/23 revealed the staff's failure to follow the prescribed diet orders for clients #1, #2, #3 and #4 was thought to be due to a special meal provided for one of the client's birthday; however, the HM relayed that all diet orders should have been followed as prescribed.</p> <p>Interview with the qualified intellectually disabilities specialist (QIDP) on 5/10/2023 verified staff should have followed the prescribed diet orders for clients #1, #2, #3, and #4 regardless of special meals. Additionally, the QIDP confirmed all adaptive equipment and special meal additives should be adhered to for all clients.</p>	W 474			