

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

PRINTED: 03/08/2024
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 34G087	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED 03/06/2024
NAME OF PROVIDER OR SUPPLIER PENNY LANE #1			STREET ADDRESS, CITY, STATE, ZIP CODE 2840 HWY 70 EAST CLAREMONT, NC 28610		
(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 255	<p>PROGRAM MONITORING & CHANGE CFR(s): 483.440(f)(1)(i)</p> <p>The individual program plan must be reviewed at least by the qualified intellectual disability professional and revised as necessary, including, but not limited to situations in which the client has successfully completed an objective or objectives identified in the individual program plan.</p> <p>This STANDARD is not met as evidenced by: Based on record review and interview, the facility failed to ensure the Behavior Support Plan (BSP) for 4 of 6 clients (clients #1,#2,#3, and #4) was reviewed and revised as needed after completion of an objective. The findings are:</p> <p>A. Review on 3/6/24 of client #1's clinical record revealed a BSP dated 3/11/19 with a target date of 2020 for target behaviors: activity refusal, physical disruptions, verbal disruptions, aggression, tantrum behaviors, and self-injury. No current BSP could be located.</p> <p>B. Review on 3/6/24 of client #2's clinical record revealed a BSP dated 10/20/21 with a target date of 2022 for target behaviors: agitation, AWOL, aggression, taking items not belonging to him, invading privacy, and self-injury. No current BSP could be located.</p> <p>C. Review on 3/6/24 of client #3's clinical record revealed a BSP dated 8/28/20 with a target date of 2021 for target behaviors: activity refusal, floor dropping, verbal aggression, physical aggression, property destruction, and inappropriate toilet events. No current BSP could be located.</p> <p>D. Review on 3/6/24 of client #4's clinical record revealed a BSP dated 1/7/16 with a target date of 2017 for target behaviors: refusal to cooperate,</p>	W 255			

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 255	Continued From page 1 verbal disruption, physical aggression, property destruction, SIB, and tantrum behavior. No current BSP could be located. Interview on 3/6/24 with the qualified intellectual disabilities professional (QIDP) confirmed no current BSPs for clients #1, #2,#3 and #4 were completed.	W 255			