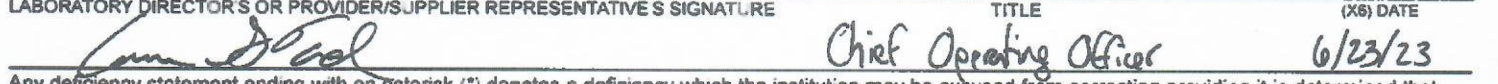
STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER.	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	34G175	A. BUILDING ______ B WING ______	06/13/2023

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
HIGHWAY 117 GROUP HOME	3801 US 117 NORTH 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 124	PROTECTION OF CLIENTS RIGHTS CFR(s): 483.420(a)(2) The facility must ensure the rights of all clients. Therefore the facility must inform each client, parent (if the client is a minor), or legal guardian, of the client's medical condition, developmental and behavioral status, attendant risks of treatment, and of the right to refuse treatment. This STANDARD is not met as evidenced by: Based on observation, record review and staff interview, the facility failed to ensure 1 of 6 audit client's (#4)'s guardian understands the alternatives to proposed treatments, and the possible consequences/alternatives to refusal of treatment. The finding is: During observations of supper on 6/12/23 5:00pm, staff A assisted client #4 to serve large chunks of meat loaf, cabbage and potatoes onto his plate. Client #4 was observed to have Provale cups at his placesetting to slow the rate at which he consumed his beverages. Client #4 coughed throughout mealtime and continued to cough after he had consumed his meal During observations of breakfast on 6/13/23 at 7:13am, Staff B assisted client #4 to serve grits toast and sausage onto his plate. Client #4 was observed to have Provale cups at his placesetting to slow the rate at which he consumed his beverages. Throughout mealtime, client #4 coughed and continued to cough after he had consumed breakfast. Immediate interview with staff B revealed client #4 has been ongoing coughing during mealtimes for several weeks. Further interview revealed staff had been documenting these coughing episodes to nursing and for management review.	W 124	W124: The QIDP will set up an interdisciplinary team meeting to discuss client symptoms, treatment options, and risks associated with client medical status. The QIDP/Nurse will inservice staff on the signs, symptoms, and risks associated with aspiration and the importance of reporting change in couching. Meeting notes and staff training will be documented for completion.The QIPD, Nurse, and RSS will monitor for compliance.	8/11/23



LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
	Chief Operating Officer	6/23/23

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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	34G175	A. BUILDING ______ B. WING ______	06/13/2023

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W 124	Continued From page 1	W 124		

Review on 6/13/23 of client #4's Gastroenterology consultation dated 2/1/23 revealed he was seen to follow up a chronic history of Dysphagia. "Reported to be doing well today and no coughing during eating." Further review of the consultation revealed client #4 had previous imaging noting aspiration and that he had been seen by speech therapy as well. "Stressed importance of aspiration precautions and monitoring his weight."

Review on 6/13/23 of client #4's nutritional evaluation dated 9/1/22 revealed he is to receive a regular diet with double portions at every meal with the exception of meals in the community at a restaurant.

Review of client #4's record revealed he had a Barium Swallow study completed on 6/3/11 which resulted in a diagnosis of Dysphagia.

Interview on 6/13/23 with the facility nurse confirmed client #4 had a Barium Swallow study on 6/3/11 which resulted in a diagnosis of Dysphagia. Further interview revealed at that time, the possibility of a feeding tube was discussed, however his guardian was not in agreement due to concerns this would greatly affect his quality of life. Additional interview revealed the interdisciplinary team had not met to discuss client #4's coughing during meals to discuss possible strategies to decrease the possibility of aspiration during meals, and this had not been discussed with client #4's legal guardian.

Interview on 6/13/23 with the qualified intellectual disabilities professional (QIDP) confirmed the interdisciplinary team had not met to discuss

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W 124	Continued From page 2 client #4's coughing episodes at mealtime and throughout his day to develop possible strategies to decrease the possibility of aspiration during meals. Further interview confirmed the team had also not met with client #4's legal guardian to discuss concern regarding client #4's Dysphagia	W 124		
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: Based on observation, record review and interview, the facility failed to ensure 2 of 3 audit clients (#2 and #6) individual program plan (IPP) was consistently implemented. The finding is: A. During observation on 6/13/23 at 8:00am, Staff B administered the following medications to client #2: Vimpat tab 15mg 2 tab, Briviact 100mg 1 tab, Clobazam 20mg 1 tab, Zoloft 50mg 1 tab, and Risperdal 20mg 1 tab. Staff B did not discuss medication side effects or prompt client #2 to repeat side effects of medications. Review on 6/12/23 of client #2's IPP revealed an objective to verbally repeat the side effects of medication.	W 249	W249: The Nursing Department will inservice the staff in the home on proper medication procedures and the importance of educating consumers through goal training. Staff training will be documented for completion. Nursing department and QIPD will monitor for completion.	8/11/23

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NAME OF PROVIDER OR SUPPLIER: HIGHWAY 117 GROUP HOME		STREET ADDRESS, CITY, STATE, ZIP CODE: 3801 US 117 NORTH, GOLDSBORO, NC 27530	

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W 249	Continued From page 3	W 249		

Interview on 6/13/23 with Staff B revealed client #2 could name the medications and state the purpose of medications. Staff B stated no further instruction was required for medications

Interview on 6/13/23 with the nurse revealed staff should complete medication objective training during medication administration.

Interview on 6/13/23 with qualified intellectual disabilities professional (QIDP) revealed staff should complete medication objective training during medication administration.

B. During observation on 6/13/23 at 8:15am, Staff B administered the following medications to client #6: Haldol 5mg 3 1/2 tab; Abilify 30mg 1 tab; Geodon 40mg 1 tab; Lamictal 100mg 2 1/2 tab; Depakote 500mg 1 tab, and Depakote 250 mg 1 tab. Staff B did not discuss medication side effects or prompt client #6 to repeat side effects of medications.

Review on 6/12/23 of client #6's IPP revealed an objective to verbally repeat the purpose of a specific medication.

Interview on 6/13/23 with Staff B revealed client #6 could name the medications and state the purpose of medications. Staff B stated no further instruction was required for medications.

Interview on 6/13/23 with the nurse revealed staff should complete medication objective training during medication administration.

Interview on 6/13/23 with QIDP revealed staff should complete medication objective training during medication administration.

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W 460	FOOD AND NUTRITION SERVICES 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, interviews and record reviews, the facility failed to ensure 1 of 6 audit clients (#4) received their specially-prescribed diets as indicated. The finding is: During observations of supper on 6/12/23 5:00pm, staff A assisted client #4 to serve meat loaf, cabbage and potatoes onto his plate. He received one serving of each food item. During observations of breakfast on 6/13/23 at 7:13am, Staff B assisted client #4 to serve grits, toast and sausage onto his plate. He was served one serving of each food item. Client #4 served an extra portion of grits onto his plate. Review on 6/13/23 of client #4's nutritional evaluation dated 9/1/22 revealed he is to receive a regular diet with double portions at every meal with the exception of meals in the community at a restaurant. Review on 6/13/23 of his recent weights revealed his desired weight range is 155-185 pounds and that he is 76 inches in height. In April 2022, his weight was recorded as 169 pounds and client #4 currently weighs 166 pounds. Review on 6/13/23 of client #4's functional assessment dated 10/27/22 revealed, " Regular diet with double portions to be served on his	W 460	W460: The Nursing Department will consult with the dietician on the current diet order. Any changes will be noted. Staff will be inserviced on the prescribed diet. Staff training will be documented for completion. Nursing, QIPD, and RSS will monitor for compliance.	8/11/23

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

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W 460	Continued From page 5 plate, except for meals served in a restaurant, double snacks, use Provale cup for all liquids." Interview on 6/13/23 with the facility Nurse and qualified intellectual disabilities professional (QIDP) confirmed client #4's diet is current and should be followed.	W 460		