

| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION               |   | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:<br><br><b>34G332</b> | (X2) MULTIPLE CONSTRUCTION<br>A. BUILDING _____<br><br>B. WING _____  |                      | (X3) DATE SURVEY COMPLETED<br><br><b>04/09/2024</b> |
|--|---|---|---|----------------------|---|
| NAME OF PROVIDER OR SUPPLIER<br><br><b>NORWOOD AVENUE HOME</b> |   |   | STREET ADDRESS, CITY, STATE, ZIP CODE<br><b>2510 NORWOOD AVENUE<br/>GOLDSBORO, NC 27530</b>                     |                      |   |
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| W 227  | <p><b>INDIVIDUAL PROGRAM PLAN</b><br/>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:<br/>Based on record reviews and interviews, the facility failed to ensure the Individual Program Plan (IPP) for 3 of 3 audit clients (#1, #2 and #5) included objectives to address their money management needs. The findings are:</p> <p>A. Review on 4/8/24 of client #1's IPP dated 3/13/24 revealed he works on the clerical crew and is compensated at \$7.25 per hour. Additional review of the plan noted objectives to match numbers, shapes and colors, identify numbers and letters, counting, exercising and communication. Client #1's Comprehensive Functional Assessment (CFA) dated 2/13/24 indicated he is not able to identify coins or dollar values and requires assistance paying for items at the store. Further review of the IPP did not include objectives in the area of money management.</p> <p>B. Review on 4/8/24 of client #2's IPP dated 5/2/23 revealed he works on the clerical crew, earns \$7.25 per hour and is paid bi-weekly. Additional review of the plan noted objectives to walk 30 minutes, state side effects of medications, toothbrushing, taking out the trash and writing. Review of client #2's CFA dated 4/16/23 indicated he can budget/save his money, can cash his check and keep his money in his wallet. The CFA noted other money management skills require higher levels of assistance. Further review of the IPP did not include objectives in the</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<br>area of money management.<br><br>C. Review on 4/8/24 of client #5's IPP dated 4/20/23 revealed he works on the lawn crew, earns \$7.25 per hour and is paid bi-weekly. Additional review of the plan noted objectives to tell time, exercising, identifying sight words, and respecting personal space. Review of client #5's CFA dated 3/31/23 indicated he can perform tasks such as identifying and matching coins/dollar denominations up to \$5.00 and requires verbal assistance to cash his personal check. Further review of the IPP did not include objectives to address his money management needs.<br><br>Interview on 4/9/24 with the Qualified Intellectual Disabilities Professional (QIDP) confirmed the clients (#1, #2 and #5) continue to work and are paid bi-weekly; however, they do not currently have formal objectives in the area of money management. | W 227   |   |                      |   |
| W 369  | <b>DRUG ADMINISTRATION</b><br>CFR(s): 483.460(k)(2)<br><br>The system for drug administration must assure that all drugs, including those that are self-administered, are administered without error. This STANDARD is not met as evidenced by:<br>Based on observations, record review, and interviews, the facility failed to ensure all medications were administered without error. This affected 2 of 4 clients observed receiving medications (#1 and #5). The findings are:<br><br>A. During afternoon observations in the home on 4/8/24 at 12:33pm, client #5 ingested Seroquel and Simethicone. No other medications were   | W 369   |   |                      |   |

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| W 369  | <p>Continued From page 2 administered at this time.</p> <p>Immediate interview with the medication technician (Staff A) revealed client #5 usually has an eye drop at his noon med pass; however, the eye drop was not available in the home.</p> <p>Review on 4/9/24 of client #5's physician's orders (4/1 - 4/30/24) revealed an order for Systane Solution, instill 1 drop in each eye three times a day at 8:00am, 12 noon, and 5:00pm.</p> <p>Interview on 4/9/24 with the facility nurse confirmed client #5 should receive Systane eye drops three times per day; however, due to issues with his insurance and the pharmacy, it was currently not available.</p> <p>B. During morning observations in the home on 4/9/24 at 8:04am, client #1 ingested Vitamin D3 50mcg. No other medications were ingested during this time.</p> <p>Immediate interview with the medication technician (Staff E) revealed client #1 usually gets Aspirin, Buspar, Clonidine, Ditropan and Risperdal during his morning med pass but those medications were not available in the home.</p> <p>Review on 4/9/24 of client #1's physician's orders (4/1 - 4/30/24) revealed orders for Aspirin low chew 81mg, take 1 by mouth once daily at 8:00am, Risperdal 2mg, take 1 tablet by mouth twice daily at 8:00am and 8:00pm, Clonidine .2mg, take 1 tablet by mouth twice daily at 8:00am, Buspar 10mg, take 1 tablet by mouth three times daily at 8:00am, 12 noon and 8:00pm and Ditropan 5mg, take two tablets by mouth twice daily at 8:00am and 8:00pm.</p> | W 369   |   |                      |   |

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| W 369  | Continued From page 3  | W 369   |   |                      |   |
| W 436  | <p>Interview on 4/9/24 with the facility nurse indicated client #5's medications were mistakenly sent to another home yesterday and were not available in the home this morning.</p> <p><b>SPACE AND EQUIPMENT</b><br/>CFR(s): 483.470(g)(2)</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:<br/>Based on observations, record review and interviews, the facility failed to ensure client #5 was taught to use his hearing aids appropriately and to maintain them in good repair. This affected 1 of 3 audit clients. The finding is:</p> <p>During observations throughout the survey on 4/8 - 4/9/24, client #5 did not wear hearing aids. The client consistently replied "Uh?" or "What?" when interacting with staff verbally and staff frequently spoke with elevated voices when speaking to client #5.</p> <p>Interview on 4/9/24 with Staff C revealed client #5 does have a hearing aid but he broke it sometime in January and the facility is in the process of replacing it. Additional interview indicated he has broken at least three hearing aids since May.</p> <p>Review on 4/8/24 of client #5's Individual Program Plan (IPP) dated 4/20/23 revealed, "He has mild, bilateral conductive hearing loss and received a hearing aid in Sept 2013." Additional</p> | W 436   |   |                      |   |

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| W 436  | Continued From page 4<br>review of his audiology report dated 11/21/22 noted, "Wears left hearing aid...Audiogram shows bilateral sensorineural hearing loss with conductive component." Further review of the plan did not indicate any training had been implemented to address client #5's inappropriate use of his hearing aid.<br><br>Interview on 4/9/24 with the Qualified Intellectual Disabilities Professional (QIDP) confirmed client #5 will often break his hearing aid when he gets upset and has broken several due to his behavior. Additional interview indicated the interdisciplinary team has not considered training to address his inappropriate use of his hearing aid. | W 436   |   |                      |   |