

PRINTED: 12/08/2023
FORM APPROVED
OMB NO. 0938-0391

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

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 34G125	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED R 12/05/2023
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NAME OF PROVIDER OR SUPPLIER CHANDLER ROAD	STREET ADDRESS, CITY, STATE, ZIP CODE 342 CHANDLER ROAD DURHAM, NC 27707
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(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
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<p>{W 000} INITIAL COMMENTS</p> <p>A revisit was conducted on 12/5/23 for all previous deficiencies cited on 10/31/23. All deficiencies were not corrected and no new non-compliance was found. The facility is not in compliance with all regulations surveyed.</p>	<p>{W 000}</p>
<p>{W 210} INDIVIDUAL PROGRAM PLAN CFR(s): 483.440(c)(3)</p> <p>Within 30 days after admission, the interdisciplinary team must perform accurate assessments or reassessments as needed to supplement the preliminary evaluation conducted prior to admission. This STANDARD is not met as evidenced by: Based on record review and interview, the facility failed to obtain an initial Physical Therapy (PT) Evaluation assessment for 1 of 4 audit clients (#6). The finding is:</p> <p>Review on 8/7/23 of client #6's record revealed he had not received a PT evaluation. Further review revealed client #6 was admitted to the facility on 8/9/22.</p> <p>During an interview on 8/8/23, the Administrator confirmed client #6 had not received his intial PT evaluation.</p> <p>A follow up was conducted on 10/31/23:</p> <p>Review on 10/31/23 of client #6's record revealed he still has not received a PT evaluation.</p> <p>During an interview on 10/31/23, the Qualified Intellectual Disabilities Professional (QIDP) confirmed client #6 still has not received a PT evaluation.</p>	<p>{W 210}</p>

Morris Thomas, Administrator 12/19/2023

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 210}	Continued From page 1 A follow up visit was conducted on 12/5/23: A review of the Plan of Correction (POC) stated, "The Corporate Quality Assurance Specialist will in-service the Administrator, Qualified Professionals and Nurses on the assessment requirement for all new admissions within the first 30 days of admission. The Administrator will monitor all Person-Centered Plans as they occur to ensure assessments are completed within the first 30 days of admission. In the the future the Qualified Professional will ensure required assessments for new admissions are completed with the first 30 days of admission". A review on 12/5/23 of client #6's record revealed there was no PT evaluation completed. During an interview on 12/5/23, the Administrator confirmed client #6 still does no have a PT evaluation.	{W 210}	01/04/2024 W210 The interdisciplinary team will receive an in-service on utilizing the new admission checklist for new admissions as checklist contains necessary appointments required within 30 days of admission (PT). The Administrator will monitor all admissions and appointments through bi-weekly management meetings and monthly thereafter. The Qualified professional will also maintain communication of appointment request to verify contact has been made. In the future the Qualified Professional will continue to use the checklist as a guide to ensure all required assessments, appointments and meetings take place for all new admissions and Administrator will sign checklist with Qualified Professional to verify completion.
{W 217}	INDIVIDUAL PROGRAM PLAN CFR(s): 483.440(c)(3)(v) The comprehensive functional assessment must include nutritional status. This STANDARD is not met as evidenced by: Based on record review and interview, the facility failed to ensure 1 of 4 audit clients (#6) received an initial Nutritional assessment. The finding is: Review on 8/7/23 of client #6's record revealed there was no Nutritional assessment. Further review revealed client #6 was admitted to the facility on 8/9/22. During an interview on 8/9/23, the Administrator	{W 217}	

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{W 217}	Continued From page 2 revealed client #6 did not have a initial Nutritional assessment. A follow up visit was conducted on 10/31/23: Review on 10/31/23 of client #6's record revealed he still has no Nutritional assessment. During an interview on 10/31/23, the Qualified Intellectual Disabilities Professional (QIDP) confirmed client #6 still has not received his Nutritional assessment. A follow up visit was conducted on 12/5/23: A review of the Plan of Correction (POC) stated, "The Corporate Quality Assurance Specialist will in-service the Administrator, Qualified Professionals and Nurses on the assessment requirement for all new admissions within the first 30 days of admission. The Administrator will monitor all Person-Centered Plans as they occur to ensure assessments are completed within the first 30 days of admission. In the the future the Qualified Professional will ensure required assessments for new admissions are completed with the first 30 days of admission". A review on 12/5/23 of client #6's record revealed there was no Nutritional assessment completed. During an interview on 12/5/23, the Administrator stated client #6 has not received his Nutritional assessment.	{W 217}	01/04/2024 W217 The interdisciplinary team will receive an in-service on utilizing the new admission checklist for new admissions as checklist contains necessary appointments required within 30 days of admission (Nutritional). The Administrator will monitor all admissions and appointments through bi-weekly management meetings and monthly thereafter. The Qualified professional will also maintain communication of appointment request to verify contact has been made. In the future the Qualified Professional will continue to use the checklist as a guide to ensure all required assessments, appointments and meetings take place for all new admissions and Administrator will sign checklist with Qualified Professional to verify completion.
{W 221}	INDIVIDUAL PROGRAM PLAN CFR(s): 483.440(c)(3)(v) The comprehensive functional assessment must	{W 221}	

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{W 221}	<p>Continued From page 3</p> <p>include auditory functioning. This STANDARD is not met as evidenced by: Based on record review and interview, the facility failed to ensure an auditory examination for 1 of 4 audit clients (#6). The finding is:</p> <p>Review on 8/7/23 of client #6's record revealed he had not received an auditory examination. Further review revealed client #6 was admitted to the facility on 8/9/22.</p> <p>During an interview on 8/8/23, the Administrator confirmed client #6 had not received his auditory examination.</p> <p>A follow up visit was conducted on 10/31/23:</p> <p>Review on 10/31/23 of client #6's record revealed he still had not received his auditory examination.</p> <p>During an interview on 10/31/23, the Qualified Intellectual Disabilities Professional (QIDP) confirmed client #6 still had not received his auditory examination.</p> <p>A follow up visit was conducted on 12/5/23.</p> <p>A review of the Plan of Correction (POC) stated, "The Corporate Quality Assurance Specialist will in-service the Administrator, Qualified Professionals and Nurses on the assessment requirement for all new admissions within the first 30 days of admission. The Administrator will monitor all Person-Centered Plans as they occur to ensure assessments are completed within the first 30 days of admission. In the the future the Qualified Professional will ensure required assessments for new admissions are completed with the first 30 days of admission".</p>	{W 221}	<p>W221</p> <p>The interdisciplinary team will receive an in-service on utilizing the new admission check list for new admissions as checklist contains necessary appointments required within 30 days of admission (Auditory). The Administrator will monitor all admissions and appointments through bi-weekly management meetings and monthly thereafter. The Qualified professional will also maintain communication of appointment request to verify contact has been made. In the future the Qualified Professional will continue to use the checklist as a guide to ensure all required assessments, appointments and meetings take place for all new admissions and Administrator will sign checklist with Qualified Professional to verify completion.</p> <p>01/04/2024</p>

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{W 221}	Continued From page 4 A review on 12/5/23 of client #6's record revealed there was no auditory examination completed. During an interview on 12/5/23, the Administrator confirmed client #6 does not have a auditory examination.	{W 221}			