STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	34G062	A. BUILDING _____ B. WING _____	06/26/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
BOXWOOD ACRES	3464 US HWY 601 SOUTH MOCKSVILLE, NC 27028

(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 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 provide choice and self-management for 3 of 6 clients (#2, #5 and #6) relative to leisure options and activities. For example: Observations in the group home on 06/25/24 from 4:00 PM until 5:15 PM revealed client #2 at various times to watch tv in her bedroom, living room, talk to surveyors about Elvis, and walk around watching her housemates and staff. Continue observations at the same timeframes revealed client #5 and #6 to sit in the living room accompanied by staff B and C unengaged. Further observation throughout this time frame revealed all clients sleeping while staff B and C who did not engage with clients carried on conversations with one another. Review of records for client #2 on 6/25/24 revealed a person-centered plan (PCP) dated 2/27/2024. Continued review of the PCP for client #2 revealed the following diagnosis: Severe IDD, psychosis, depression, anxiety, hypothyroidism, hypertension, psoriasis, allergic rhinitis,	W 249		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE | (X6) DATE

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W 249	Continued From page 1	W 249		

hyperlipidemia, CKD, urinary incontinence, pain, and articulation impairment. Further review of the PCP for client #2 revealed the following goals: wash hands, improve oral hygiene-brush teeth, choose between two outfits, increase mobility-exercise, walk two laps at the vocational center and decrease maladaptive behaviors.

Review of records for client #5 on 6/25/24 revealed a PCP dated 2/15/23. Continued review of the PCP for client #5 revealed the following diagnosis: Moderate IDD, depression, early onset dementia and blindness. Further review of the PCP for client #5 revealed the following goals: wipe front to back, wash hands with soap and water, rest utensils, mealtime guidelines to slow down and alternate bites and sips and decrease maladaptive behaviors.

Review of records for client #6 on 6/25/24 revealed a PCP dated 8/10/23. Continued review of the PCP for client #6 revealed the following diagnosis: Severe IDD, impulse control, bipolar DO-rapid cycling, panic DO, anxiety DO, seizure DO, h/o tardive dyskinesia, h/o dialysis (left arm fistula 1993), h/o carcinoma in situ of sigmoid colon 12/20/96, osteoporosis, fibrocystic breast disease & benign fibro-adenomas of breast bilaterally, constipation, kidney stones w/lithotripsy x2 2011, onychomycosis, urinary incontinence pruritus, total hysterectomy, hypertension, hyponatremia, seasonal allergies, Vit D deficiency, allergies to Bactrim and adhesives. Further review of the PCP for client #6 revealed the following goals: brush hair, great others, extend hands under running water, exercise, reduce toileting accidents, napkin to wipe mouth, sort items by color, complete leisure active, and reduce maladaptive behaviors.

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W 249	Continued From page 2 Interview with Staff C on 6/25/24 revealed all clients have structured schedules that are implemented in the home and at the vocational center. Continued interview with staff C revealed that while the structured schedule is not posted in the home, staff do run clients' programs throughout the day and provide activities for clients to participate in of their choice. Interview with the qualified intellectual disabilities professional (QIDP) on 6/25/24 confirmed staff have been trained as recently as May 2024 on client program implementation. Continued interview with the QIDP revealed staff have been trained to implement structured activities of the client's preference to promote choice and self-management as recently as May 2024.	W 249		
W 448	EVACUATION DRILLS CFR(s): 483.470(i)(2)(iv) The facility must investigate all problems with evacuation drills, including accidents. This STANDARD is not met as evidenced by: Based on record review and interview, the facility failed to investigate all problems regarding fire drills specifically failing to document their fire evacuation reports adequately. The finding is: Review on 6/25/24 of the facility's fire evacuation reports between May 2023-May 2024 revealed 12 drills were conducted and 1 drill was not conducted (September 2023) for the past year. Further review of those 12 reports revealed 4 reports did not include the amount of time each drill took to complete in order to evaluate the effectiveness of the staff and drill.	W 448		

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W 448	Continued From page 3 Interview on 6/26/24 with the qualified intellectual disabilities professional (QIDP) verified all fire drills should include the total time it took to complete the drill.	W 448		
W 454	INFECTION CONTROL CFR(s): 483.470(l)(1) The facility must provide a sanitary environment to avoid sources and transmission of infections. This STANDARD is not met as evidenced by: Based on observation, record review and interview the facility failed to ensure 3 of 6 clients (#1, #3 and #4) washed or sanitized their hands before engaging in food prep activities and the dinner meal. For example: A. Observation in the home on 6/25/24 at 4:00 PM revealed client #1 to sit at a desk in her bedroom engaged in a preferred activity crafting. Continue observation from 4:00 PM to 5:15 PM revealed client #1 to respond to a prompt to assist with her meal preparation- make cornbread with staff. Further observation revealed client #1 mixed the cornbread, placed in oven, returned to room to craft for a short time, returned to kitchen to complete the corn bread, assist with pureeing food and labeling dinner food items to place on table, prepared drinks, and assisted with getting those to the table and poured for peers. Subsequent observation revealed client #1 to be seated for her dinner meal at 5:15 pm. At no point during this entire timeframe was client #1 prompted to wash or use hand sanitizer to clean her hands. Review of records revealed on 6/25/24 for client	W 454		

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W 454	Continued From page 4 #1 revealed a person-centered plan (PCP) dated 3/26/24. Continued review of PCP for client #1 revealed the following goals: assist with medication administration, set table, retrieve ingredient to prepare a meal, learn her current address and phone number, increase dictation accuracy, increase accuracy with site words, increase endurance -walking and decrease maladaptive behavior. Interview with the qualified intellectual disabilities professional (QIDP) on 6/25/24 confirmed staff have also been trained on the importance of having clients perform hand hygiene either using soap and water or a hand sanitizer . B. Observation in the home on 6/25/24 at 4:49 PM revealed client #3 to wash hands and return to her activity table to sort blocks. Continue observation at 5:12 Pm revealed client #3 to respond to prompt to place her dish containing a slice of chopped corn bread on the dinner table and take a seat. Further observation at 5:15 PM revealed client #3 to bless the food and begin the dinner meal. Subsequent observation revealed client #3 to participate in the dinner meal. At no point prior to client #3's handwashing at 4:49 PM was she ever prompted to rewash her hands or use hand sanitizer before returning to the kitchen to place items on the table or eating her dinner meal. Review of records on 6/25/24 for client #3 revealed a PCP dated 1/10/24. Continue review of the PCP for client #3 revealed the following goals: close bedroom door, use hand sanitizer, take high sided dish to table, name bedroom items, set cups on table at VOC, money management, leisure activity, count to ten,	W 454		

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W 454	Continued From page 5 evacuate during fire drills, TEAACH schedule, appropriate manners and reduce maladaptive behaviors. Interview with the qualified intellectual disabilities professional (QIDP) on 6/25/24 confirmed staff have also been trained on the importance of having clients perform hand hygiene either using soap and water or a hand sanitizer. C. Observation in the home on 6/25/24 at 4:30 PM revealed client #4 to exit her bedroom from watching tv and sit at her designated area at the dining room table and begin journaling. Continued observation at 5:12 pm revealed client #4 to comply with prompt to place her slice of cornbread, water, and other food items on the table. Further observation at 5:15 PM revealed client #4 to begin her dinner meal. Subsequent observations revealed the table was not wiped odd nor was client #4 ever prompted to wash her hands or use a hand sanitizer before placing items on the table or eating her dinner meal. Review of records on 6/25/24 for client #4 revealed a PCP dated 1/16/24. Continued review of the PCP for client #4 revealed the following goals: bathe thoroughly, wipe from front to back, toileting every two hours, count a series of faux bills of varying amounts that equal $20 and reduce maladaptive behavior. Interview with the qualified intellectual disabilities professional (QIDP) on 6/25/24 confirmed staff have also been trained on the importance of having clients perform hand hygiene either using soap and water or a hand sanitizer.	W 454		
W 474	MEAL SERVICES	W 474		

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W 474	Continued From page 6 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 observations, record review and interview, the facility failed to ensure food was served in a form consistent with the developmental level for 1 of 3 audit clients (client #6). The findings are: Observation during dinner on 6/25/24 at 5:12 PM revealed client #6 to participate in the dinner meal which included salisbury steak, mashed potatoes with gravy, peas and corn, a cup of milk and a cup of water. Continued observations revealed staff pureed her food prior to serving. Further observations revealed client #6 consumed about 75% of her dinner meal before leaving the table. Observation during breakfast on 6/26/24 at 7:42 AM revealed client #6 to participate in the breakfast meal which included turkey bacon, toast, cream of wheat, a banana, a cup of orange juice and a cup of water. Continued observations revealed staff pureed her food prior to serving. Further observations revealed client #6 consumed 55% of her breakfast meal and drank her chocolate ensure before leaving the table. Review on 6/25/24 of client #6's record revealed a nutritional evaluation dated 4/29/24. Further review of the nutritional evaluation revealed client #6's diet consisted of a weight gain, low sodium, ground consistency, no raw or hard food such as carrots, broccoli, one can of Ensure Plus with high calories snacks twice a day, and chopped banana is allowed.	W 474		

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W 474	Continued From page 7 Interview on 6/26/24 with the qualified intellectual disabilities professional (QIDP) confirmed client #6's diet as current. Continued interview with the QIDP confirmed that staff should have not pureed client #6's food and that she does not prefer her food to be in a pureed consistency. The QIDP stated that staff were trained on all clients' diet orders.	W 474		