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	34G054	A. BUILDING _____ B. WING _____	07/16/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
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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
W 130	PROTECTION OF CLIENTS RIGHTS CFR(s): 483.420(a)(7) The facility must ensure the rights of all clients. Therefore, the facility must ensure privacy during treatment and care of personal needs. This STANDARD is not met as evidenced by: Based on observations, record reviews and interviews, the facility failed to ensure 3 of 9 audit clients (#2, #3 and #11) were afforded privacy during personal care and toileting. The findings are: A. During observations in the home on 7/16/24 at 7:15 am, Staff B was assisting client #11 from her bedroom to the bathroom in a shower bed. Staff B pushed client #11 to the bathroom in the shower bed completely undressed with a blanket partially draped over her body. During additional observations at 7:35am revealed staff B pushing client #11 back to her bedroom from the bathroom undressed in the shower bed with only a blanket draped over her. Review on 7/16/24 of client #11's Educational/Vocational Evaluation (dated 5/17/24) revealed client #11 requires full assistance with bathing, shaving and ensuring privacy. B. During observations in the home on 7/15/24 at 5:00 pm, Client #3 walked to her bedroom, entered the bathroom connected to her bedroom, pulled down her pants and used the bathroom without closing the door. When finished client #3 then pulled up her pants and exited the bathroom and came back to the activity room where she informed staff that the bathroom was broken.	W 130		

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

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W 130	Continued From page 1 Review on 7/16/24 of client #3's Educational/Vocational Evaluation (dated 7/11/23) revealed client #3 requires reminders for closing the door to assure her privacy. C. During observations in the home on 7/16/24 at 7:45 am after client #11 received his medications, the client walked to his bedroom, went into the connecting bathroom, leaving the door open while pulling his pants down. Client #11 walked out of the bathroom while pulling up his pants and walked down the hallway back to his group. Review on 7/16/24 of client #11's Educational/Vocational Evaluation (dated 9/12/23) revealed client #11 only requires reminders for closing the door to assure his privacy. Interview on 7/16/24 with the Vice President of Operations revealed that client #11 and client #2 cannot provide their own privacy and client #3 needs encouragement from staff for privacy.	W 130		
W 195	ACTIVE TREATMENT SERVICES CFR(s): 483.440 The facility must ensure that specific active treatment services requirements are met. This CONDITION is not met as evidenced by: The team failed to: ensure that each client received a continuous active treatment program, which includes aggressive, consistent implementation of a program of specialized and generic training and treatment directed towards the acquisition of the behaviors necessary for the client to function with as much self-determination	W 195		

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W 195	Continued From page 2 and independence as possible (W196 and W249), ensure objectives are developed necessary to meet the client's needs (W227), ensure data relative to the accomplishment of the criteria specified in client individual program plan objectives are documented in measurable terms (W252) and ensure clients are taught to make informed choices about the use of eyeglasses as identified by the interdisciplinary team as needed by the client (W436). The cumulative effect of these systemic practices resulted in the facility's failure to provide statutorily mandated active treatment services to the clients.	W 195		
W 196	ACTIVE TREATMENT CFR(s): 483.440(a)(1) Each client must receive a continuous active treatment program, which includes aggressive, consistent implementation of a program of specialized and generic training, treatment, health services and related services described in this subpart, that is directed toward: (i) The acquisition of the behaviors necessary for the client to function with as much self determination and independence as possible; and (ii) The prevention or deceleration of regression or loss of current optimal functional status. This STANDARD is not met as evidenced by: Based on observations, record review and interview, the team failed to assure that a continuous aggressive active treatment program was implemented for 8 of 9 audit clients (#1, #2, #3, #4, #9, #12, #13 and #14) which provided consistent implementation of the individual	W 196		

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W 196	Continued From page 3 program plan (IPP) and interventions in the facility, which promoted client function with as much independence as possible and prevented regression of acquired skills. The findings are: A. Cross reference W227. The facility failed to ensure the IPP included guidelines to address identified needs for 8 of 9 audit clients (#1, #2, #3, #4, #9, #12, #13 and #14). B. Cross reference W249. The facility failed to ensure 5 of 9 audit clients (#1, #2, #4, #9 and #13) received a continuous active treatment program consisting of needed interventions and services as identified in the IPP. C. Cross reference W252. The facility failed to ensure data relative to the accomplishment of objective criteria was documented in measurable terms. This affected 8 of 9 audit clients (#1, #2, #3, #4, #9, #12, #13 and #14). D. Cross reference W436. The facility failed to ensure 1 of 9 audit clients (#9) was taught to make informed choices regarding the use of eyeglasses.	W 196		
W 227	INDIVIDUAL PROGRAM PLAN CFR(s): 483.440(c)(4) 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: Based on record review and interview, the facility failed to ensure 8 of 9 audit clients (#1, #2, #3, #4, #9, #12, #13 and #14) individual program plans (IPPs) included specific objectives to	W 227		

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W 227	Continued From page 4	W 227		

address the needs identified in their Adaptive Behavior Scales (ABS). The findings are:

During observations in the home on 7/15/24 through 7/16/24 the clients were observed sitting around unengaged in meaningful activities and unengaged by staff.

A. Review on 7/16/24 of client #1's IPP dated 5/24/24 revealed three training objectives: putting on a sock, turning off water and putting his dirty spoon in his bin. Further review of client #1's IPP revealed he had the following needs identified in his ABS: economic activity, trustworthiness and conformity.

B. Review on 7/16/24 of client #2's IPP dated 10/31/23 revealed three training objectives: wiping his mouth, getting a swab from hygiene basket and getting socks from his drawer. Further review of client #2's IPP revealed he had the following needs identified in his ABS: economic activity, language activity and sexual behavior.

C. Review on 7/15/24 of client #3's IPP dated 8/22/23 revealed three training objectives: toothbrushing, washing upper body and pulling up her pants. Further review of client #3's IPP revealed she the following needs identified in her ABS: economic activity, self-direction, stereotype and hyperactivity and social engagement.

D. Review on 7/16/24 of client #4's IPP dated 2/13/24 revealed three training objectives: signing bathroom, applying toothpaste to toothbrush and hand washing. Further review of client #4's IPP revealed he had the following needs identified in his ABS: independent functioning, economic activity, conformity and social engagement

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W 227	Continued From page 5 E. Review on 7/15/24 of client #9's IPP dated 2/27/24 revealed three training objectives: oral hygiene, laundry and making a purchase. Further review of client #9's IPP revealed she had the following needs identified in her ABS: economic activity, trustworthiness and conformity. F. Review on 7/16/24 of client #12's IPP dated 6/11/24 revealed three training objectives: writing family member's name, pointing to $10 bill and completing laundry routine. Further review of client #9's IPP revealed she had the following needs identified in her ABS: economic activity, trustworthiness and conformity. G. Review on 7/15/24 of client #13's IPP dated 10/18/23 revealed he had four training objectives: placing keys on his nightstand, retrieving deodorant, choosing a shirt and placing toothbrush on teeth. Further review of client #13's IPP revealed the following needs identified in his ABS: physical development, numbers and time. H. Review on 7/16/24 of client #14's IPP dated revealed three training objectives: applying toothpaste to toothbrush, accepting warm washcloth and sorting blocks. Further review revealed he had the following needs identified in his ABS: economic activity, language development, numbers and time. Interview on 7/16/24 with the Vice President of Operations confirmed the client's goals need to be reassessed based on needs and weaknesses.	W 227		
W 249	PROGRAM IMPLEMENTATION CFR(s): 483.440(d)(1)	W 249		

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W 249	Continued From page 6 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 observations, record reviews and interviews, the facility failed to ensure each client received a continuous active treatment program consisting of needed interventions and services as identified in the Individual Program Plan (IPP) in the areas of leisure activities, adaptive equipment and program implementation. This affected 5 of 9 audit clients (#1, #2, #4, #9, and #13) The findings are: A. During observations in the home on 7/15/24 from 4:15pm until 6:45pm, clients #1, #4 and #9 were observed sitting in the living room. During the observations, the clients sat unengaged by staff. Further observations revealed clients #2 and #13 were observed sitting in the living room except when they went outside with staff G from 4:40pm - 5:00pm. During the observations, the clients sat unengaged by staff. Interview on 7/16/24 with staff B revealed client #4's only objective/goal is to take out the trash. Interview on 6/18/24 with the qualified intellectual disabilities professional (QIDP) verified staff	W 249		

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W 249	Continued From page 7	W 249		

should be engaging clients in leisure activities during down time and when not completing training.

B. During observations in the home on 7/15/24 from 4:15pm until 6:45pm, client #13 was observed sitting in his wheelchair. At no time during the observations was client #13 observed wearing a spica splint.

During additional observations in the home on 7/16/24 from 6:30am until 3:00pm, client #13 was observed sitting in his wheelchair. At no time during the observations was client #13 observed wearing a spica splint.

Review on 7/15/24 of client #13's IPP dated 10/18/23 revealed adaptive equipment guidelines for the client to wear a right hand spica splint three times a day for sixty minutes at a time.

Interview on 7/16/24 with staff A revealed client #13 should be wearing a spica cast if she remembered correctly. However, staff A confirmed she is unsure where the cast was or when the last time client #13 utilized it.

Interview on 6/18/24 with the Vice President of Operations revealed she believed the spica cast for client #13 had been discontinued but was unable to find any documentation for discontinuation.

C. During observations of dinner in the home on 7/15/24 at 6:20pm revealed client #13 sitting at the table for dinner. Staff I sat next to client #13 and fed him dinner.

During additional observations of breakfast in the

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W 249	Continued From page 8 home on 7/16/24 at 8:40am, client #13 sitting at the table for breakfast. Staff A sat next to client #13 and fed him breakfast. Review on 7/15/24 of client #13's IPP dated 10/18/23, revealed mealtime guidelines that staff should allow the client to feed himself. If client #13 displays difficulty feeding himself, staff should then assist him using hand over hand manipulation. Interview on 7/16/24 with the qualified intellectual disabilities professional (QIDP) revealed staff should allow client #13 to feed himself and if he has excess spillage or is unable to feed himself independently staff should use hand over hand with the client.	W 249		
W 252	PROGRAM DOCUMENTATION CFR(s): 483.440(e)(1) Data relative to accomplishment of the criteria specified in client individual program plan objectives must be documented in measurable terms. This STANDARD is not met as evidenced by: Based on observations, record reviews and interviews, the facility failed to ensure data relative to the accomplishment of objective criteria was documented in measurable terms. This affected 8 of 9 audit clients (#1, #2, #3, #4, #9, #12, #13 and #14). The findings are: A. Review on 7/16/24 of client #1's Individual Program Plan (IPP) dated 5/24/24 revealed formal training programs as follows:	W 252		

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W 252	Continued From page 9 -Will put on a sock using gestures: Data to be collected three times a week for six consecutive months. - turn off the water with independence: Data to be collected three times a week for five consecutive months. - put your spoon in the dish bin: Data to be collected three times a week for six consecutive months. Further review of client #1's service documentation checklist revealed April 2024 no documentation, May 2024 1 day of documentation (5/25), June 2024 no documentation July 2024 2 days of documentation (6/11-6/12). B. Review on 7/16/24 of client #2's IPP dated 10/31/23 revealed formal training programs as follows: -Will wipe his mouth with gestures: Data to be collected three times a week for six consecutive months. -Will get swab from basket independently: Data to be collected three times a week for six consecutive months. -Will get a pair of socks from his drawer: Data to be collected three times a week for six consecutive months. Further review of client #2's service documentation checklist revealed April 2024 three days of documentation (4/1,4/9,4/11), May 2024 two days of documentation (5/19 and 5/23), June 2024 No documentation, July 2024 six days of documentation (7/1,7/3,7/4,7/10,7/11,and 7/12). C. Review on 7/15/24 of client #3's IPP dated 8/22/23 revealed formal training programs as follows:-Will brush her teeth: Data to be collected three times a week for three months. -Will wash upper body three times a week: Data	W 252		

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W 252	Continued From page 10 to be collected three times a week. over 5 months training period. - Pull up pants: Data to be collected three times a week for six consecutive months. Further review of client #3's service documentation checklist revealed April 2024 three days of documentation (41,4/2 and 4/11) May 2024 two days of documentation (5/2 and 5/5), June 2024 one day of documentation (6/1) July 2024 six days of documentation (7/3, 7/10,7/11,7/12,7/13,7/15) D. Review on 7/16/24 of client #4's IPP dated 2/13/24 revealed formal training programs as follows:-Will sign bathroom: Data to be collected three times a week for three consecutive months. - Will apply toothpaste to toothbrush: Data to be collected three times a week for 7 consecutive months. -Will wash hands for 10 seconds for 4 consecutive months: Data to be collected three times a week Further review of clients #4's service documentation checklist revealed April 2024 1 day of documentation (4/9), May No documentation, June 2024 No documentation and July 2024 five days of documentation (7/3,7/10,7/11,7/12 and 7/15). E. Review on 7/16/24 of client #9's IPP dated 2/27/24 revealed formal training programs as follows: -Will complete oral hygiene routine using gestures: Data to be collected three times a week for nine consecutive months -Pay for your items: Data to be collected three times a week for twelve consecutive months - Push the button to add the detergent to the loaded machine : Data to be collected three times a week for eight consecutive months .	W 252		

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Further review of client #9's service documentation checklist revealed April 2024 one day of documentation (4/2) May 2024 no documentation, June 2024 one day of documentation (6/1), July 2024 6 days of documentation (7/3,7/10,7/11,7/12,7/13 and 7/15)

F. Review on 7/15/24 of client #12's IPP dated 6/11/24 revealed formal training programs as follows:-Will write her uncles's name : Data to be collected three times a week for five consecutive months
-Will point to the $10 bill independently- Data to be collected three times a week for four consecutive months
-Will do the laundry: Data collected three times a week for six months.
Further review of client #12's service documentation checklist revealed April 2024 no documentation May 2024 no documentation, June 2024 no documentation, July 2024 three days of documentation (7/8,7/10 and 7/15)

G. Review on 7/15/24 of client #13's IPP dated 10/18/23 revealed formal training programs as follows:
-Will place his keys on his nightstand independently with data to be collected three times per week for six consecutive months.
-Retrieve his deodorant from his hygiene basket three times per week for 6 consecutive months.
-Will choose a shirt from two options in the morning with prompts for six consecutive months.
-Will place his toothbrush on his teeth three times per week for ten months.

Further review of client #13's service documentation checklist revealed data collected in April 2024, 3 days of documentation (4/1, 4/9

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W 252	Continued From page 12 and 4/12), May 2024 no documentation, June 2024 no documentation and July 2024, 3 days of documentation (7/10, 7/12 and 7/15). H. Review on 7/16/24 of client #14's IPP dated 9/26/23 revealed formal training programs as follows: -Will apply tooth paste to his toothbrush with data to be collected three times per week after breakfast for 8 months. -Will accept a warm wash cloth from staff with data to be collected three times per week for six months. -Sort blocks with data to be collected 3 times per week for six months. Further review of client #14's service documentation checklist revealed data collected in April 2024, 2 days of documentation (4/2 and 4/12), May 2024, 1 day of documentation (5/4), June 2024 no documentation and July 2024, 5 days of documentation (7/3, 7/4, 7/10, 7/11, 7/12 and 7/15). Interview on 7/16/24 with the Vice President of Operations confirmed the facility currently and historically has issues with staff documenting goals and objectives for all clients. The Vice President of Operations also confirmed data was not documented as prescribed.	W 252		
W 340	NURSING SERVICES CFR(s): 483.460(c)(5)(i) Nursing services must include implementing with other members of the interdisciplinary team, appropriate protective and preventive health measures that include, but are not limited to training clients and staff as needed in appropriate	W 340		

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W 340	Continued From page 13 health and hygiene methods. This STANDARD is not met as evidenced by: Based on observations and interviews, the facility failed to ensure staff were sufficiently trained to implement appropriate health and hygiene methods. This affected 7 of 9 audit clients (#3, #5, #6, #9, #12, #13 and #14). The findings are: A. During observations in the home throughout the survey on 7/15/24 through 7/16/24, client #5, #7, #13 and #14's fingernails were noted to be very long. Record review on 7/16/24 for each client did not detail the client's capabilities to complete nail care independently. Interview on 7/16/24 with the facility director revealed that staff are responsible for cutting all client's nails but no record is kept of when nail care occurs. The director confirmed that staff should be ensuring client's nail are clean and cut. B. During 2 of 2 mealtime observations in the home throughout the survey on 7/15/24 - 7/16/24, client #3, #6, #9 and #12, were not offered the opportunity to wash their hands before meals. Some clients were playing with blocks and coloring in coloring books before being called to the table. Clients were called to come to the table for meals and set place settings grabbing dishes from a basket from a cart. While waiting for the meal to come out of the kitchen some consumers walked away from the table touching and picking up other activity items then returned to the table to eat dinner without washing their hands. Review of client #3's Educational /Vocational	W 340		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	34G054	A. BUILDING _____ B. WING _____	07/16/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
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W 340	Continued From page 14 Evaluation dated 7/11/23 client #3 "is sometimes unable to appropriately wash her hand appropriately". Review of client #6's Educational /Vocational Evaluation dated 11/11/23 client #6 "occasional refuses to wash her hands". Review of client #9's Educational/Vocational Evaluation dated 1/1/24 "she manages her toileting and handwashing with occasional reminders from staff to ensure proper hygiene". Review of client #12's Educational/Vocational Evaluation dated 5/6/24 "she needs occasional reminders to ensure proper handwashing". Interview on 7/16/24 with staff A confirmed all clients should wash there hands before all meals. Interview on 7/16/24 with the facility director confirmed all clients should wash or sanitize their hands prior to dining. Interview on 7/16/24 with staff H confirmed client #9 should wash her hands before meals. Staff H revealed client #9 was having a difficult time getting out of bed this morning she refused to do any hygiene and would only come to the table.	W 340		
W 368	DRUG ADMINISTRATION CFR(s): 483.460(k)(1) The system for drug administration must assure that all drugs are administered in compliance with the physician's orders. This STANDARD is not met as evidenced by: Based on observations, record review and interview, the facility failed to ensure medications	W 368		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	34G054	A. BUILDING _____ B. WING _____	07/16/2024

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W 368	Continued From page 15 were administered in accordance with physician's orders. This affected 1 of 9 audit clients (#2). The finding is: During morning observations in the home on 7/16/24 at 7:37am, the medication technician was observed administering medications to client #2 that included a Fiber-Lax tablet. The medication technician gave client #2 the option of water or juice. Client #2 chose juice and it was poured into a 5 ounce cup. Record review 7/16/24 of client #2's physician's orders dated 7/1/24 revealed an order for "Fiber-Lax Tab 625mg. Take 1 tablet by mouth once daily with 8 ounces of water". Interview on 7/16/24 with the facility nurse revealed Fiber-Lax tablet should have been given with 8oz of water as prescribed.	W 368		
W 436	SPACE AND EQUIPMENT CFR(s): 483.470(g)(2) 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: Based on observations, record review and interviews, the facility failed to ensure 1 of 9 audit clients (#9) was taught to make informed choices regarding the use of her eye glasses. This affected 1 of 9 audit clients. The finding is: During observations in the home throughout the 7/15/24 - 7/16/24 survey revealed, client #9 did	W 436		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	34G054	A. BUILDING _____ B. WING _____	07/16/2024

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W 436	Continued From page 16 not wear eye glasses. The client was not prompted or encouraged to wear eye glasses. Review on 7/16/24 of client #9 Glasses Support Program (dated 5/13/24) revealed "It is essential to support [client #9] in adapting to wearing glasses comfortably and consistently as recommended by her eye appointment". During an interview on 7/16/24 with staff A, when asked if client #9 wears eye glasses, the staff stated, she has glasses but she refuses to wear them. Interview on 7/16/24 with the Vice President of Operations revealed that client #9 has a support program not a goal. However, she confirmed staff should encourage client #9 to wear her glasses regularly.	W 436		