

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

PRINTED: 06/01/2017
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 49G064	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 05/25/2017
NAME OF PROVIDER OR SUPPLIER LUCAS STREET		STREET ADDRESS, CITY, STATE, ZIP CODE 5701 LUCAS STREET FREDERICKSBURG, VA 22407	
(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)

W 000 INITIAL COMMENTS

W 000

An unannounced annual Medicaid survey for Intermediate Care Facilities for Persons with Intellectual Disabilities (ICF/ID) was conducted 05/23/17 through 05/25/17. The facility was not in compliance with 42 CFR Part 483 Requirements for Intermediate Care Facilities for the Intellectually Disabled. The Life Safety Code survey report will follow.

The census in this four bed facility was four at the time of the survey. The survey sample consisted of two current Individual reviews, (Individuals #1 and #2).

W 111 483.410(c)(1) CLIENT RECORDS

W 111

W111

6/30/17

The facility must develop and maintain a recordkeeping system that documents the client's health care, active treatment, social information, and protection of the client's rights.

This STANDARD is not met as evidenced by:
Based on staff interviews and residential record reviews it was determined that the facility staff failed to ensure the clinical record was complete and accurate for one of two individuals in the survey sample, Individual # 1.

The facility staff failed to document the current diet texture on the ISP (Individual Support Plan) for Individual # 1.

The findings include:

Individual # 1 was a 53 year old female, who was admitted to (Name of Group Home) on 09/08/14. Diagnoses in the clinical record included but were

How corrective action will be accomplished for individual #1:

The QIDP will update the ISP to reflect the correct diet texture for individual #1 to ensure that the clinical record is complete and accurate.

Assurance that other residents are protected from the possibility of the deficiency:

The QIDP will review the ISP's for all other residents to ensure that diet textures are accurately documented in order to ensure that the clinical record is complete and accurate.

Measures to be put into place or systemic changes to be made to

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE



ID Residential Coordinator

6/9/17

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 111	<p>Continued From page 1</p> <p>not limited to: mild intellectual disability (1), glioblastoma multiform (2), seizures (3), hallucinations (4),) gastroesophageal reflux disease (5), adrenal insufficiency (6) and obstructive sleep apnea (7).</p> <p>The ISP (Individual Support Plan) dated 10/08/2016 through 10/07/2017 for Individual # 1 documented in part, "Goal; Health and Safety - Eating Protocol. (Individual # 1) has been hospitalized recently for Aspiration Pneumonia and according to the video swallow study, (Individual # 1) is a 'silent aspirator' which means that she may not always show the outward signs of choking while eating or drinking such as sputtering, coughing, etc. This can be very dangerous so following her eating protocol is very important as follows: (Individual # 1) must eat a mechanical soft diet with nectar thickened liquids."</p> <p>The "Swallowing/Eating Assessment" dated 02/23/2017 for Individual # 1 documented, Recommendations: 1) Continue prescribed diet of ground diet with nectar liquids."</p> <p>The meal guidelines for Individual # 1 documented, "My food must be ground."</p> <p>Observations of Individual # 1's meal during the days of the survey revealed the diet texture to be ground.</p> <p>On 05/24/17 at 11:25 an interview was conducted with ASM (administrative staff member) # 2, assistant manager of (Name of Group Home). After reviewing the ISP dated 10/08/2016 through 10/07/2017 and the meal guidelines for Individual # 1 ASM # 2 was asked about the discrepancy of</p>	W 111	<p><u>ensure that the deficient practice will not recur:</u> The QIDP will revise each individual's ISP immediately upon any order changes being made to an individual's diet texture to ensure a complete and accurate clinical record.</p> <p><u>How the facility plans to monitor its performance to make sure that solutions are sustained:</u> The ISP for each client that incurs a diet texture change will be reviewed by the ICF supervisor no later than 5 days after the change to ensure that the change has been updated into the ISP to ensure a complete and accurate clinical record individual.</p> <p><u>Date of Completion:</u> 6/30/17</p>

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W 111	<p>Continued From page 2</p> <p>Individual # 1's food texture. ASM # 2 stated, "The ISP should be the same as the meal guideline, she's on a ground texture."</p> <p>On 05/24/17 at 4:50 p.m. ASM (administrative staff member) # 1, program supervisor, ASM # 2, assistant manager ASM # 3, assistant intellectual disabilities residential coordinator and OSM (other staff member) # 1, the QIDP (Qualified Intellectual Disabilities Professional) were made aware of the findings.</p> <p>No further information was provided prior to exit.</p> <p>References:</p> <p>(1) Refers to a group of disorders characterized by a limited mental capacity and difficulty with adaptive behaviors such as managing money, schedules and routines, or social interactions. Intellectual disability originates before the age of 18 and may result from physical causes, such as autism or cerebral palsy, or from nonphysical causes, such as lack of stimulation and adult responsiveness. This information was obtained from the website: https://report.nih.gov/nihfactsheets/ViewFactSheet.aspx?csid=100.</p> <p>(2) A brain tumor is a growth of abnormal cells in the tissues of the brain. Brain tumors can be benign, with no cancer cells, or malignant, with cancer cells that grow quickly. Some are primary brain tumors, which start in the brain. Others are metastatic, and they start somewhere else in the body and move to the brain. This information was obtained from the website: https://medlineplus.gov/braintumors.html.</p>	W 111		

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W 111	Continued From page 3 (3) Symptoms of a brain problem. They happen because of sudden, abnormal electrical activity in the brain. This information was obtained from the website: https://www.nlm.nih.gov/medlineplus/seizures.html . (4) Involve sensing things such as visions, sounds, or smells that seem real but are not. These things are created by the mind. This information was obtained from the website: https://medlineplus.gov/ency/article/003258.htm . (5) Stomach contents to leak back, or reflux, into the esophagus and irritate it. This information was obtained from the website: https://www.nlm.nih.gov/medlineplus/gerd.html . (6) (Addison Disease) Your adrenal glands are just above your kidneys. The outside layer of these glands makes hormones that help your body respond to stress and regulate your blood pressure and water and salt balance. Addison disease happens if the adrenal glands don't make enough of these hormones. A problem with your immune system usually causes Addison disease. The immune system mistakenly attacks your own tissues, damaging your adrenal glands. Other causes include infections and cancer. This information was obtained from the website: https://medlineplus.gov/addisondisease.html . (7) Obstructive sleep apnea (OSA) is a problem in which your breathing pauses during sleep. This occurs because of narrowed or blocked airways. This information was obtained from the website: https://medlineplus.gov/ency/article/000811.htm .	W 111		
W 159	483.430(a) QIDP	W 159		

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W 159	Continued From page 4 Each client's active treatment program must be integrated, coordinated and monitored by a qualified intellectual disability professional. This STANDARD is not met as evidenced by: Based on staff interview, facility document review, and residential record review, it was determined that the QIDP (qualified intellectual disabilities professional) failed to coordinate and monitor the active treatment for two of two individuals in the survey sample, Individuals #1 and #2. 1a. The QIDP (Qualified Intellectual Disabilities Professional) failed to ensure objectives on the ISP for Individual # 1 were developed in measurable terms. 1b. The QIDP failed to ensure the data collection of the ISP outcomes/goals for Individual # 1 were in measurable terms. 1c. The QIDP failed to ensure Individual # 1's active treatment program for knitting was implemented. 1d. The QIDP failed to coordinate and develop a relevant ISP (Individual Support Plan) from the CFA (Comprehensive Functional Assessment) tailored to meet Individual # 1's needs. 2a. The QIDP (Qualified Intellectual Disabilities Professional) failed to ensure objectives on the ISP for Individual # 2 were developed in measurable terms. 2b. The QIDP failed to ensure the data collection of the ISP outcomes/goals for Individual # 2 were in measurable terms.	W 159	W159 6/30/17 1a. <u>How corrective action will be accomplished for individual #1:</u> The QIDP will revise the support plan for individual #1 to ensure that goals are documented in measurable terms. <u>Assurance that other residents are protected from the possibility of the deficiency:</u> The QIDP will review and revise support plans for each resident to ensure that goals are documented in measurable terms. <u>Measures to be put into place or systemic changes to be made to ensure that the deficient practice will not recur:</u> The QIDP will extract outcomes from the Comprehensive Functional and Clinical Assessments to establish skill building outcomes that can be documented in measurable terms. <u>How the facility plans to monitor its performance to make sure that solutions are sustained:</u> The annual ISP for each client will be reviewed by the ICF supervisor prior to submission deadlines to ensure that goals are documented in measurable terms. <u>Date of Completion:</u> 6/30/17

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W 159	Continued From page 5 2c. The QIDP failed to coordinate and develop a relevant ISP (Individual Support Plan) from the CFA (Comprehensive Functional Assessment) tailored to meet Individual # 2's needs. The findings include: 1a. The QIDP (Qualified Intellectual Disabilities Professional) failed to ensure objectives on the ISP for Individual # 1 were developed in measurable terms. Individual # 1 was a 53 year old female, who was admitted to (Name of Group Home) on 09/08/14. Diagnoses in the clinical record included but were not limited to: mild intellectual disability (1), glioblastoma multiforme (2), seizures (3), hallucinations (4), gastroesophageal reflux disease (5), adrenal insufficiency (6) and obstructive sleep apnea (7). Review of Individual # 1's current ISP (Individual Support Plan) dated 10/08/2016 through 10/07/2017 revealed: "Goal 1. Outcome Important To/for: (Individual # 1) makes choices concerning her daily routine and activities. How often or by when? Daily. Goal 2. Outcome Important To/for: (Individual # 1) chooses an event or group activity once per month at day support. How often or by when? Monthly. Goal 3. Outcome Important To/for: (Individual # 1) would like to build her strength in order to walk again one day. How often or by when? Daily. Goal 4. Outcome Important To/for: (Individual # 1) would like to go on a vacation to place of her choosing. How often or by when? Annually. Goal 5. Outcome Important To/for: (Individual # 1) learns to count money. How often or by when?"	W 159	W159 1b. <u>How corrective action will be accomplished for individual #1:</u> The QIDP will revise the data collection sheet for individual #1 to ensure that goal data is collected and documented in measurable terms. <u>Assurance that other residents are protected from the possibility of the deficiency:</u> The QIDP will review and revise data collection sheets for each resident to ensure that goal data is collected and documented in measurable terms. <u>Measures to be put into place or systemic changes to be made to ensure that the deficient practice will not recur:</u> The QIDP will extract outcomes from the Comprehensive Functional and Clinical Assessments to establish skill building outcomes that can be collected and documented in measurable terms. <u>How the facility plans to monitor its performance to make sure that solutions are sustained:</u> The data collection sheets for each client will be reviewed by the ICF supervisor prior to initiation to ensure that goal data can be collected and documented in measurable terms. <u>Date of Completion:</u> 6/30/17

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W 159	<p>Continued From page 6</p> <p>Monthly. Goal 6. Outcome Important To/for: (Individual # 1) will learn to knit using a loom. How often or by when? Weekly." Further review of ISP goals # 1, # 2, # 3, # 4, #5 and # 6 for Individual # 1 failed to evidence documentation of quantitative measurable indicators of performance.</p> <p>On 05/25/17 at 8:50 a.m. an interview was conducted with ASM (administrative staff member) # 1, the program supervisor, ASM # 2, the assistant manager, ASM # 3, the assistant intellectual disabilities residential coordinator and OSM (other staff member) # 1, the QIDP (Qualified Intellectual Disabilities Professional). When asked to describe the purpose of the ISP (individual support plan), OSM # 1 stated, "Helps build skills toward independence. The goal needs a quantitative measure to determine progress." ASM # 1, ASM # 2, ASM # 3 and OSM # 1 were asked to review Individual # 1's current ISP goals # 1 through # 6 dated 10/08/2016 through 10/07/2017. When asked if the ISP goals # 1 through # 6 were developed in measurable terms to determine Individual # 1's progress, ASM # 3 and OSM # 1 stated, "No." When asked if it was the responsibility of the QIDP to ensure goals/outcomes were written in measurable terms, OSM # 1 stated, "Yes."</p> <p>The facility's policy "4-2. Qualified Intellectual Disabilities Professional" documented in part, "3. Responsibilities of the QIDP: a. Facilitate the individual's Person Centered Plan (PCP) and Personal Support Team (PST) for development and review twice a year, with documented quarterly reviews by the QIDP. c. Ensure that the PCP is reflective of the criteria for Active Treatment, plans, interventions, task analysis,</p>	W 159	<p>W159</p> <p><u>Ic.</u></p> <p><u>How corrective action will be accomplished for Individual #1:</u> The QIDP will monitor facility staff to ensure they are implementing the active treatment outcome involving learning to knit with a loom for Individual #1. <u>Assurance that other residents are protected from the possibility of the deficiency:</u> The QIDP will monitor facility staff to ensure they are implementing all outcomes in the active treatment plan for each resident. <u>Measures to be put into place or systemic changes to be made to ensure that the deficient practice will not recur:</u> The QIDP will review data to ensure outcome implementation is being recorded accurately by staff. <u>How the facility plans to monitor its performance to make sure that solutions are sustained:</u> The program Supervisor and assistant manager will review all data collection at a minimum of monthly to ensure that implementation is being recorded accurately. <u>Date of Completion:</u> 6/30/17</p>	6/30/17

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W 159	<p>Continued From page 7</p> <p>data collection, etc. d. Ensures that the PCP is revised and updated as needed. f. Monitor and observe the individuals, their activities, the supports and services, progress notes and data."</p> <p>On 05/24/17 at 4:50 p.m. ASM (administrative staff member) # 1, program supervisor, ASM # 2, assistant manager ASM # 3, assistant intellectual disabilities residential coordinator and OSM (other staff member) # 1, the QIDP (Qualified Intellectual Disabilities Professional) were made aware of the findings.</p> <p>No further information was provided prior to exit.</p> <p>References:</p> <p>(1) Refers to a group of disorders characterized by a limited mental capacity and difficulty with adaptive behaviors such as managing money, schedules and routines, or social interactions. Intellectual disability originates before the age of 18 and may result from physical causes, such as autism or cerebral palsy, or from nonphysical causes, such as lack of stimulation and adult responsiveness. This information was obtained from the website: https://report.nih.gov/nihfactsheets/ViewFactSheet.aspx?csid=100.</p> <p>(2) A brain tumor is a growth of abnormal cells in the tissues of the brain. Brain tumors can be benign, with no cancer cells, or malignant, with cancer cells that grow quickly. Some are primary brain tumors, which start in the brain. Others are metastatic, and they start somewhere else in the body and move to the brain. This information was obtained from the website: https://medlineplus.gov/brain tumors.html.</p>	W 159	<p>W159</p> <p>1d.</p> <p><u>How corrective action will be accomplished for individual #1:</u> The QIDP will coordinate and revise the support plan for individual #1 to develop an active treatment program relevant to meet their needs in accordance with the information gathered in the Comprehensive Functional Assessment.</p> <p><u>Assurance that other residents are protected from the possibility of the deficiency:</u> The QIDP will coordinate and revise the support plan for each individual to develop an active treatment program relevant to meet each individual's needs in accordance with the information gathered in the Comprehensive Functional Assessment.</p> <p><u>Measures to be put into place or systemic changes to be made to ensure that the deficient practice will not recur:</u> The QIDP will extract information from the Comprehensive Functional Assessments to establish active treatment programs for each individual at a minimum of annually for their ISP or as changes or revisions are needed based on individualized needs.</p>	6/30/17

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W 159	Continued From page 8 (3) Symptoms of a brain problem. They happen because of sudden, abnormal electrical activity in the brain. This information was obtained from the website: https://www.nlm.nih.gov/medlineplus/seizures.html . (4) Involve sensing things such as visions, sounds, or smells that seem real but are not. These things are created by the mind. This information was obtained from the website: https://medlineplus.gov/ency/article/003258.htm . (5) Stomach contents to leak back, or reflux, into the esophagus and irritate it. This information was obtained from the website: https://www.nlm.nih.gov/medlineplus/gerd.html . (6) (Addison Disease) Your adrenal glands are just above your kidneys. The outside layer of these glands makes hormones that help your body respond to stress and regulate your blood pressure and water and salt balance. Addison disease happens if the adrenal glands don't make enough of these hormones. A problem with your immune system usually causes Addison disease. The immune system mistakenly attacks your own tissues, damaging your adrenal glands. Other causes include infections and cancer. This information was obtained from the website: https://medlineplus.gov/addison-disease.html . (7) Obstructive sleep apnea (OSA) is a problem in which your breathing pauses during sleep. This occurs because of narrowed or blocked airways. This information was obtained from the website: https://medlineplus.gov/ency/article/000811.htm .	W 159	<u>How the facility plans to monitor its performance to make sure that solutions are sustained:</u> The annual ISP for each client will be reviewed by the ICF supervisor prior to submission deadlines to ensure that active treatment programs in accordance with the Comprehensive Functional Assessment for each resident are documented in the ISP. <u>Date of Completion:</u> 6/30/17 <u>W159</u> <u>2a.</u> 6/30/17 <u>How corrective action will be accomplished for individual #2:</u> The QIDP will revise the support plan for individual #2 to ensure that goals are documented in measurable terms. <u>Assurance that other residents are protected from the possibility of the deficiency:</u> The QIDP will review and revise support plans for each resident to ensure that goals are documented in measurable terms. <u>Measures to be put into place or systemic changes to be made to ensure that the deficient practice will not recur:</u> The QIDP will extract outcomes from the Comprehensive Functional

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W 159	<p>Continued From page 9</p> <p>1b. The QIDP failed to ensure the data collection of the ISP outcomes/goals for Individual # 1 were in measurable terms.</p> <p>Review of Individual # 1's current ISP (Individual Support Plan) dated 10/08/2016 through 10/07/2017 revealed: "Goal 1. Outcome Important To/for: (Individual # 1) makes choices concerning her daily routine and activities. How often or by when? Daily. Goal 2. Outcome Important To/for: (Individual # 1) chooses an event or group activity once per month at day support. How often or by when? Monthly. Goal 3. Outcome Important To/for: (Individual # 1) would like to build her strength in order to walk again one day. How often or by when? Daily. Goal 4. Outcome Important To/for: (Individual # 1) would like to go on a vacation to place of her choosing. How often or by when? Annually. Goal 5. Outcome Important To/for: (Individual # 1) learns to count money. How often or by when? Monthly. Goal 6. Outcome Important To/for: (Individual # 1) will learn to knit using a loom. How often or by when? Weekly." Further review of ISP goals # 1, # 2, # 3, # 4, #5 and # 6 for Individual # 1 failed to evidence documentation of quantitative measurable indicators of performance.</p> <p>The "Support Checklist" (data collection) for Individual # 1 dated 04/01/2017 through 05/20/2017 was reviewed. The "Support Checklist" failed to evidence documentation of the data collection of Individual # 1's ISP outcome/goals in measurable terms.</p> <p>The "Comprehensive Progress Notes" for Individual # 1 dated 04/01/2017 through 05/20/2017 were reviewed. The "Comprehensive</p>	W 159	<p>and Clinical Assessments to establish skill building outcomes that can be documented in measurable terms.</p> <p><u>How the facility plans to monitor its performance to make sure that solutions are sustained:</u> The annual ISP for each client will be reviewed by the ICF supervisor prior to submission deadlines to ensure that goals are documented in measurable terms.</p> <p><u>Date of Completion:</u> 6/30/17</p> <p><u>W159</u> 6/30/17 <u>2b.</u> <u>How corrective action will be accomplished for individual #2:</u> The QIDP will revise the data collection sheet for individual #2 to ensure that goal data is collected and documented in measurable terms. <u>Assurance that other residents are protected from the possibility of the deficiency:</u> The QIDP will review and revise data collection sheets for each resident to ensure that goal data is collected and documented in measurable terms. <u>Measures to be put into place or systemic changes to be made to ensure that the deficient practice will not recur:</u> The QIDP will extract outcomes from</p>

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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 159	<p>Continued From page 10</p> <p>Progress Notes" failed to evidence documentation of the data collection of Individual # 1's ISP outcome/goals in measurable terms.</p> <p>On 05/25/17 at 8:50 a.m. an interview was conducted with ASM (administrative staff member) # 1, the program supervisor, ASM # 2, the assistant manager, ASM # 3, the assistant intellectual disabilities residential coordinator and OSM (other staff member) # 1, the QIDP (Qualified Intellectual Disabilities Professional). ASM # 1, ASM # 2, ASM # 3 and OSM # 1 were asked to review Individual # 1's "Support Checklist" dated 04/01/2017 through 05/20/2017 and the "Comprehensive Progress Notes" dated 04/01/2017 through 05/20/2017. When asked if the data collected for Individual # 1 ISP goals, was collected in measurable terms, to determine Individual # 1's progress, ASM # 3 and OSM # 1 stated, "No." When asked if it was the responsibility of the QIDP to ensure data collection was collected in measurable terms, OSM # 1 stated, "Yes."</p> <p>On 05/24/17 at 4:50 p.m. ASM (administrative staff member) # 1, program supervisor, ASM # 2, assistant manager, ASM # 3, assistant intellectual disabilities residential coordinator and OSM # 1, the QIDP (Qualified Intellectual Disabilities Professional) were made aware of the findings.</p> <p>No further information was provided prior to exit.</p> <p>1c. The QIDP failed to ensure Individual # 1's active treatment program for knitting was implemented.</p> <p>Review of Individual # 1's current ISP (Individual Support Plan) dated 10/08/2016 through</p>	W 159	<p>the Comprehensive Functional and Clinical Assessments to establish skill building outcomes that can be collected and documented in measurable terms.</p> <p><u>How the facility plans to monitor its performance to make sure that solutions are sustained:</u></p> <p>The data collection sheets for each client will be reviewed by the ICF supervisor prior to initiation to ensure that goal data can be collected and documented in measurable terms.</p> <p><u>Date of Completion:</u> 6/30/17</p> <p><u>W159</u> <u>2c.</u></p> <p><u>How corrective action will be accomplished for individual #2:</u></p> <p>The QIDP will coordinate and revise the support plan for individual #2 to develop an active treatment program relevant to meet their needs in accordance with the information gathered in the Comprehensive Functional Assessment.</p> <p><u>Assurance that other residents are protected from the possibility of the deficiency:</u></p> <p>The QIDP will coordinate and revise the support plan for each individual to develop an active treatment program relevant to meet each individual's needs in accordance with the information</p>

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W 159	<p>Continued From page 11</p> <p>10/07/2017 revealed: "Goal 6. Outcome Important To/for: (Individual # 1) will learn to knit using a loom. Describe how this will be provided based on individual preferences. (support instructions) and location where program strategy can be found: (Individual # 1) wants to learn to knit. (Individual # 1) is not able to engage in finger manipulation on her left hand, therefore using a loom to knit is necessary. Remind (Individual # 1) to gather all of her knitting supplies such as the yarn, loom, etc. Encourage (Individual # 1) to her left hand on the loom to brace it down on the table if possible. If this is harder for her on a particular day, hold the loom down for her or brace it on the table. This way, (Individual # 1) can use her right hand to manipulate the yarn. Read (Individual # 1) the instructions the first time and use hand over hand support if necessary step by step until she feels comfortable with the process. How often or by when? Weekly."</p> <p>The "Support Checklist" (data collection) for Individual # 1 dated 04/01/2017 through 05/20/2017 was reviewed. The "Support Checklist" failed to evidence documentation of Individual # 1's knitting program being implemented during the week of 04/02/17 to 04/08/17. Further review of the "Support Checklist" revealed dashes for each day from 04/02/17 through 04/08/17.</p> <p>The "Comprehensive Progress Notes" for Individual # 1 dated 04/02/17 through 04/08/17 were reviewed. The "Comprehensive Progress Notes" failed to evidence documentation of Individual # 1's knitting program being implemented during the week of 04/02/17 through 04/08/17.</p>	W 159	<p>gathered in the Comprehensive Functional Assessment.</p> <p><u>Measures to be put into place or systemic changes to be made to ensure that the deficient practice will not recur:</u></p> <p>The QIDP will extract information from the Comprehensive Functional Assessments to establish active treatment programs for each individual at a minimum of annually for their ISP or as changes or revisions are needed based on individualized needs.</p> <p><u>How the facility plans to monitor its performance to make sure that solutions are sustained:</u></p> <p>The annual ISP for each client will be reviewed by the ICF supervisor prior to submission deadlines to ensure that active treatment programs in accordance with the Comprehensive Functional Assessment for each resident are documented in the ISP.</p> <p><u>Date of Completion:</u> 6/30/17</p>	

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On 05/25/17 at 8:50 a.m. an interview was conducted with ASM (administrative staff member) # 1, the program supervisor, ASM # 2, the assistant manager, ASM # 3, the assistant intellectual disabilities residential coordinator and OSM (other staff member) # 1, the QIDP (Qualified Intellectual Disabilities Professional). ASM # 1, ASM # 2, ASM # 3 and OSM # 1 were asked to explain the dashes on the "Support Checklist." OSM # 1 stated, "A dash means the program wasn't run or implemented." When asked who was responsible for checking and ensuring the active treatment programs were being implemented according to an Individual's ISP, ASM # 1 stated that the assistant manager and the QIDP were responsible for checking the data collected and active treatments were implemented. ASM # 1 also stated that the data collection was checked multiple times a week. ASM # 1, ASM # 2 and OSM # 1 were asked to review Individual # 1's "Support Checklist" dated 04/02/2017 through 04/08/2017 and the "Comprehensive Progress Notes" dated 04/02/2017 through 04/08/2017. When asked if Individual # 1's knitting program was implemented during the week of 04/02/2017 through 04/08/2017, OSM # 1 stated, "No." When asked if it was the responsibility of the QIDP to ensure active treatment programs were implemented OSM # 1 stated, "Yes."

On 05/24/17 at 4:50 p.m. ASM # 1, program supervisor, ASM # 2, assistant manager ASM # 3, assistant intellectual disabilities residential coordinator and OSM (other staff member) # 1, the QIDP were made aware of the findings.

No further information was provided prior to exit.

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W 159	Continued From page 13 1d. The QIDP failed to coordinate and develop a relevant ISP (Individual Support Plan) from the CFA (Comprehensive Functional Assessment) tailored to meet Individual # 1's needs. Review of the CFA dated September 2016 for Individual # 1 revealed a page entitled "Adaptive Behavior Assessment Keys." The "Adaptive Behavior Assessment Keys" documented, "0 (zero): Task Resistive - consumer does not cooperate or become combative; 1 (one): Dependent - staff completes 100% (percent) of the task; 2 (two): Maximum Assistance - staff completes 75% of the task. Hand-over-hand assistance is used to complete the process. Staff may initially guide the consumer then release hand-over-hand assistance; 3 (three): Moderate Assistance - staff completes 50% of the task. Partial hand-over-hand assistance is required. Staff may initially guide the consumer then release hand-over-hand; 4 (four): Minimal Assistance - staff completes 25% of the task. Intermittent hand-over-hand assistance is required. Staff provides hand-over-hand assistance as needed to complete the task; % (five): Touch Prompt - a quick touch is given to get the consumer to begin the task; 6 (six): Verbal direction - a verbal statement is given to the hearing consumer; 7 (seven): Manual Sign - a manual sign is given to a hearing impaired consumer, instead of or in addition to a verbal direction; 8 (eight): Verbal Cue - a cue or hint about completing the task; 9 (nine) Gestural Cue - a visual cue such as pointing; 10 Set-up, supervision, contact guard - the environment is set up to cause the consumer to complete the task independently or the consumer is supervised during the independent completion of the task for	W 159		

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W 159	Continued From page 14 safety purposes; 11 Modified Independence - the consumer uses some type of adaptive equipment to complete a task without prompting or supervision; 12 Complete Independence - the consumer completes the task without prompts or cues, in a timely and safe manner. If the consumer were left alone, he/she would complete the task by his or her self; 13 N/A (non applicable) - Only to be used for gender or disability specific questions such as menstrual care, bra use, wheelchair use." Further review of the CFA revealed that in the area of "Dressing" Individual # 1 required maximum assistance to verbal cues to complete a dressing task, in the area of "Eating" Individual # 1 required maximum assistance to verbal cues to complete an eating task, in the area of Life Safety and Health Individual # 1 required maximum to minimum assistance to complete a life safety and health task and in the area of "Domestic Skills" Individual # 1 required maximum assistance to set-up/supervision/contact guard to complete a domestic skills task. Review of Individual # 1's ISP (Individual support Plan) dated 10/08/2016 through 10/07/2017 failed to evidence training outcomes for the areas of dressing, eating, life safety/health and domestic skills. On 05/24/17 at 2:00 p.m. an interview was conducted with OSM (other staff member) # 1 the QIDP (Qualified Intellectual Disabilities Professional) regarding the process of developing the Individual Support Plan from the Comprehensive Functional Assessment. When asked to describe the process, OSM # 1 stated,	W 159		

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W 159	<p>Continued From page 15</p> <p>"The team, which includes the supervisor, assistant manager, physical therapy, occupational therapy, speech therapy, the nutritionist, the psychologist and the day support staff, review the comprehensive functional assessment which includes the areas of self-care, eating, sensorimotor, life safety/health, domestic skills, leisure, social, pre-vocational cognitive and community living. Subcategories are selected from the major areas for the individual to work on and it is added in the ISP based on the scoring from two (2), maximum assistance to 10, set-up/supervision/contact guard." When asked if this was the process used to develop Individual # 1's current ISP dated 10/08/2016 through 10/07/2017 OSM # 1 stated, "No, it was not the approach that was taken at the time (Individual # 1's) ISP was developed." When asked who developed Individual # 1's ISP, OSM # 1 stated that it was the previous QIDP who was no longer with the facility. After reviewing Individual # 1's CFA dated September 2016 and the ISP dated 10/08/2016 through 10/07/2017, OSM # 1 was asked if Individual # 1's ISP was developed to address the triggered areas of dressing, eating, life safety/health and domestic skills from the CFA. OSM # 1 stated, "No." When asked if it was the QIDP was ultimately responsible to ensure the ISP was developed from the triggered areas of the CFA, OSM # 1 stated, "Yes."</p> <p>On 05/24/17 at 4:50 p.m. ASM # 1, program supervisor, ASM # 2, assistant manager ASM # 3, assistant intellectual disabilities residential coordinator and OSM # 1, the QIDP (Qualified Intellectual Disabilities Professional) were made aware of the findings.</p> <p>No further information was provided prior to exit.</p>	W 159		

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2a. The QIDP (Qualified Intellectual Disabilities Professional) failed to ensure objectives on the ISP for Individual # 2 were developed in measurable terms.

Individual # 2 was a 74 year old female, who was admitted to (Name of Group Home) on 07/28/14. Diagnoses in the clinical record included but were not limited to: profound intellectual disability (1), osteoporosis (2), scoliosis (3), fibrocystic breast (4) and glaucoma (5).

Review of Individual # 2's current ISP (Individual Support Plan) date 08/26/2016 through 08/25/2017 revealed: "Goal 3A. Outcome Important To/for: (Individual # 2) will have assistance with her participation in showers/bathing. How often or by when? Daily. Goal 8 Outcome Important To/for: (Individual # 2) will have opportunities to build relationships with family, friends and peers, at home and in the community. How often or by when? Daily. Goal 9. Outcome Important To/for: (Individual # 2) will maintain/increase her strength and flexibility. How often or by when? Daily. Goal 10. Outcome Important To/for: Visual and verbal presentation of options staff will present one, then another choice. How often or by when? Daily. Further review of ISP goals # 3A, # 8, # 9 and # 10 for Individual # 2 failed to evidence documentation of quantitative measurable indicators of performance.

On 05/25/17 at 8:50 a.m. an interview was conducted with ASM (administrative staff member) # 1, the program supervisor, ASM # 2, the assistant manager, ASM # 3, the assistant

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W 159	<p>Continued From page 17</p> <p>intellectual disabilities residential coordinator and OSM (other staff member) # 1, the QIDP (Qualified Intellectual Disabilities Professional). When asked to describe the purpose of the ISP (individual support plan), OSM # 1 stated, "Helps build skills toward independence. The goal needs a quantitative measure to determine progress." ASM # 1, ASM # 2, ASM # 3 and OSM # 1 were asked to review Individual # 2's current ISP goals # 3A, # 8, # 9 and # 10 dated 08/26/2016 through 08/25/2017. When asked if the ISP goals were developed in measurable terms to determine Individual # 2's progress, ASM # 3 and OSM # 1 stated, "No." When asked if it was the responsibility of the QIDP to ensure goals/outcomes were written in measurable terms, OSM # 1 stated, "Yes."</p> <p>On 05/24/17 at 4:50 p.m. ASM (administrative staff member) # 1, program supervisor, ASM # 2, assistant manager ASM # 3, assistant intellectual disabilities residential coordinator and OSM # 1, the QIDP (Qualified Intellectual Disabilities Professional) were made aware of the findings.</p> <p>No further information was provided prior to exit.</p> <p>References:</p> <p>(1) Refers to a group of disorders characterized by a limited mental capacity and difficulty with adaptive behaviors such as managing money, schedules and routines, or social interactions. Intellectual disability originates before the age of 18 and may result from physical causes, such as autism or cerebral palsy, or from nonphysical causes, such as lack of stimulation and adult responsiveness. This information was obtained from the website:</p>	W 159		

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W 159	<p>Continued From page 18</p> <p>https://report.nih.gov/nihfactsheets/ViewFactSheet.aspx?csid=100.</p> <p>(2) Makes your bones weak and more likely to break. This information was obtained from the website: https://www.nlm.nih.gov/medlineplus/osteoporosis.html.</p> <p>(3) An abnormal curving of the spine. Your spine is your backbone. It runs straight down your back. Everyone's spine naturally curves a bit. But people with scoliosis have a spine that curves too much. The spine might look like the letter C or S. This information was obtained from the website: https://medlineplus.gov/ency/article/001241.htm.</p> <p>(4) A common way to describe painful, lumpy breasts. This information was obtained from the website: https://medlineplus.gov/ency/article/000912.htm.</p> <p>(5) A group of diseases that can damage the eye's optic nerve. This information was obtained from the website: https://www.nlm.nih.gov/medlineplus/glaucoma.html.</p> <p>2b. The QIDP failed to ensure the data collection of the ISP outcomes/goals for Individual # 2 were in measurable terms.</p> <p>Review of Individual # 2's current ISP (Individual Support Plan) date 08/26/2016 through 08/25/2017 revealed: "Goal 3A. Outcome Important To/for: (Individual # 2) will have assistance with her participation in showers/bathing. How often or by when? Daily. Goal 8 Outcome Important To/for: (Individual # 2)</p>	W 159		

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will have opportunities to build relationships with family, friends and peers, at home and in the community. How often or by when? Daily. Goal 9. Outcome Important To/for: (Individual # 2) will maintain/increase her strength and flexibility. How often or by when? Daily. Goal 10. Outcome Important To/for: Visual and verbal presentation of options staff will present one, then another choice. How often or by when? Daily. Further review of ISP goals # 3A, # 8, # 9 and # 10 for Individual # 2 failed to evidence documentation of quantitative measurable indicators of performance.

The "Support Checklist" (data collection) for Individual # 2 dated 04/01/2017 through 05/20/2017 were reviewed. The "Support Checklist" failed to evidence documentation of the data collection of Individual # 2's ISP outcome/goal in measurable terms.

The "Comprehensive Progress Notes" for Individual # 2 dated 04/01/2017 through 05/20/2017 were reviewed. The "Comprehensive Progress Notes" failed to evidence documentation of the data collection of Individual # 2's ISP outcome/goal in measurable terms.

On 05/25/17 at 8:50 5 a.m. an interview was conducted with ASM (administrative staff member) # 1, the program supervisor, ASM # 2, the assistant manager, ASM # 3, the assistant intellectual disabilities residential coordinator and OSM (other staff member) # 1, the QIDP (Qualified Intellectual Disabilities Professional). ASM # 1, ASM # 2, ASM # 3 and OSM # 1 were asked to review Individual # 2's "Support Checklist" dated 04/01/2017 through 05/20/2017 and the "Comprehensive Progress Notes" dated

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04/01/2017 through 05/20/2017. When asked if the data collected for Individual # 2's ISP goals, were collected in measurable terms, to determine Individual # 2's progress, ASM # 3 and OSM # 1 stated, "No." When asked if it was the responsibility of the QIDP to ensure data collection was collected in measurable terms, OSM # 1 stated, "Yes."

On 05/24/17 at 4:50 p.m. ASM # 1, program supervisor, ASM # 2, assistant manager ASM # 3, assistant intellectual disabilities residential coordinator and OSM # 1, the QIDP were made aware of the findings.

No further information was provided prior to exit.

2c. The QIDP failed to coordinate and develop a relevant ISP (Individual Support Plan) from the CFA (Comprehensive Functional Assessment) tailored to meet Individual # 2's needs.

Review of the CFA dated September 2016 for Individual # 2 revealed a page entitled "Adaptive Behavior Assessment Keys." The "Adaptive Behavior Assessment Keys" documented, "0 (zero): Task Resistive - consumer does not cooperate or become combative; 1 (one): Dependent - staff completes 100% (percent) of the task; 2 (two): Maximum Assistance - staff completes 75% of the task. Hand-over-hand assistance is used to complete the process. Staff may initially guide the consumer then release hand-over-hand assistance; 3 (three): Moderate Assistance - staff completes 50% of the task. Partial hand-over-hand assistance is required. Staff may initially guide the consumer then release hand-over-hand; 4 (four): Minimal

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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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W 159 Continued From page 21

Assistance - staff completes 25% of the task. Intermittent hand-over-hand assistance is required. Staff provides hand-over-hand assistance as needed to complete the task; % (five): Touch Prompt - a quick touch is given to get the consumer to begin the task; 6 (six): Verbal direction - a verbal statement is given to the hearing consumer; 7 (seven): Manual Sign - a manual sign is given to a hearing impaired consumer, instead of or in addition to a verbal direction; 8 (eight): Verbal Cue - a cue or hint about completing the task; 9 (nine) Gestural Cue - a visual cue such as pointing; 10 Set-up, supervision, contact guard - the environment is set up to cause the consumer to complete the task independently or the consumer is supervised during the independent completion of the task for safety purposes; 11 Modified Independence - the consumer uses some type of adaptive equipment to complete a task without prompting or supervision; 12 Complete Independence - the consumer completes the task without prompts or cues, in a timely and safe manner. If the consumer were left alone, he/she would complete the task by his or her self; 13 N/A (non applicable) - Only to be used for gender or disability specific questions such as menstrual care, bra use, wheelchair use."

W 159

Further review of the CFA revealed that in the area of "Eating" Individual # 2 required maximum assistance to moderate assistance to complete an eating task, in the area of "Domestic Skills" Individual # 2 required maximum assistance to set-up/supervision/contact guard to complete a domestic skills task and in the area of "Leisure" Individual # 2 is able to walk for exercise with set-up/supervision/contact guard to complete the task.

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NAME OF PROVIDER OR SUPPLIER LUCAS STREET		STREET ADDRESS, CITY, STATE, ZIP CODE 5701 LUCAS STREET FREDERICKSBURG, VA 22407		
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W 159	Continued From page 22 Review of Individual # 2's ISP (Individual support Plan) dated 08/26/2016 through 08/25/2017 failed to evidence training outcomes for the areas of eating, domestic skills and leisure. On 05/24/17 at 2:00 p.m. an interview was conducted with OSM (other staff member) # 1 the QIDP regarding the process of developing the Individual Support Plan from the Comprehensive Functional Assessment. When asked to describe the process, OSM # 1 stated, "The team, which includes the supervisor, assistant manager, physical therapy, occupational therapy, speech therapy, the nutritionist, the psychologist and the day support staff, review the comprehensive functional assessment which includes the areas of self-care, eating, sensorimotor, life safety/health, domestic skills, leisure, social, pre-vocational cognitive and community living. Subcategories are selected from the major areas for the individual to work on and it is added in the ISP based on the scoring from two (2), maximum assistance to 10, set-up/supervision/contact guard." When asked if this was the process used to develop Individual # 2's current ISP dated 08/26/2016 through 08/25/2017, OSM # 1 stated, "No, it was not the approach that was taken at the time (Individual # 2's) ISP was developed." When asked who developed Individual # 2's ISP, OSM # 1 stated that it was the previous QIDP who was no longer with the facility. After reviewing Individual # 2's CFA dated September 2016 and the ISP dated 08/26/2016 through 08/25/2017, OSM # 1 was asked if Individual # 2's ISP was developed to address the triggered areas of eating, domestic skills and leisure from the CFA. OSM # 1 stated, "No." When asked if it was the responsibility of the QIDP to ensure active	W 159		

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W 159	Continued From page 23 treatment programs were implemented OSM # 1 stated, "Yes." On 05/24/17 at 4:50 p.m. ASM (administrative staff member) # 1, program supervisor, ASM # 2, assistant manager ASM # 3, assistant intellectual disabilities residential coordinator and OSM (other staff member) # 1, the QIDP (Qualified Intellectual Disabilities Professional) were made aware of the findings. No further information was provided prior to exit.	W 159		
W 227	483.440(c)(4) INDIVIDUAL PROGRAM PLAN 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 staff interviews and residential record reviews it was determined that the facility staff failed to develop the Individual Support Plan (ISP) from the Comprehensive Functional Assessment (CFA) for two of two individuals in the survey sample, Individuals # 1 and # 2. 1. The facility staff failed to develop skill building outcomes in the areas of Dressing, Eating, Life Safety/Health and Domestic Skills from the CFA (Comprehensive Functional Assessment) for Individual # 1. 2. The facility staff failed to develop skill building outcomes in the areas of Eating, Domestic Skills and Leisure from the CFA (Comprehensive	W 227	<u>W227</u> <u>1.</u> <u>How corrective action will be accomplished for individual #1:</u> The QIDP will coordinate and revise the support plan for individual #1 to develop active treatment programs in the areas of dressing, eating, life safety/health, and domestic skills in accordance with the information gathered in the Comprehensive Functional Assessment. <u>Assurance that other residents are protected from the possibility of the deficiency:</u> The QIDP will coordinate and revise the support plans for all individuals to develop active treatment programs in accordance with the information gathered in the Comprehensive Functional Assessment.	6/30/17

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W 227	<p>Continued From page 24 Functional Assessment) for Individual # 2.</p> <p>The findings include:</p> <p>1. The facility staff failed to develop skill building outcomes in the areas of Dressing, Eating, Life Safety/Health and Domestic Skills from the CFA for Individual # 1.</p> <p>Individual # 1 was a 53 year old female, who was admitted to (Name of Group Home) on 09/08/14. Diagnoses in the clinical record included but were not limited to: mild intellectual disability (1), glioblastoma multiform (2), seizures (3), hallucinations (4),) gastroesophageal reflux disease (5), adrenal insufficiency (6) and obstructive sleep apnea (7).</p> <p>Review of the CFA dated September 2016 for Individual # 1 revealed a page entitled "Adaptive Behavior Assessment Keys." The "Adaptive Behavior Assessment Keys" documented, "0 (zero): Task Resistive - consumer does not cooperate or become combative; 1 (one): Dependent - staff completes 100% (percent) of the task; 2 (two): Maximum Assistance - staff completes 75% of the task. Hand-over-hand assistance is used to complete the process. Staff may initially guide the consumer then release hand-over-hand assistance; 3 (three): Moderate Assistance - staff completes 50% of the task. Partial hand-over-hand assistance is required. Staff may initially guide the consumer then release hand-over-hand; 4 (four): Minimal Assistance - staff completes 25% of the task. Intermittent hand-over-hand assistance is required. Staff provides hand-over-hand assistance as needed to complete the task; % (five): Touch Prompt - a quick touch is given to</p>	W 227	<p><u>Measures to be put into place or systemic changes to be made to ensure that the deficient practice will not recur:</u> The QIDP will extract information from the Comprehensive Functional Assessments to develop active treatment outcomes for each individual at a minimum of annually for their ISP or as changes or revisions are needed based on individualized needs.</p> <p><u>How the facility plans to monitor its performance to make sure that solutions are sustained:</u> The annual ISP for each client will be reviewed by the ICF supervisor prior to submission deadlines to ensure that active treatment programs in accordance with the Comprehensive Functional Assessment for each resident are documented in the ISP.</p> <p><u>Date of Completion:</u> 6/30/17</p> <p><u>W227</u> 6/30/17 <u>2.</u> <u>How corrective action will be accomplished for individual #2:</u> The QIDP will coordinate and revise the support plan for for individual #2 to develop active treatment</p>

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W 227	<p>Continued From page 25</p> <p>get the consumer to begin the task; 6 (six): Verbal direction - a verbal statement is given to the hearing consumer; 7 (seven): Manual Sign - a manual sign is given to a hearing impaired consumer, instead of or in addition to a verbal direction; 8 (eight): Verbal Cue - a cue or hint about completing the task; 9 (nine) Gestural Cue - a visual cue such as pointing; 10 Set-up, supervision, contact guard - the environment is set up to cause the consumer to complete the task independently or the consumer is supervised during the independent completion of the task for safety purposes; 11 Modified Independence - the consumer uses some type of adaptive equipment to complete a task without prompting or supervision; 12 Complete Independence - the consumer completes the task without prompts or cues, in a timely and safe manner. If the consumer were left alone, he/she would complete the task by his or her self; 13 N/A (non applicable) - Only to be used for gender or disability specific questions such as menstrual care, bra use, wheelchair use."</p> <p>Further review of the CFA revealed that in the area of "Dressing" Individual # 1 required maximum assistance to verbal cues to complete a dressing task, in the area of "Eating" Individual # 1 required maximum assistance to verbal cues to complete an eating task, in the area of Life Safety and Health Individual # 1 required maximum to minimum assistance to complete a life safety and health task and in the area of "Domestic Skills" Individual # 1 required maximum assistance to set-up/supervision/contact guard to complete a domestic skills task.</p> <p>Review of Individual # 1's ISP (Individual support</p>	W 227	<p>programs in the areas of eating, domestic skills, and leisure in accordance with the information gathered in the Comprehensive Functional Assessment.</p> <p><u>Assurance that other residents are protected from the possibility of the deficiency:</u> The QIDP will coordinate and revise the support plans for all individuals to develop active treatment programs in accordance with the information gathered in the Comprehensive Functional Assessment.</p> <p><u>Measures to be put into place or systemic changes to be made to ensure that the deficient practice will not recur:</u> The QIDP will extract information from the Comprehensive Functional Assessments to develop active treatment outcomes for each individual at a minimum of annually for their ISP or as changes or revisions are needed based on individualized needs.</p> <p><u>How the facility plans to monitor its performance to make sure that solutions are sustained:</u> The annual ISP for each client will be reviewed by the ICF supervisor prior to submission deadlines to ensure that active treatment programs in</p>	

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W 227	Continued From page 26 Plan) dated 10/08/2016 through 10/07/2017 failed to evidence training outcomes for the areas of dressing, eating, life safety/health and domestic skills. On 05/24/17 at 2:00 p.m. an interview was conducted with OSM (other staff member) # 1 the QIDP (Qualified Intellectual Disabilities Professional) regarding the process of developing the Individual Support Plan from the Comprehensive Functional Assessment. When asked to describe the process, OSM # 1 stated, "The team, which includes the supervisor, assistant manager, physical therapy, occupational therapy, speech therapy, the nutritionist, the psychologist and the day support staff, review the comprehensive functional assessment which includes the areas of self-care, eating, sensorimotor, life safety/health, domestic skills, leisure, social, pre-vocational cognitive and community living. Subcategories are selected from the major areas for the individual to work on and it is added in the ISP based on the scoring from two (2), maximum assistance to 10, set-up/supervision/contact guard." OSM # 1 was asked if this was the process used to develop Individual # 1's current ISP dated 10/08/2016 through 10/07/2017. OSM # 1 stated, "No, it was not the approach that was taken at the time (Individual # 1's) ISP was developed." When asked who developed Individual # 1's ISP, OSM # 1 stated that it was the previous QIDP who was no longer with the facility. After reviewing Individual # 1's CFA dated September 2016 and the ISP dated 10/08/2016 through 10/07/2017, OSM # 1 was asked if Individual # 1's ISP was developed to address the triggered areas of dressing, eating, life safety/health and domestic skills from the CFA. OSM # 1 stated, "No."	W 227	accordance with the Comprehensive Functional Assessment for each resident are documented in the ISP. <u>Date of Completion:</u> 6/30/17	

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W 227	Continued From page 27 The facility's policy "ICF (Intermediate Care Facility) Services: Active Treatment Section 5-8: Person Centered Plan" documented in part, "Procedures: 6b. A description of the functional level of the individual provided by and through the Comprehensive Functional Assessment (CFA) completed by assessments, evaluations, and observations by the PST (Personal Support Team). The CFA must be completed to develop the CFA. c. Objectives will be specific and necessary to meet the recipient's needs as identified by the CFA (needs observed to most likely impact the individual's ability to function in daily life) ..." On 05/24/17 at 4:50 p.m. ASM (administrative staff member) # 1, program supervisor, ASM # 2, assistant manager ASM # 3, assistant intellectual disabilities residential coordinator and OSM (other staff member) # 1, the QIDP (Qualified Intellectual Disabilities Professional) were made aware of the findings. No further information was provided prior to exit. References: (1) Refers to a group of disorders characterized by a limited mental capacity and difficulty with adaptive behaviors such as managing money, schedules and routines, or social interactions. Intellectual disability originates before the age of 18 and may result from physical causes, such as autism or cerebral palsy, or from nonphysical causes, such as lack of stimulation and adult responsiveness. This information was obtained from the website: https://report.nih.gov/nihfactsheets/ViewFactShee	W 227		

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W 227	Continued From page 28 t.aspx?csid=100. (2) A brain tumor is a growth of abnormal cells in the tissues of the brain. Brain tumors can be benign, with no cancer cells, or malignant, with cancer cells that grow quickly. Some are primary brain tumors, which start in the brain. Others are metastatic, and they start somewhere else in the body and move to the brain. This information was obtained from the website: https://medlineplus.gov/braintumors.html . (3) Symptoms of a brain problem. They happen because of sudden, abnormal electrical activity in the brain. This information was obtained from the website: https://www.nlm.nih.gov/medlineplus/seizures.html . (4) Involve sensing things such as visions, sounds, or smells that seem real but are not. These things are created by the mind. This information was obtained from the website: https://medlineplus.gov/ency/article/003258.htm . (5) Stomach contents to leak back, or reflux, into the esophagus and irritate it. This information was obtained from the website: https://www.nlm.nih.gov/medlineplus/gerd.html . (6) (Addison Disease) Your adrenal glands are just above your kidneys. The outside layer of these glands makes hormones that help your body respond to stress and regulate your blood pressure and water and salt balance. Addison disease happens if the adrenal glands don't make enough of these hormones. A problem with your immune system usually causes Addison disease. The immune system mistakenly attacks your own	W 227		

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W 227	<p>Continued From page 29</p> <p>tissues, damaging your adrenal glands. Other causes include infections and cancer. This information was obtained from the website: https://medlineplus.gov/addisonisease.html.</p> <p>(7) Obstructive sleep apnea (OSA) is a problem in which your breathing pauses during sleep. This occurs because of narrowed or blocked airways. This information was obtained from the website: https://medlineplus.gov/ency/article/000811.htm.</p> <p>2. The facility staff failed to develop skill building outcomes in the areas of Eating, Domestic Skills and Leisure from the CFA (Comprehensive Functional Assessment) for Individual # 2.</p> <p>Individual # 2 was a 74 year old female, who was admitted to (Name of Group Home) on 07/28/14. Diagnoses in the clinical record included but were not limited to: profound intellectual disability (1), osteoporosis (2), scoliosis (3), fibrocystic breast (4) and glaucoma (5).</p> <p>Review of the CFA dated September 2016 for Individual # 2 revealed a page entitled "Adaptive Behavior Assessment Keys." The "Adaptive Behavior Assessment Keys" documented, "0 (zero): Task Resistive - consumer does not cooperate or become combative; 1 (one): Dependent - staff completes 100% (percent) of the task; 2 (two): Maximum Assistance - staff completes 75% of the task. Hand-over-hand assistance is used to complete the process. Staff may initially guide the consumer then release hand-over-hand assistance; 3 (three): Moderate Assistance - staff completes 50% of the task. Partial hand-over-hand assistance is required. Staff may initially guide the consumer then release hand-over-hand; 4 (four): Minimal</p>	W 227		

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W 227	Continued From page 30 Assistance - staff completes 25% of the task. Intermittent hand-over-hand assistance is required. Staff provides hand-over-hand assistance as needed to complete the task; % (five); Touch Prompt - a quick touch is given to get the consumer to begin the task; 6 (six): Verbal direction - a verbal statement is given to the hearing consumer; 7 (seven): Manual Sign - a manual sign is given to a hearing impaired consumer, instead of or in addition to a verbal direction; 8 (eight): Verbal Cue - a cue or hint about completing the task; 9 (nine) Gestural Cue - a visual cue such as pointing; 10 Set-up, supervision, contact guard - the environment is set up to cause the consumer to complete the task independently or the consumer is supervised during the independent completion of the task for safety purposes; 11 Modified Independence - the consumer uses some type of adaptive equipment to complete a task without prompting or supervision; 12 Complete Independence - the consumer completes the task without prompts or cues, in a timely and safe manner. If the consumer were left alone, he/she would complete the task by his or her self; 13 N/A (non applicable) - Only to be used for gender or disability specific questions such as menstrual care, bra use, wheelchair use." Further review of the CFA revealed that in the area of "Eating" Individual # 2 required maximum assistance to moderate assistance to complete an eating task, in the area of "Domestic Skills" Individual # 2 required maximum assistance to set-up/supervision/contact guard to complete a domestic skills task and in the area of "Leisure" Individual # 2 is able to walk for exercise with set-up/supervision/contact guard to complete the task.	W 227		

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W 227	Continued From page 31 Review of Individual # 2's ISP (Individual support Plan) dated 08/26/2016 through 08/25/2017 failed to evidence training outcomes for the areas of eating, domestic skills and leisure. On 05/24/17 at 2:00 p.m. an interview was conducted with OSM (other staff member) # 1 the QIDP (Qualified Intellectual Disabilities Professional) regarding the process of developing the Individual Support Plan from the Comprehensive Functional Assessment. When asked to describe the process, OSM # 1 stated, "The team, which includes the supervisor, assistant manager, physical therapy, occupational therapy, speech therapy, the nutritionist, the psychologist and the day support staff, review the comprehensive functional assessment which includes the areas of self-care, eating, sensorimotor, life safety/health, domestic skills, leisure, social, pre-vocational cognitive and community living. Subcategories are selected from the major areas for the individual to work on and it is added in the ISP based on the scoring from two (2), maximum assistance to 10, set-up/supervision/contact guard." OSM # 1 was asked if this was the process used to develop Individual # 2's current ISP dated 08/26/2016 through 08/25/2017. OSM # 1 stated, "No, it was not the approach that was taken at the time (Individual # 2's) ISP was developed." When asked who developed Individual # 2's ISP, OSM # 1 stated that it was the previous QIDP who was no longer with the facility. After reviewing Individual # 2's CFA dated September 2016 and the ISP dated 08/26/2016 through 08/25/2017, OSM # 1 was asked if Individual # 2's ISP was developed to address the triggered areas of eating, domestic skills and leisure from the CFA.	W 227		

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W 227	<p>Continued From page 32</p> <p>OSM # 1 stated, "No."</p> <p>On 05/24/17 at 4:50 p.m. ASM (administrative staff member) # 1, program supervisor, ASM # 2, assistant manager ASM # 3, assistant intellectual disabilities residential coordinator and OSM (other staff member) # 1, the QIDP (Qualified Intellectual Disabilities Professional) were made aware of the findings.</p> <p>No further information was provided prior to exit.</p> <p>References:</p> <p>(1) Refers to a group of disorders characterized by a limited mental capacity and difficulty with adaptive behaviors such as managing money, schedules and routines, or social interactions. Intellectual disability originates before the age of 18 and may result from physical causes, such as autism or cerebral palsy, or from nonphysical causes, such as lack of stimulation and adult responsiveness. This information was obtained from the website: https://report.nih.gov/nihfactsheets/ViewFactSheet.aspx?csid=100.</p> <p>(2) Makes your bones weak and more likely to break. This information was obtained from the website: https://www.nlm.nih.gov/medlineplus/osteoporosis.html.</p> <p>(3) An abnormal curving of the spine. Your spine is your backbone. It runs straight down your back. Everyone's spine naturally curves a bit. But people with scoliosis have a spine that curves too much. The spine might look like the letter C or S. This information was obtained from the website:</p>	W 227		

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W 227	Continued From page 33 https://medlineplus.gov/ency/article/001241.htm (4) A common way to describe painful, lumpy breasts. This information was obtained from the website: https://medlineplus.gov/ency/article/000912.htm (5) A group of diseases that can damage the eye's optic nerve. This information was obtained from the website: https://www.nlm.nih.gov/medlineplus/glaucoma.html	W 227		
W 231	483.440(c)(4)(iii) INDIVIDUAL PROGRAM PLAN The objectives of the individual program plan must be expressed in behavioral terms that provide measurable indices of performance. This STANDARD is not met as evidenced by: Based on staff interview, residential record review and facility document review it was determined that the facility staff failed to develop individual program plan objectives in measurable terms for two of two individuals in the survey sample, Individual # 1 and # 2. 1. The facility staff failed to define the following ISP (individual service plan) outcomes/goals in measurable terms for Individual # 1: Goals: # 1 Choosing Activities; # 2 Event Planning; # 3 Building Strength; # 4 Choosing a place to take a vacation; # 5 Counting money and # 6 Knitting. 2. The facility staff failed to define the following outcomes/goals in measurable terms on the ISP (Individual Service Plan) for Individual # 2 Goals: # 3A Hygiene/Personal Care; # 8 Relationships, #	W 231	W231 1. <u>How corrective action will be accomplished for individual #1:</u> The QIDP will revise the support plan for individual #1 to define the outcomes/goals in measurable terms in the areas of #1 Choosing Activities, #2 Event Planning, #3 Building Strength, #4 Choosing a place to take a vacation, #5 Counting money, and #6 Knitting. <u>Assurance that other residents are protected from the possibility of the deficiency:</u> The QIDP will review and revise support plans for each resident to ensure that the objectives of the individual program plans are expressed in behavioral terms that provide measurable indices of performance.	6/30/17

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W 231	<p>Continued From page 34 9 Strength/Flexibility and # 10 Choices.</p> <p>The findings include:</p> <p>1. Individual # 1 was a 53 year old female, who was admitted to (Name of Group Home) on 09/08/14. Diagnoses in the clinical record included but were not limited to: mild intellectual disability (1), glioblastoma multiforme (2), seizures (3), hallucinations (4), gastroesophageal reflux disease (5), adrenal insufficiency (6) and obstructive sleep apnea (7).</p> <p>Review of Individual # 1's current ISP (Individual Support Plan) dated 10/08/2016 through 10/07/2017 revealed: "Goal 1. Outcome Important To/for: (Individual # 1) makes choices concerning her daily routine and activities. How often or by when? Daily. Goal 2. Outcome Important To/for: (Individual # 1) chooses an event or group activity once per month at day support. How often or by when? Monthly. Goal 3. Outcome Important To/for: (Individual # 1) would like to build her strength in order to walk again one day. How often or by when? Daily. Goal 4. Outcome Important To/for: (Individual # 1) would like to go on a vacation to place of her choosing. How often or by when? Annually. Goal 5. Outcome Important To/for: (Individual # 1) learns to count money. How often or by when? Monthly. Goal 6. Outcome Important To/for: (Individual # 1) will learn to knit using a loom. How often or by when? Weekly." Further review of ISP goals # 1, # 2, # 3, # 4, #5 and # 6 for Individual # 1 failed to evidence documentation of quantitative measurable indicators of performance.</p> <p>On 05/25/17 at 8:50 a.m. an interview was</p>	W 231	<p><u>Measures to be put into place or systemic changes to be made to ensure that the deficient practice will not recur:</u> The QIDP will review all annual documentation for each resident at the annual support plan as it is completed to ensure that the objectives of the individual program plan are expressed in behavioral terms that provide measurable indices of performance.</p> <p><u>How the facility plans to monitor its performance to make sure that solutions are sustained:</u> The annual ISP for each client will be reviewed by the ICF supervisor prior to submission deadlines to ensure that the objectives of the individual program plan are expressed in behavioral terms that provide measurable indices of performance.</p> <p><u>Date of Completion:</u> 6/30/17</p> <p><u>W231</u></p> <p><u>2.</u></p> <p><u>How corrective action will be accomplished for individual #2:</u> The QIDP will revise the support plan for individual #2 to define the outcomes/goals in measurable terms in the areas of #3A Hygiene/Personal Care, #8 Relationships, #9 Strength/Flexibility, and #10 Choices.</p>	6/30/17

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W 231	<p>Continued From page 35</p> <p>conducted with ASM (administrative staff member) # 1, the program supervisor, ASM # 2, the assistant manager, ASM # 3, the assistant intellectual disabilities residential coordinator and OSM (other staff member) # 1, the QIDP (Qualified Intellectual Disabilities Professional). When asked to describe the purpose of the ISP (individual support plan), OSM # 1 stated, "Helps build skills toward independence. The goal needs a quantitative measure to determine progress." ASM # 1, ASM # 2, ASM # 3 and OSM # 1 were asked to review Individual # 1's current ISP goals # 1 through # 6, dated 10/08/2016 through 10/07/2017. When asked if the ISP goals # 1 through # 6 were developed in measurable terms to determine Individual # 1's progress, ASM # 3 and OSM # 1 stated, "No."</p> <p>The facility's policy "5-10 Goals and Objectives." documented, "3. All objectives will be measurable and be stated in a manner with specific criteria for determining achievement or progress made towards completion. The objectives will allow staff working with and supporting the individual to consistently identify 'target' behavior and clearly identify when it is being displayed." Under "5-8 Person Centered Plan" it documented, "6c. Objectives will be specific and necessary to meet the recipient's needs as identified by the CFA [comprehensive functional assessment] (needs observed to most likely impact the individual's ability to function in daily life) and include: iv. Objectives expressed in behavioral terms that provide measurable indices of performance (the objective can be measured accurately in quantifiable data each time the treatment, procedure, intervention or interaction occurs."</p>	W 231	<p><u>Assurance that other residents are protected from the possibility of the deficiency:</u> The QIDP will review and revise support plans for each resident to ensure that the objectives of the individual program plans are expressed in behavioral terms that provide measurable indices of performance.</p> <p><u>Measures to be put into place or systemic changes to be made to ensure that the deficient practice will not recur:</u> The QIDP will review all annual documentation for each resident at the annual support plan as it is completed to ensure that the objectives of the individual program plan are expressed in behavioral terms that provide measurable indices of performance.</p> <p><u>How the facility plans to monitor its performance to make sure that solutions are sustained:</u> The annual ISP for each client will be reviewed by the ICF supervisor prior to submission deadlines to ensure that the objectives of the individual program plan are expressed in behavioral terms that provide measurable indices of performance.</p> <p><u>Date of Completion:</u> 6/30/17</p>

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W 231	<p>Continued From page 36</p> <p>On 05/24/17 at 4:50 p.m. ASM # 1, program supervisor, ASM # 2, assistant manager ASM # 3, assistant intellectual disabilities residential coordinator and OSM (other staff member) # 1, the QIDP were made aware of the findings.</p> <p>No further information was provided prior to exit.</p> <p>References:</p> <p>(1) Refers to a group of disorders characterized by a limited mental capacity and difficulty with adaptive behaviors such as managing money, schedules and routines, or social interactions. Intellectual disability originates before the age of 18 and may result from physical causes, such as autism or cerebral palsy, or from nonphysical causes, such as lack of stimulation and adult responsiveness. This information was obtained from the website: https://report.nih.gov/nihfactsheets/ViewFactSheet.aspx?csid=100.</p> <p>(2) A brain tumor is a growth of abnormal cells in the tissues of the brain. Brain tumors can be benign, with no cancer cells, or malignant, with cancer cells that grow quickly. Some are primary brain tumors, which start in the brain. Others are metastatic, and they start somewhere else in the body and move to the brain. This information was obtained from the website: https://medlineplus.gov/braintumors.html.</p> <p>(3) Symptoms of a brain problem. They happen because of sudden, abnormal electrical activity in the brain. This information was obtained from the website: https://www.nlm.nih.gov/medlineplus/seizures.html.</p>	W 231	

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W 231	Continued From page 37 (4) Involve sensing things such as visions, sounds, or smells that seem real but are not. These things are created by the mind. This information was obtained from the website: https://medlineplus.gov/ency/article/003258.htm . (5) Stomach contents to leak back, or reflux, into the esophagus and irritate it. This information was obtained from the website: https://www.nlm.nih.gov/medlineplus/gerd.html . (6) (Addison Disease) Your adrenal glands are just above your kidneys. The outside layer of these glands makes hormones that help your body respond to stress and regulate your blood pressure and water and salt balance. Addison disease happens if the adrenal glands don't make enough of these hormones. A problem with your immune system usually causes Addison disease. The immune system mistakenly attacks your own tissues, damaging your adrenal glands. Other causes include infections and cancer. This information was obtained from the website: https://medlineplus.gov/addisondisease.html . (7) Obstructive sleep apnea (OSA) is a problem in which your breathing pauses during sleep. This occurs because of narrowed or blocked airways. This information was obtained from the website: https://medlineplus.gov/ency/article/000811.htm . 2. The facility staff failed to define the following outcomes/goals in measurable terms on the ISP (Individual Service Plan) for Individual # 2 Goals: # 3A Hygiene/Personal Care; # 8 Relationships, # 9 Strength/Flexibility and # 10 Choices.	W 231		

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W 231 Continued From page 38

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Individual # 2 was a 74 year old female, who was admitted to (Name of Group Home) on 07/28/14. Diagnoses in the clinical record included but were not limited to: profound intellectual disability (1), osteoporosis (2), scoliosis (3), fibrocystic breast (4) and glaucoma (5).

Review of Individual # 2's current ISP (Individual Support Plan) dated 08/26/2016 through 08/25/2017 revealed: "Goal 3A. Outcome Important To/for: (Individual # 2) will have assistance with her participation in showers/bathing. How often or by when? Daily. Goal 8 Outcome Important To/for: (Individual # 2) will have opportunities to build relationships with family, friends and peers, at home and in the community. How often or by when? Daily. Goal 9. Outcome Important To/for: (Individual # 2) will maintain/increase her strength and flexibility. How often or by when? Daily. Goal 10. Outcome Important To/for: Visual and verbal presentation of options staff will present one, then another choice. How often or by when? Daily. Further review of ISP goals # 3A, # 8, # 9 and # 10 for Individual # 2 failed to evidence documentation of quantitative measurable indicators of performance.

On 05/25/17 at 8:50 a.m. an interview was conducted with ASM # 1, the program supervisor, ASM # 2, the assistant manager, ASM # 3, the assistant intellectual disabilities residential coordinator and OSM (other staff member) # 1, the QIDP. When asked to describe the purpose of the ISP (individual support plan), OSM # 1 stated, "Helps build skills toward independence. The goal needs a quantitative measure to determine progress." ASM # 1, ASM

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W 231 Continued From page 39
2, ASM # 3 and OSM # 1 were asked to review Individual # 2's current ISP goals dated 08/26/2016 through 08/25/2017. When asked if the ISP goals # 3A, # 8, # 9 and # 10 were developed in measurable terms to determine Individual # 2's progress ASM # 3 and OSM # 1 stated, "No."

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On 05/24/17 at 4:50 p.m. ASM # 1, program supervisor, ASM # 2, assistant manager ASM # 3, assistant intellectual disabilities residential coordinator and OSM (other staff member) # 1, the QIDP, were made aware of the findings.

No further information was provided prior to exit.

References:

(1) Refers to a group of disorders characterized by a limited mental capacity and difficulty with adaptive behaviors such as managing money, schedules and routines, or social interactions. Intellectual disability originates before the age of 18 and may result from physical causes, such as autism or cerebral palsy, or from nonphysical causes, such as lack of stimulation and adult responsiveness. This information was obtained from the website:
<https://report.nih.gov/nihfactsheets/ViewFactSheet.aspx?csid=100>.

(2) Makes your bones weak and more likely to break. This information was obtained from the website:
<https://www.nlm.nih.gov/medlineplus/osteoporosis.html>.

(3) An abnormal curving of the spine. Your spine is your backbone. It runs straight down your back.

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W 231	Continued From page 40 Everyone's spine naturally curves a bit. But people with scoliosis have a spine that curves too much. The spine might look like the letter C or S. This information was obtained from the website: https://medlineplus.gov/ency/article/001241.htm . (4) A common way to describe painful, lumpy breasts. This information was obtained from the website: https://medlineplus.gov/ency/article/000912.htm . (5) A group of diseases that can damage the eye's optic nerve. This information was obtained from the website: https://www.nlm.nih.gov/medlineplus/glaucoma.html .	W 231		
W 249	483.440(d)(1) PROGRAM IMPLEMENTATION 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 staff interview, facility document review, and residential record review, it was determined that the facility staff failed to implement active treatment according to the ISP (individual support plan) for one of two individuals in the survey sample, Individual # 1. The facility staff failed to implement the Individual	W 249	W249 <u>How corrective action will be accomplished for individual #1:</u> Facility staff have implemented the active treatment program for knitting for individual #1. <u>Assurance that other residents are protected from the possibility of the deficiency:</u> Facility staff will implement active treatment program for all ISP outcomes for each resident as written in their current support plans. <u>Measures to be put into place or systemic changes to be made to ensure that the deficient practice will not recur:</u>	6/8/17

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W 249	<p>Continued From page 41</p> <p># 1's active treatment program for knitting.</p> <p>The findings include:</p> <p>Individual # 1 was a 53 year old female, who was admitted to (Name of Group Home) on 09/08/14. Diagnoses in the clinical record included but were not limited to: mild intellectual disability (1), glioblastoma multiforme (2), seizures (3), hallucinations (4), gastroesophageal reflux disease (5), adrenal insufficiency (6) and obstructive sleep apnea (7).</p> <p>Review of Individual # 1's current ISP (Individual Support Plan) dated 10/08/2016 through 10/07/2017 revealed: "Goal 6. Outcome Important To/for: (Individual # 1) will learn to knit using a loom. Describe how this will be provided based on individual preferences. (support instructions) and location where program strategy can be found: (Individual # 1) wants to learn to knit. (Individual # 1) is not able to engage in finger manipulation on her left hand, therefore using a loom to knit is necessary. Remind (Individual # 1) to gather all of her knitting supplies such as the yarn, loom, etc. Encourage (Individual # 1) to her left hand on the loom to brace it down on the table if possible. If this is harder for her on a particular day, hold the loom down for her or brace it on the table. This way, (Individual # 1) can use her right hand to manipulate the yarn. Read (Individual # 1) the instructions the first time and use hand over hand support if necessary step by step until she feels comfortable with the process. How often or by when? Weekly."</p> <p>The "Support Checklist" (data collection) for Individual # 1 dated 04/01/2017 through</p>	W 249	<p>QIDP will monitor and document effectiveness of active treatment programs monthly and quarterly to ensure outcomes are implemented.</p> <p><u>How the facility plans to monitor its performance to make sure that solutions are sustained:</u></p> <p>The ICF supervisor and QIDP will ensure that facility staff are implementing active treatment programs through conducting observations.</p> <p><u>Date of Completion:</u> 6/8/17</p>	

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W 249	<p>Continued From page 42</p> <p>05/20/2017 was reviewed. The "Support Checklist" failed to evidence documentation of Individual # 1's knitting program being implemented during the week of 04/02/17 to 04/08/17. Further review of the "Support Checklist" revealed dashes for each day from 04/02/17 through 04/08/17.</p> <p>The "Comprehensive Progress Notes" for Individual # 1 dated 04/02/17 through 04/08/17 were reviewed. The "Comprehensive Progress Notes" failed to evidence documentation of Individual # 1's knitting program being implemented during the week of 04/02/17 through 04/08/17.</p> <p>On 05/25/17 at 8:50 a.m. an interview was conducted with ASM (administrative staff member) # 1, the program supervisor, ASM # 2, the assistant manager, ASM # 3, the assistant intellectual disabilities residential coordinator and OSM (other staff member) # 1, the QIDP (Qualified Intellectual Disabilities Professional). ASM # 1, ASM# 2, ASM# 3 and OSM # 1 were asked to explain the dashes on the "Support Checklist." OSM # 1 stated, "A dash means the program wasn't run or implemented." When asked who was responsible for checking and ensuring the active treatment programs were being implemented according to an Individual's ISP, ASM # 1 stated that the assistant manager and the QIDP were responsible for checking the data collected and active treatments were implemented. ASM # 1 also stated that the data collection was checked multiple times a week. ASM # 1, ASM # 2 and OSM # 1 were asked to review Individual # 1's "Support Checklist" dated 04/02/2017 through 04/08/2017 and the "Comprehensive Progress Notes" dated</p>	W 249		

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W 249	<p>Continued From page 43</p> <p>04/02/2017 through 04/08/2017. When asked if Individual # 1's knitting program was implemented during the week of 04/02/2017 through 04/08/2017, OSM # 1 stated, "No."</p> <p>The facility's policy "5-3 Active Treatment" documented, "Procedures. 4. Residents will receive Active Treatment as written in their Individualized Program Plan and in correlation with those services which (Name of Community Service Board) is billing for. 8. The implementation of services will be purposeful (mirroring normal living experiences such as leisure and social activities), ongoing, consistent and targeted at training, treatment and health services. Staff will encourage the Individual to acquire, develop, and express functional skills and adaptive behaviors necessary to function with as much self-determination as possible, as well as preventing the loss of such functional skills and independence."</p> <p>On 05/24/17 at 4:50 p.m. ASM # 1, program supervisor, ASM # 2, assistant manager ASM # 3, assistant intellectual disabilities residential coordinator and OSM (other staff member) # 1, the QIDP were made aware of the findings.</p> <p>No further information was provided prior to exit.</p> <p>References:</p> <p>(1) Refers to a group of disorders characterized by a limited mental capacity and difficulty with adaptive behaviors such as managing money, schedules and routines, or social interactions. Intellectual disability originates before the age of 18 and may result from physical causes, such as autism or cerebral palsy, or from nonphysical</p>	W 249		

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W 249	Continued From page 45 disease happens if the adrenal glands don't make enough of these hormones. A problem with your immune system usually causes Addison disease. The immune system mistakenly attacks your own tissues, damaging your adrenal glands. Other causes include infections and cancer. This information was obtained from the website: https://medlineplus.gov/addisonisease.html . (7) Obstructive sleep apnea (OSA) is a problem in which your breathing pauses during sleep. This occurs because of narrowed or blocked airways. This information was obtained from the website: https://medlineplus.gov/ency/article/000811.htm .	W 249		
W 252	483.440(e)(1) PROGRAM DOCUMENTATION 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 staff interview, residential record review and facility document review it was determined that the facility staff failed collect data of objectives in measurable terms for two of two individuals in the survey sample, Individual # 1 and # 2. 1. The facility staff failed to document the data collection of Individual # 1's ISP (Individual Support Plan) outcomes/goals in measurable terms. 2. The facility staff failed to document the data collection of Individual # 2's ISP (Individual	W 252	<u>W252</u> <u>1.</u> <u>How corrective action will be accomplished for individual #1:</u> Facility staff will document on revised data collection sheet for individual #1 to ensure that goal data is collected and documented in measurable terms. <u>Assurance that other residents are protected from the possibility of the deficiency:</u> Facility staff will document on data collection sheet for each resident to ensure that goal data is collected and documented in measurable terms. <u>Measures to be put into place or systemic changes to be made to ensure that the deficient practice will not recur:</u>	6/30/17

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W 252	<p>Continued From page 46 Support Plan) outcomes/goals in measurable terms.</p> <p>The findings include:</p> <p>1. Individual # 1 was a 53 year old female, who was admitted to (Name of Group Home) on 09/08/14. Diagnoses in the clinical record included but were not limited to: mild intellectual disability (1), glioblastoma multiforme (2), seizures (3), hallucinations (4), gastroesophageal reflux disease (5), adrenal insufficiency (6) and obstructive sleep apnea (7).</p> <p>Review of Individual # 1's current ISP (Individual Support Plan) dated 10/08/2016 through 10/07/2017 revealed: "Goal 1. Outcome Important To/for: (Individual # 1) makes choices concerning her daily routine and activities. How often or by when? Daily. Goal 2. Outcome Important To/for: (Individual # 1) chooses an event or group activity once per month at day support. How often or by when? Monthly. Goal 3. Outcome Important To/for: (Individual # 1) would like to build her strength in order to walk again one day. How often or by when? Daily. Goal 4. Outcome Important To/for: (Individual # 1) would like to go on a vacation to place of her choosing. How often or by when? Annually. Goal 5. Outcome Important To/for: (Individual # 1) learns to count money. How often or by when? Monthly. Goal 6. Outcome Important To/for: (Individual # 1) will learn to knit using a loom. How often or by when? Weekly." Further review of ISP goals # 1, # 2, # 3, # 4, #5 and # 6 for Individual # 1 failed to evidence documentation of quantitative measurable indicators of performance.</p>	W 252	<p>The QIDP will monitor and review data collection sheets monthly and quarterly to ensure outcomes are being documented in measurable terms.</p> <p><u>How the facility plans to monitor its performance to make sure that solutions are sustained:</u> The data collection sheets for each client will be reviewed by the ICF supervisor prior to initiation to ensure that goal data can be collected and documented in measurable terms.</p> <p><u>Date of Completion:</u> 6/30/17</p> <p><u>W252</u> 6/30/17</p> <p><u>2.</u> <u>How corrective action will be accomplished for individual #2:</u> Facility staff will document on revised data collection sheet for individual #2 to ensure that goal data is collected and documented in measurable terms.</p> <p><u>Assurance that other residents are protected from the possibility of the deficiency:</u> Facility staff will document on data collection sheet for each resident to ensure that goal data is collected and documented in measurable terms.</p> <p><u>Measures to be put into place or systemic changes to be made to ensure that the deficient practice will not recur:</u></p>

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W 252	<p>Continued From page 47</p> <p>The "Support Checklist" (data collection) for Individual # 1 dated 04/01/2017 through 05/20/2017 was reviewed. The "Support Checklist" failed to evidence documentation of the data collection of Individual # 1's ISP outcome/goal in measurable terms.</p> <p>The "Comprehensive Progress Notes" for Individual # 1 dated 04/01/2017 through 05/20/2017 were reviewed. The "Comprehensive Progress Notes" failed to evidence documentation of the data collection of Individual # 1's ISP outcome/goal in measurable terms.</p> <p>On 05/25/17 at 8:50 a.m. an interview was conducted with ASM (administrative staff member) # 1, the program supervisor, ASM # 2, the assistant manager, ASM # 3, the assistant intellectual disabilities residential coordinator and OSM (other staff member) # 1, the QIDP (Qualified Intellectual Disabilities Professional). ASM # 1, ASM# 2, ASM # 3 and OSM # 1 were asked to review Individual # 1's "Support Checklist" dated 04/01/2017 through 05/20/2017 and the "Comprehensive Progress Notes" dated 04/01/2017 through 05/20/2017. When asked if the data collected for Individual # 1's ISP goals, was collected in measurable terms, to determine Individual # 1's progress, ASM # 3 and OSM # 1 stated, "No."</p> <p>The facility's policy "5-10 Goals and Objectives." documented, "5d. The type of data and frequency of data collection necessary to be able to assess progress towards the desired objectives: Provides clear directions to any staff person working with the individual about the type of data to record and the frequency which data is to be recorded."</p>	W 252	<p>The QIDP will monitor and review data collection sheets monthly and quarterly to ensure outcomes are being documented in measurable terms.</p> <p><u>How the facility plans to monitor its performance to make sure that solutions are sustained:</u></p> <p>The data collection sheets for each client will be reviewed by the ICF supervisor prior to initiation to ensure that goal data can be collected and documented in measurable terms.</p> <p><u>Date of Completion:</u> 6/30/17</p>	

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W 252	Continued From page 48 On 05/24/17 at 4:50 p.m. ASM # 1, program supervisor, ASM # 2, assistant manager ASM # 3, assistant intellectual disabilities residential coordinator and OSM (other staff member) # 1, the QIDP were made aware of the findings. No further information was provided prior to exit. References: (1) Refers to a group of disorders characterized by a limited mental capacity and difficulty with adaptive behaviors such as managing money, schedules and routines, or social interactions. Intellectual disability originates before the age of 18 and may result from physical causes, such as autism or cerebral palsy, or from nonphysical causes, such as lack of stimulation and adult responsiveness. This information was obtained from the website: https://report.nih.gov/nihfactsheets/ViewFactSheet.aspx?csid=100 . (2) A brain tumor is a growth of abnormal cells in the tissues of the brain. Brain tumors can be benign, with no cancer cells, or malignant, with cancer cells that grow quickly. Some are primary brain tumors, which start in the brain. Others are metastatic, and they start somewhere else in the body and move to the brain. This information was obtained from the website: https://medlineplus.gov/braintumors.html . (3) Symptoms of a brain problem. They happen because of sudden, abnormal electrical activity in the brain. This information was obtained from the website: https://www.nlm.nih.gov/medlineplus/seizures.ht	W 252		

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W 252	<p>Continued From page 49</p> <p>ml.</p> <p>(4) Involve sensing things such as visions, sounds, or smells that seem real but are not. These things are created by the mind. This information was obtained from the website: https://medlineplus.gov/ency/article/003258.htm.</p> <p>(5) Stomach contents to leak back, or reflux, into the esophagus and irritate it. This information was obtained from the website: https://www.nlm.nih.gov/medlineplus/gerd.html.</p> <p>(6) (Addison Disease) Your adrenal glands are just above your kidneys. The outside layer of these glands makes hormones that help your body respond to stress and regulate your blood pressure and water and salt balance. Addison disease happens if the adrenal glands don't make enough of these hormones. A problem with your immune system usually causes Addison disease. The immune system mistakenly attacks your own tissues, damaging your adrenal glands. Other causes include infections and cancer. This information was obtained from the website: https://medlineplus.gov/addisondisease.html.</p> <p>(7) Obstructive sleep apnea (OSA) is a problem in which your breathing pauses during sleep. This occurs because of narrowed or blocked airways. This information was obtained from the website: https://medlineplus.gov/ency/article/000811.htm.</p> <p>2. Individual # 2 was a 74 year old female, who was admitted to (Name of Group Home) on 07/28/14. Diagnoses in the clinical record included but were not limited to: profound intellectual disability (1), osteoporosis (2),</p>	W 252		

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W 252	Continued From page 50 scoliosis (3), fibrocystic breast (4) and glaucoma (5).	W 252		
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Review of Individual # 2's current ISP (Individual Support Plan) dated 08/26/2016 through 08/25/2017 revealed: "Goal 3A. Outcome Important To/for: (Individual # 2) will have assistance with her participation in showers/bathing. How often or by when? Daily. Goal 8 Outcome Important To/for: (Individual # 2) will have opportunities to build relationships with family, friends and peers, at home and in the community. How often or by when? Daily. Goal 9. Outcome Important To/for: (Individual # 2) will maintain/increase her strength and flexibility. How often or by when? Daily. Goal 10. Outcome Important To/for: Visual and verbal presentation of options staff will present one, then another choice. How often or by when? Daily. Further review of ISP goals # 3A, # 8, # 9 and # 10 for Individual # 2 failed to evidence documentation of quantitative measurable indicators of performance.

The "Support Checklist" (data collection) for Individual # 2 dated 04/01/2017 through 05/20/2017 was reviewed. The "Support Checklist" failed to evidence documentation of the data collection of Individual # 2's ISP outcome/goal in measurable terms.

The "Comprehensive Progress Notes" for Individual # 2 dated 04/01/2017 through 05/20/2017 were reviewed. The "Comprehensive Progress Notes" failed to evidence documentation of the data collection of Individual # 2's ISP outcome/goal in measurable terms.

On 05/25/17 at 8:50 a.m. an interview was

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W 252	<p>Continued From page 51</p> <p>conducted with ASM (administrative staff member) # 1, the program supervisor, ASM # 2, the assistant manager, ASM # 3, the assistant intellectual disabilities residential coordinator and OSM (other staff member) # 1, the QIDP (Qualified Intellectual Disabilities Professional). ASM # 1, ASM # 2, ASM # 3 and OSM # 1 were asked to review Individual # 2's "Support Checklist" dated 04/01/2017 through 05/20/2017 and the "Comprehensive Progress Notes" dated 04/01/2017 through 05/20/2017. When asked if the data collected for Individual # 2's ISP goals was collected in measurable terms, to determine Individual # 2's progress, ASM # 3 and OSM # 1 stated, "No."</p> <p>On 05/24/17 at 4:50 p.m. ASM # 1, program supervisor, ASM # 2, assistant manager ASM # 3, assistant intellectual disabilities residential coordinator and OSM (other staff member) # 1, the QIDP were made aware of the findings.</p> <p>No further information was provided prior to exit.</p> <p>References:</p> <p>(1) Refers to a group of disorders characterized by a limited mental capacity and difficulty with adaptive behaviors such as managing money, schedules and routines, or social interactions. Intellectual disability originates before the age of 18 and may result from physical causes, such as autism or cerebral palsy, or from nonphysical causes, such as lack of stimulation and adult responsiveness. This information was obtained from the website: https://report.nih.gov/nihfactsheets/ViewFactSheet.aspx?csid=100.</p>	W 252		

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W 252	Continued From page 52 (2) Makes your bones weak and more likely to break. This information was obtained from the website: https://www.nlm.nih.gov/medlineplus/osteoporosis.html (3) An abnormal curving of the spine. Your spine is your backbone. It runs straight down your back. Everyone's spine naturally curves a bit. But people with scoliosis have a spine that curves too much. The spine might look like the letter C or S. This information was obtained from the website: https://medlineplus.gov/ency/article/001241.htm (4) A common way to describe painful, lumpy breasts. This information was obtained from the website: https://medlineplus.gov/ency/article/000912.htm (5) A group of diseases that can damage the eye's optic nerve. This information was obtained from the website: https://www.nlm.nih.gov/medlineplus/glaucoma.html	W 252		
W 339	483.460(c)(4) NURSING SERVICES Nursing services must include other nursing care as prescribed by the physician or as identified by client needs. This STANDARD is not met as evidenced by: Based on staff interview, facility document review, and residential record review, it was determined that the facility staff failed to follow physician's orders for one of two individuals in the survey sample, Individual # 2.	W 339	W339 <u>How corrective action will be accomplished for individual #2:</u> Facility staff are now applying individual #2's TED hose according to physician's orders. <u>Assurance that other residents are protected from the possibility of the deficiency:</u> All physician orders are being followed by facility staff as written for all individuals.	6/8/17

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W 339	<p>Continued From page 53</p> <p>The facility staff failed to apply Individual # 2's TED hose (6) according to the physician's orders.</p> <p>The findings include:</p> <p>Individual # 2 was a 74 year old female, who was admitted to (Name of Group Home) on 07/28/14. Diagnoses in the clinical record included but were not limited to: profound intellectual disability (1), osteoporosis (2), scoliosis (3), fibrocystic breast (4) and glaucoma (5).</p> <p>Review of Individual # 2's current ISP (Individual Support Plan) dated 08/26/2016 through 08/25/2017 revealed: "Goal 4. Outcome Important To/for: (Individual # 2) receives personal care for dressing and grooming. Describe how this will be provided based on individual preferences. (support instructions) and location where program strategy can be found: Protocol: Every morning (Individual # 2) will wear TED hose for circulation. The TED hose will not be folded down around the knee. Every evening they will be removed prior to (Individual # 2's) shower. To prevent skin irritation and breakdowns TED hose and all clothing must be smooth against her skin i.e. no wrinkles. How often or by when? Daily."</p> <p>The physician's order dated "April 2017" and signed by the physician on "4/27/17" documented, "TED hose, knee high; on in a.m. & (and) off in p.m."</p> <p>The "Support Checklist" (data collection) for Individual # 2 dated 04/01/2017 through 05/20/2017 was reviewed. The "Support Checklist" failed to evidence documentation of Individual # 2's TED hose being applied on</p>	W 339	<p><u>Measures to be put into place or systemic changes to be made to ensure that the deficient practice will not recur:</u></p> <p>The Nurse Manager will review all physician orders and monitor facility staff to ensure that they are being followed by facility staff as written for all individuals.</p> <p><u>How the facility plans to monitor its performance to make sure that solutions are sustained:</u></p> <p>The ICF supervisor will monitor facility staff at a minimum of weekly to ensure that they are following physician orders as written for all individuals.</p> <p><u>Date of Completion:</u></p> <p>6/8/17</p>	

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W 339	<p>Continued From page 54</p> <p>04/29/17. Further review of the "Support Checklist" revealed a blank box, no initials or check mark on 04/29/17.</p> <p>The "Comprehensive Progress Notes" for Individual # 1 dated 04/29/17 were reviewed. The "Comprehensive Progress Notes" failed to evidence documentation of Individual # 2's TED hose being applied on 04/29/17.</p> <p>On 05/25/17 at 8:50 a.m. an interview was conducted with ASM (administrative staff member) # 1, the program supervisor, ASM # 2, the assistant manager, ASM # 3, the assistant intellectual disabilities residential coordinator, OSM (other staff member) # 1, the QIDP (Qualified Intellectual Disabilities Professional) and RN (registered nurse) # 1. RN # 1 was asked to explain a blank space on the "Support Checklist." RN # 1 stated, "A blank means it wasn't done." RN # 1 was asked to review Individual # 2's "Support Checklist" dated 04/29/2017 for the wearing of TED hoses and the "Comprehensive Progress Notes" dated 04/29/2017 for Individual # 2. When asked if Individual # 2's TED hose were applied on 04/29/2017, RN # 1 stated, "No." When asked how the implementation TED hose for Individual # 2 was monitored, RN # 1 stated, "We could add it to the MAR (medication administration record)."</p> <p>On 05/24/17 at 4:50 p.m. ASM (administrative staff member) # 1, program supervisor, ASM # 2, assistant manager ASM # 3, assistant intellectual disabilities residential coordinator and OSM (other staff member) # 1, the QIDP (Qualified Intellectual Disabilities Professional) were made aware of the findings.</p>	W 339		

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NAME OF PROVIDER OR SUPPLIER LUCAS STREET		STREET ADDRESS, CITY, STATE, ZIP CODE 5701 LUCAS STREET FREDERICKSBURG, VA 22407		
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W 339	<p>Continued From page 55</p> <p>No further information was provided prior to exit.</p> <p>References:</p> <p>(1) Refers to a group of disorders characterized by a limited mental capacity and difficulty with adaptive behaviors such as managing money, schedules and routines, or social interactions. Intellectual disability originates before the age of 18 and may result from physical causes, such as autism or cerebral palsy, or from nonphysical causes, such as lack of stimulation and adult responsiveness. This information was obtained from the website: https://report.nih.gov/nihfactsheets/ViewFactSheet.aspx?csid=100.</p> <p>(2) Makes your bones weak and more likely to break. This information was obtained from the website: https://www.nlm.nih.gov/medlineplus/osteoporosis.html.</p> <p>(3) An abnormal curving of the spine. Your spine is your backbone. It runs straight down your back. Everyone's spine naturally curves a bit. But people with scoliosis have a spine that curves too much. The spine might look like the letter C or S. This information was obtained from the website: https://medlineplus.gov/ency/article/001241.htm.</p> <p>(4) A common way to describe painful, lumpy breasts. This information was obtained from the website: https://medlineplus.gov/ency/article/000912.htm.</p> <p>(5) A group of diseases that can damage the eye's optic nerve. This information was obtained from the website:</p>	W 339		

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

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STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 49G064	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED 05/25/2017
NAME OF PROVIDER OR SUPPLIER LUCAS STREET		STREET ADDRESS, CITY, STATE, ZIP CODE 5701 LUCAS STREET FREDERICKSBURG, VA 22407		
(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 339	Continued From page 56 https://www.nlm.nih.gov/medlineplus/glaucoma.html . (6) Compression stockings to improve blood flow in your legs. Compression stockings gently squeeze your legs to move blood up your legs. This helps prevent leg swelling and, to a lesser extent, blood clots. This information was obtained from the website: https://medlineplus.gov/ency/patientinstructions/000597.htm	W 339		