

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

PRINTED: 09/07/2020
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 49G011	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 08/19/2020
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NAME OF PROVIDER OR SUPPLIER NORTH 16TH STREET GRP HOME	STREET ADDRESS, CITY, STATE, ZIP CODE 5563 N 16TH STREET ARLINGTON, VA 22205
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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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E 000	Initial Comments	E 000	The N. 16 th Street Emergency Supply Kit has a plastic 5 gallon can with lid to be used for emergency waste disposal. In the unlikely occurrence of the public sewage system which is gravity based to be off line. The emergency kit can with lid would be used for waste. The can would be emptied and sealed in plastic bags and would be disposed in waste can that is picked up by the Arlington County waste management company. This guidance will be included in the program specific Emergency Preparedness Plan for N. 16 th Street and will be reviewed with staff at the next regularly scheduled house meeting. The Program Manager will insure that the staff is trained in this guidance. The Clinical Director will review that this was accomplished during routine supervision and program visits. The CRi Risk Management Committee will review the Emergency Plan specific to N. 16 th Street Group Home on annual basis.	10/2/2020
E 015	Subsistence Needs for Staff and Patients CFR(s): 483.475(b)(1) [(b) Policies and procedures. [Facilities] must develop and implement emergency preparedness policies and procedures, based on the emergency plan set forth in paragraph (a) of this section, risk assessment at paragraph (a)(1) of this section, and the communication plan at paragraph (c) of this section. The policies and procedures must be reviewed and updated every 2 years (annually for LTC). At a minimum, the policies and procedures must address the following: (1) The provision of subsistence needs for staff and patients whether they evacuate or shelter in place, include, but are not limited to the following: (i) Food, water, medical and pharmaceutical supplies (ii) Alternate sources of energy to maintain the following: (A) Temperatures to protect patient health and safety and for the safe and sanitary storage of provisions. (B) Emergency lighting. (C) Fire detection, extinguishing, and alarm systems. (D) Sewage and waste disposal. *[For Inpatient Hospice at §418.113(b)(6)(iii):] Policies and procedures. (6) The following are additional requirements for	E 015		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE Terell Jones	TITLE Clinical Director	(X6) DATE 9/14/2020
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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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E 015	<p>Continued From page 1</p> <p>hospice-operated inpatient care facilities only. The policies and procedures must address the following:</p> <p>(iii) The provision of subsistence needs for hospice employees and patients, whether they evacuate or shelter in place, include, but are not limited to the following:</p> <p>(A) Food, water, medical, and pharmaceutical supplies.</p> <p>(B) Alternate sources of energy to maintain the following:</p> <p>(1) Temperatures to protect patient health and safety and for the safe and sanitary storage of provisions.</p> <p>(2) Emergency lighting.</p> <p>(3) Fire detection, extinguishing, and alarm systems.</p> <p>(C) Sewage and waste disposal.</p> <p>This STANDARD is not met as evidenced by: Based on staff interview and facility document review it was determined that the facility staff failed to have a complete emergency preparedness plan. The facility staff failed to provide documentation that the emergency plan included policies and procedures for waste and sewage disposal.</p> <p>The findings include:</p> <p>On 08/19/20 at approximately 11:20 a.m. a review and interview of the facility's emergency preparedness plan was conducted with ASM (administration staff member) # 2, program manager. Review of the facility's emergency preparedness plan failed to evidence documentation that the emergency plan included policies and procedures for waste and sewage disposal. ASM # 2 stated, "We don't have it."</p>	E 015		

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E 015	Continued From page 2 On 08/19/2020 at 12:20 p.m. ASM (administrative staff member) # 1, clinical director, ASM # 2, program manager, and OSM [other staff member QIDP [Qualified Intellectual Disabilities Professional] # 1 were made aware of the findings.	E 015	While CRi does have an MOU with another agency to provide reciprocal services at an alternative site, CRi main source of alternative sites is within its own portfolio of ICF's and Group Homes. CRi has over 40 alternative sites in various areas of the Commonwealth of Virginia. This includes 12 other ICF facilities in 6 different counties. The Emergency Response Team is in contact and provides status reports to the State Coordinator. This reporting relationship would provide the mechanism in which we would request an 1135 waiver in an emergency situation. This information will be inserted in the 16 th Street Group Home specific Emergency Plan and will be reviewed at the next house team meeting. The Program Manager will insure that the staff is trained on this information. The Clinical Director will review that this was accomplished during routine supervision and program visits. The CRi Risk Management Committee will review the Emergency Plan specific to N. 16 th Street Group Home on annual basis.	10/2/2020	
E 026	No further information was provided prior to exit. Roles Under a Waiver Declared by Secretary CFR(s): 483.475(b)(8) [(b) Policies and procedures. The [facilities] must develop and implement emergency preparedness policies and procedures, based on the emergency plan set forth in paragraph (a) of this section, risk assessment at paragraph (a)(1) of this section, and the communication plan at paragraph (c) of this section. The policies and procedures must be reviewed and updated at least every 2 years (annually for LTC.) At a minimum, the policies and procedures must address the following:] (8) [(6), (6)(C)(iv), (7), or (9)] The role of the [facility] under a waiver declared by the Secretary, in accordance with section 1135 of the Act, in the provision of care and treatment at an alternate care site identified by emergency management officials. *[For RNHCIs at §403.748(b):] Policies and procedures. (8) The role of the RNHCI under a waiver declared by the Secretary, in accordance with section 1135 of Act, in the provision of care at an alternative care site identified by emergency management officials. This STANDARD is not met as evidenced by: Based on staff interview and facility document review it was determined that the facility staff	E 026			

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E 026	Continued From page 3 failed to have a complete emergency preparedness plan. The facility staff failed to develop policies and procedures in the emergency plan that describe the facility's role in providing care and treatment at altered care sites under an 1135 waiver. The findings include: On 08/19/2020 at approximately 11:20 a.m. a review of the facility's emergency preparedness plan and interview was conducted with ASM (administration staff member) # 2, program manager. Review of the facility's emergency preparedness plan failed failed to evidence policies and procedures in the emergency plan that describe the facility's role in providing care and treatment at altered care sites under an 1135 waiver. ASM # 2 stated, "We don't have it." On 08/19/2020 at 12:20 p.m. ASM (administrative staff member) # 1, clinical director, ASM # 2, program manager, and OSM [other staff member QIDP [Qualified Intellectual Disabilities Professional] # 1 were made aware of the findings.	E 026			
W 000	No further information was provided prior to exit. INITIAL COMMENTS An unannounced annual Medicaid survey for Intermediate Care Facilities for Persons with Intellectual Disabilities (ICF/ID) was conducted on 08/19/20. 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.	W 000			

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W 000	Continued From page 4	W 000	<ol style="list-style-type: none"> The Program Manager will retrain program staff on implementing and documenting the active treatment programs for community activities, medication management, and spiritual/cultural activities for individual #1, #2, and #3. The Program Manager will retrain program staff on implementing and documenting active treatment programs for communication, recreation, medication management, and spiritual/cultural activities for individual #2. The Program Manager will retrain program staff on implementing and documenting active treatment programs for communication, medication management, and spiritual/cultural activities for individual #3. The Program Manager will retrain Program staff on the implementation and the documentation of all individuals' active treatment programs per their ISP. The Program Manager will complete monthly program audits to ensure all individuals' active treatment program documentation is being implemented and documented accurately. The Clinical Director will review/monitor on a quarterly basis the monthly program audits and review the individuals' active treatment implementation and program documentation. 	10/2/2020
W 159	<p>QIDP CFR(s): 483.430(a)</p> <p>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 observation, facility document review and staff interview it was determined that the QIDP [Qualified Intellectual Disabilities Professional] failed to coordinate and monitor the active treatment program for three of three individuals in the survey sample, Individuals # 1, # 2 and # 3.</p> <p>1. The QIDP failed to ensure the active treatment programs for community activities, medication management and spiritual/cultural activities for Individual # 1 were implemented.</p> <p>2 The QIDP failed to ensure the active treatment programs for communication, recreation, medication management and spiritual/cultural activities for Individual # 2 were implemented.</p> <p>3. The QIDP failed to ensure the active treatment programs for communication, medication management and spiritual/cultural activities for Individual # 3 were implemented.</p> <p>The findings include:</p> <p>1. Individual # 1 was a 75 year old male, who was admitted to [Name of Group Home] with</p>	W 159		

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W 159	<p>Continued From page 5</p> <p>diagnoses that included but were not limited to: intellectual disability (1), benign prostatic hypertrophy [2], and vitamin D deficiency.</p> <p>The PCP [Person Center Plan] for Individual # 1 dated 12/01/2019 through 11/30/2020 documented,</p> <p>"Desired Outcome: Goal 1: [Individual # 1] will have the opportunity to participate in preferred community activities (i.e Church, Shopping Stores, Social Events, Restaurants, etc.) once a week for 95% of the time for 12 consecutive months by 11/30/20. Support Activities & [and] Instructions: 1. [Individual # 1] will be encouraged to participate in his weekly house meeting to plan his activities for the week ahead. 2. [Individual # 1] will be supported in putting his preferred activity on the white calendar board (i.e church service 10 am Sunday). 3. [Individual # 1] will be provided with appropriate support by staff (i.e. transporting him to outing of his choice, and providing appropriate materials/resources and verbal supports) as needed. 4. [Individual # 1] will receive verbal praises and encouragement before, during and after his community outing activity. 5. [Individual # 1] will have his data collected 1x [time] per week on his data collection sheets. Frequency: Weekly."</p> <p>"Desired Outcome: Goal 2: [Individual # 1] will participate in popping his medicine from his bubble pack every day for at least 90% of the time for 12 consecutive months by 11/30/20. Support Activities & [and] Instructions:</p> <p>1. [Individual # 1] will be reminded that it is time to take his medication. 2. [Individual # 1] will be asked to pop the medicine from his bubble pack. 3. [Individual # 1] will be shown exactly which</p>	W 159		

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W 159	<p>Continued From page 6</p> <p>medicine bubble to pop in to a large medicine cup. 4. [Individual # 1] will be given some verbal and physical supports to pop his bubble pack. 5. [Individual # 1] will be given verbal praises for completing his medication goal. 6. [Individual # 1] will have his data collected one time per day at 8 pm. Frequency: Daily."</p> <p>"Desired Outcome: Goal 10: [Individual # 1] will have the opportunity to participate and attend a spiritual/cultural activity of his choice at least once a month for 100% of the time for 12 consecutive months by 11/30/20. Support Activities & [and] Instructions: 1. [Individual # 1] will be asked if he wants to participate in a spiritual/cultural activity. 2. [Individual # 1] will be shown images (i.e. flyers, pamphlets, brochures etc.) of different spiritual/cultural events that he can choose from. 3. [Individual # 1] will attend the activity that he chooses. 4. [Individual # 1] will be provided supports by staff as needed during the activity. 5. [Individual # 1] will be given praises when he participates in his activity. 6. [Individual # 1] will have his data collected 1 [one] time per month. Frequency: Monthly."</p> <p>The facility's "Data Collection Sheet" for Individual # 1 dated "February 2020" documented, "Desired Outcome: Goal 1: [Individual # 1] will have the opportunity to participate in preferred community activities (i.e Church, Shopping Stores, Social Events, Restaurants, etc.) once a week for 95% of the time for 12 consecutive months by 11/30/20. Frequency: Weekly." Review of data sheet revealed zeros and blanks during the week of 02/20/20 through 02/08/20. Further review of the data sheet documented, "LEGEND: + = support provided. C = Chose not to participate. A = Individual not present. I = Incident. O =</p>	W 159		
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W 159	<p>Continued From page 7 Other (not offered)."</p> <p>The facility's "Data Collection Sheet" for Individual # 1 dated "March 2020" documented, "Desired Outcome: Goal 1: [Individual # 1] will have the opportunity to participate in preferred community activities (i.e Church, Shopping Stores, Social Events, Restaurants, etc.) once a week for 95% of the time for 12 consecutive months by 11/30/20. Frequency: Weekly." Review of data sheet revealed zeros and blanks during the week of 03/08/20 through 03/14/20, 03/15/20 through 03/21/20 and 03/22/20 through 03/28/20. Further review of the data sheet documented, "LEGEND: + = support provided. C = Chose not to participate. A = Individual not present. I = Incident. O = Other (not offered)."</p> <p>The facility's "Data Collection Sheet" for Individual # 1 dated "May 2020" documented, "Desired Outcome: Goal 2: [Individual # 1] will participate in popping his medicine from his bubble pack every day for at least 90% of the time for 12 consecutive months by 11/30/20. Frequency: Daily." Review of data sheet revealed zeros on 05/22/20, 05/23/20 and 05/23/20. Further review of the data sheet documented, "LEGEND: + = support provided. C = Chose not to participate. A = Individual not present. I = Incident. O = Other (not offered)."</p> <p>The facility's "Data Collection Sheet" for Individual # 1 dated "May 2020" documented, "Desired Outcome: Goal 10: [Individual # 1] will have the opportunity to participate and attend a spiritual/cultural activity of his choice at least once a month for 100% of the time for 12 consecutive months by 11/30/20. Frequency: 1 Time Per Month." Review of data sheet revealed zeros and</p>	W 159		

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W 159	<p>Continued From page 8</p> <p>blanks on 05/01/20 through 05/31/20. Further review of the data sheet documented, "LEGEND: + = support provided. C = Chose not to participate. A = Individual not present. I = Incident. O = Other (not offered)."</p> <p>The facility's "Data Collection Sheet" for Individual # 1 dated "July 2020" documented, "Desired Outcome: Goal 2: [Individual # 1] will participate in popping his medicine from his bubble pack every day for at least 90% of the time for 12 consecutive months by 11/30/20. Frequency: Daily." Review of data sheet revealed zeros and blanks on 07/03/20, 07/04/20, 07/05/20, 07/23/20 and 07/31/20. Further review of the data sheet documented, "LEGEND: + = support provided. C = Chose not to participate. A = Individual not present. I = Incident. O = Other (not offered)."</p> <p>The facility's "Data Collection Sheet" for Individual # 1 dated "August 01, 2020 through August 18, 2020" documented, "Desired Outcome: Goal 2: [Individual # 1] will participate in popping his medicine from his bubble pack every day for at least 90% of the time for 12 consecutive months by 11/30/20. Frequency: Daily." Review of data sheet revealed zeros and blanks on 08/01/20, 08/02/20, 08/07/20 and 08/30/20. Further review of the data sheet documented, "LEGEND: + = support provided. C = Chose not to participate. A = Individual not present. I = Incident. O = Other (not offered)."</p> <p>On 08/19/20 at 11:20 a.m., an interview was conducted with the QIDP [Qualified Intellectual Disabilities Professional]. When asked to describe the responsibility of the QIDP, OSM # 1 stated, I'm responsible for training and developing competency for staff, go over plans and data with</p>	W 159		
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W 159	<p>Continued From page 9</p> <p>staff on what to document on what not to document on. We are reconsidering changing the key [legend] because people are missing key things to document on data sheet. I go back and look at credible [computerized notes] and advise staff what they should have put on the data sheet. I review the data collection quarterly, I am doing them now monthly and filing them and addressing problems. After reviewing the data collection sheets for Individual #1's active treatment for community activities, medication management and spiritual/cultural activities, OSM # 1 was asked about the zeros and blanks on the data sheets. OSM # 1 stated, "It looks like it's not done."</p> <p>The [Name of Group Home's] document "Lead QIDP" documented in part, "The lead QIDP is responsible for training, mentoring, oversight of staff to ensure quality services and continuity of care."</p> <p>On 08/19/20 at 12:20 p.m. ASM (administrative staff member) # 1, clinical director, ASM # 2, program manager and OSM # 1, QIDP were made aware of the findings.</p> <p>No further information was provided prior to exit.</p> <p>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</p>	W 159		

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W 159	<p>Continued From page 10 from the website: https://www.report.nih.gov/NIHfactsheets/ViewFactSheet.aspx?csid=100</p> <p>[2] An enlarged prostate. This information was obtained from the website: https://www.nlm.nih.gov/medlineplus/enlargedprostatebph.html.</p> <p>2. The QIDP failed to ensure the active treatment programs for communication, recreation, medication management and spiritual/cultural activities for Individual # 2 were implemented.</p> <p>Individual # 2 was a 59 year old female, who was admitted to [Name of Group Home] with diagnoses that included but were not limited to: moderate intellectual disability [1], mild cerebral palsy [2], seizures [3], and anxiety [4].</p> <p>The PCP [Person Center Plan] for Individual # 2 dated 12/01/2019 through 11/30/2020 documented, "Desired Outcome: Goal 1: [Individual # 2] will improve her communication with appropriate vocalizations when prompted by staff at least 50% of the time for 12 consecutive months by 11/30/20. Support Activities & [and] Instructions: 1. [Individual # 2] will be prompted to use vocalizations that available and comfortable to use. 2. [Individual # 2] will be verbally prompted to vocally respond when asked yes or no questions. 3. [Individual # 2] will be verbally prompted to respond in singing when verbally prompted by staff singing the songs that have call and response structures. 4. [Individual # 2] will receive verbal praise for her participation when she communicates in a safe and healthy manner.</p>	W 159			

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NAME OF PROVIDER OR SUPPLIER NORTH 16TH STREET GRP HOME		STREET ADDRESS, CITY, STATE, ZIP CODE 5563 N 16TH STREET ARLINGTON, VA 22205		
(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 11</p> <p>5. [Individual # 2] will have his data collected 1x [time] per day at 7 pm [7:00 p.m.]. Frequency: Daily."</p> <p>"Desired Outcome: RECREATION OUTCOME(s): MULTI-SENSORY: to increase active engagement and effective learning through stimulating her senses; to decrease her need to exhibit Disruptive Outburts. GROSS MOTOR: to decrease signs/symptoms/complications of Mild Cerebral Palsy, Intermittent Explosive Disorder, mood disorder, Anxiety disorder and to increase quality and quantity of sleep - to increase skin integrity-to decrease need for PT [physical therapy] services." Support Activities & [and] Instructions: Goal: [Individual # 2] participates in multi-sensory activities for 2-5 minutes, 2-3 times per week (8-15 times per month in her home and/or community. Frequency: Twice a week."</p> <p>"Desired Outcome: Goal 3: [Individual # 2] will hold her drink container and drink her liquids using a straw after receiving medications daily for 100% of the time for 12 consecutive months by 11/30/20. Support Activities & [and] Instructions: 1. When it is time for her medication [Individual # 2] will be verbally prompted and physically assisted to the medication room. 2. [Individual # 2] will be given her drink container with a straw to hold tightly [sic] griped in both hands (i.e. cup, water or juice bottle). 3. [Individual # 2] will be verbally prompted to drink all of liquids to help digest her medications. 4. [Individual # 2] will be given verbal praises for completing her medication intake and holding her cup. 5. [Individual # 2] will have his data collected 1x [time] per day at 8 pm [8:00 p.m.]. Frequency: Daily."</p>	W 159		

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W 159	<p>Continued From page 12</p> <p>"Desired Outcome: Goal 10: [Individual # 2] will have the opportunity to participate and attend a spiritual/cultural activity of her choice at least once a month for 100% of the time for 12 consecutive months by 11/30/20. Support Activities & [and] Instructions: 1. [Individual # 2] will be asked if she wants to participate in a spiritual/cultural activity. 2. [Individual # 2] will be shown images (i.e. flyers, pamphlets, brochures etc.) of different spiritual/cultural events that he can choose from. 3. [Individual # 2] will attend the activity that she chooses. 4. [Individual # 2] will be provided supports by staff as needed during the activity. 5. [Individual # 2] will be given praises when he participates in his activity. 6. [Individual # 2] will have his data collected 1 [one] time per month. Frequency: Monthly."</p> <p>The facility's "Data Collection Sheet" for Individual # 2 dated "February 2020" documented, "Desired Outcome: Goal 1: [Individual # 2] will improve her communication with appropriate vocalizations when prompted by staff at least 50% of the time for 12 consecutive months by 11/30/20. Frequency: Daily." Review of data sheet revealed zeros and blanks on 02/01/20, 02/06/20, 02/14/20 and 02/15/20. Further review of the data sheet documented, "LEGEND: + = support provided. C = Chose not to participate. A = Individual not present. I = Incident. O = Other (not offered)."</p> <p>The facility's "Data Collection Sheet" for Individual # 2 dated "February 2020" documented, "Desired Outcome: Goal 2: [Individual # 2] will be supported by staff with following her Recreational Therapy Activities weekly for 25% of the time for 12 consecutive months. Frequency: Twice a week." Review of data sheet revealed zeros and blanks during the week of 02/16/20 through</p>	W 159			

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W 159	<p>Continued From page 13</p> <p>02/22/20 and 02/23/20 through 02/29/20. Further review of the data sheet documented, "LEGEND: + = support provided. C = Chose not to participate. A = Individual not present. I = Incident. O = Other (not offered)."</p> <p>The facility's "Data Collection Sheet" for Individual # 2 dated "February 2020" documented, "Desired Outcome: Goal 3: [Individual # 2] will hold her drink container and drink her liquids using a straw after receiving medications daily for 100% of the time for 12 consecutive months by 11/30/20. Frequency: Daily." Review of data sheet revealed zeros and blanks on 02/06/20 and 02/09/20. Further review of the data sheet documented, "LEGEND: + = support provided. C = Chose not to participate. A = Individual not present. I = Incident. O = Other (not offered)."</p> <p>The facility's "Data Collection Sheet" for Individual # 1 dated "February, May, June and July 2020" documented, "Desired Outcome: Goal 10: [Individual # 1] will have the opportunity to participate and attend a spiritual/cultural activity of his choice at least once a month for 100% of the time for 12 consecutive months by 11/30/20. Frequency: 1 Time Per Month." Review of data sheet revealed zeros and blanks on 02/01/20 through 02/29/20, 05/01/20 through 05/31/20, 06/01/20 through 06/30/20 and 07/01/20 through 07/31/20. Further review of the data sheet documented, "LEGEND: + = support provided. C = Chose not to participate. A = Individual not present. I = Incident. O = Other (not offered)."</p> <p>The facility's "Data Collection Sheet" for Individual # 2 dated "March 2020" documented, "Desired Outcome: Goal 1: [Individual # 2] will improve her communication with appropriate vocalizations</p>	W 159			

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W 159	<p>Continued From page 14</p> <p>when prompted by staff at least 50% of the time for 12 consecutive months by 11/30/20. Frequency: Daily." Review of data sheet revealed zeros and blanks on 03/01/20, 03/06/20, 03/09/20, 03/10/20, 03/12/20, 02/14/20, 03/15/20, 03/16/20, 03/17/20, 03/21/20 and 03/29/20. Further review of the data sheet documented, "LEGEND: + = support provided. C = Chose not to participate. A = Individual not present. I = Incident. O = Other (not offered)."</p> <p>The facility's "Data Collection Sheet" for Individual # 2 dated "March 2020" documented, "Desired Outcome: Goal 2: [Individual # 2] will be supported by staff with following her Recreational Therapy Activities weekly for 25% of the time for 12 consecutive months. Frequency: Twice a week." Review of data sheet revealed zeros and blanks during the week of 03/08/20 through 03/14/20 and 03/22/20 through 03/28/20. Further review of the data sheet documented, "LEGEND: + = support provided. C = Chose not to participate. A = Individual not present. I = Incident. O = Other (not offered)."</p> <p>The facility's "Data Collection Sheet" for Individual # 2 dated "March 2020" documented, "Desired Outcome: Goal 3: [Individual # 2] will hold her drink container and drink her liquids using a straw after receiving medications daily for 100% of the time for 12 consecutive months by 11/30/20. Frequency: Daily." Review of data sheet revealed zeros and blanks on 03/01/20, 03/11/20 and 03/18/20. Further review of the data sheet documented, "LEGEND: + = support provided. C = Chose not to participate. A = Individual not present. I = Incident. O = Other (not offered)."</p>	W 159		

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W 159	<p>Continued From page 15</p> <p>The facility's "Data Collection Sheet" for Individual # 2 dated "July 2020" documented, "Desired Outcome: Goal 1: [Individual # 2] will improve her communication with appropriate vocalizations when prompted by staff at least 50% of the time for 12 consecutive months by 11/30/20. Frequency: Daily." Review of data sheet revealed zeros and blanks on 07/24/20. Further review of the data sheet documented, "LEGEND: + = support provided. C = Chose not to participate. A = Individual not present. I = Incident. O = Other (not offered)."</p> <p>On 08/19/20 at 11:20 a.m., an interview was conducted with the QIDP [Qualified Intellectual Disabilities Professional]. When asked to describe the responsibility of the QIDP, OSM # 1 stated, I'm responsible for training and developing competency for staff, go over plans and data with staff on what to document on what not to document on. We are reconsidering changing the key [legend] because people are missing key things to document on data sheet. I go back and look at credible [computerized notes] and advise staff what they should have put on the data sheet. I review the data collection quarterly, I am doing them now monthly and filing them and addressing problems. After reviewing the data collection sheets for Individual #2's active treatment for communication, recreation, medication management and spiritual/cultural activities, OSM # 1 was asked about the zeros and blanks on the data sheets. OSM # 1 stated, "It looks like it's not done."</p> <p>On 08/19/20 at 12:20 p.m. ASM (administrative staff member) # 1, clinical director, ASM # 2, program manager and OSM # 1, QIDP were made aware of the findings.</p>	W 159		
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W 159	<p>Continued From page 16</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://www.report.nih.gov/NIHfactsheets/ViewFactSheet.aspx?csid=100</p> <p>[2] A group of disorders that affect a person's ability to move and to maintain balance and posture. This information was obtained from the website: https://www.nlm.nih.gov/medlineplus/cerebralpalsy.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> <p>[4] Fear. This information was obtained from the website: https://www.nlm.nih.gov/medlineplus/anxiety.html#summary.</p> <p>3. The QIDP failed to ensure the active treatment programs for communication, medication management and spiritual/cultural activities for</p>	W 159			

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W 159	<p>Continued From page 17</p> <p>Individual # 3 were implemented.</p> <p>Individual # 3 was a 58 year old male, who was admitted to [Name of Group Home] with diagnoses that included but were not limited to: profound intellectual disability [1], autistic disorder [2] PICA [3], microcephaly (4), fear, and gastroesophageal reflux disease [5].</p> <p>The PCP [Person Center Plan] for Individual # 3 dated 12/01/2019 through 11/30/2020 documented,</p> <p>"Desired Outcome: I want to communicate my needs and wants to others effectively. Support Activities & [and] Instructions: 1. [Individual # 3] will use his communication program on his iPad when prompted by his staff daily for 15 minutes a day at least 100% of the time for 3 consecutive months by 09/30/2020. Frequency: Daily."</p> <p>"Desired Outcome: I will pour my Benefiber powder into a cup of water and mix it every morning and evening. Support Activities & [and] Instructions: 1. [Individual # 3] will walk to the medication room when notified by staff that it is time to take his morning or evening medications. 2. [Individual # 3's] Benefiber will be measured by staff so that the appropriate dose of Benefiber will be given. Staff will provide 6-8oz [six to eight ounces] of fluid and then hand over the medication to [Individual # 3]. 3. [Individual # 3] will be given instructions by staff on how to pour the medication from the medication cup into 6-8oz of fluid. Staff will provide supervision and assistance as needed. 4. [Individual # 3] will use a spoon to mix the powder into the water. Staff will provide verbal directions and hand over hand assistance as needed. 5. [Individual # 3] This goal will be met if [Individual # 3] pours his</p>	W 159		

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W 159	<p>Continued From page 18</p> <p>medication (Benefiber) into 6-8 oz of fluid and stirs the medication. 6. [Individual # 3] will be praised by staff if he participates in the goal. 7. [Individual # 3] progress will be documented in Credible by staff. 8. [Individual # 3] is able to independently obtain this goal. Frequency: Daily."</p> <p>"Desired Outcome: [Individual # 3] will engage in a religious activity. Support Activities & [and] Instructions: 1. [Individual # 3] will engage in a religious activity by going to church or engaging in a religious activity for 30 minutes at least 75% of the time for 12 consecutive months by 09/30/2020. 1. [Individual # 3] will be asked what spiritual activity he would like to explore. 2. [Individual # 3] will be presented options that can include sacred music, storytelling, radio broadcasting related to spiritual care, nature walking or star gazing. 3. [Individual # 3] will be given the necessary support to accomplish this goal. 4. [Individual # 3] will meet this goal when staff uses 2-3 prompts every five minutes to keep him engaged in the activity. 5. [Individual # 3] will be given verbal praise at the completion of positive outcome. 6. Successful completion will be documented in Credible. 7. This goal will be met when [Individual # 3] is able to independently [sic] met the goal. Frequency: Weekly."</p> <p>The facility's "Data Collection Sheet" for Individual # 3 dated "February, March, April May July 2020" and August 1, 2020 through August 18, 2020 documented, "Desired Outcome: [Individual # 3] will use his communication program on his iPad when prompted by his staff daily for 15 minutes a day at least 100% of the time for 3 consecutive months by 09/30/2020. Frequency: Daily." Review of data sheet revealed zeros and blanks on 02/01/20 through 02/29/20, 03/01/20 through</p>	W 159		
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W 159	<p>Continued From page 19</p> <p>03/31/20, 04/01/20 through 04/30/20, 05/01/20 through 05/31/20, 06/01/20 through 06/30/20 and 08/01/20 through 08/18/20. Further review of the data sheet documented, "LEGEND: + = support provided. C = Chose not to participate. A = Individual not present. I = Incident. O = Other (not offered)."</p> <p>The facility's "Data Collection Sheet" for Individual # 3 dated "February, March, April, May, June and July 2020" documented, Support Activities & [and] Instructions: 1. [Individual # 3] will engage in a religious activity by going to church or engaging in a religious activity for 30 minutes at least 75% of the time for 12 consecutive months by 09/30/2020. Frequency: Weekly." Review of data sheet revealed zeros and blanks from 02/23/20 through 02/29/20, 03/01/20 through 03/31/20, 04/01/20 through 04/30/20, 05/01/20 through 05/31/20, 06/01/20 through 06/30/20 and 07/01/20 through 07/31/20.</p> <p>The facility's "Data Collection Sheet" for Individual # 3 dated "February, May, July and August 2020" documented, Support Activities & [and] Instructions: I will pour my Benefiber powder into a cup of water and mix it every morning and evening. Frequency: Daily." Review of data sheet revealed zeros and blanks on 02/17/20, 05/01/20, 05/14/20, 05/18/20 through 05/31/20, 07/03/20 through 07/04/20 and 08/01/20, 08/02/20 and 08/08/20.</p> <p>On 08/19/20 at 11:20 a.m., an interview was conducted with the QIDP [Qualified Intellectual Disabilities Professional]. When asked to describe the responsibility of the QIDP, OSM # 1 stated, I'm responsible for training and developing competency for staff, go over plans and data with</p>	W 159		

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W 159	<p>Continued From page 20</p> <p>staff on what to document on what not to document on. We are reconsidering changing the key [legend] because people are missing key things to document on data sheet. I go back and look at credible [computerized notes] and advise staff what they should have put on the data sheet. I review the data collection quarterly, I am doing them now monthly and filing them and addressing problems. After reviewing the data collection sheets for Individual #3's active treatment for communication, medication management and spiritual/cultural activities, OSM # 1 was asked about the zeros and blanks on the data sheets. OSM # 1 stated, "It looks like it's not done."</p> <p>On 08/19/20 at 12:20 p.m. ASM (administrative staff member) # 1, clinical director, ASM # 2, program manager and OSM # 1, 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 neurological and developmental disorder that begins early in childhood and lasts</p>	W 159			

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W 159	Continued From page 21 throughout a person's life. It affects how a person acts and interacts with others, communicates, and learns.) This information was obtained from the website: https://www.nlm.nih.gov/medlineplus/autismspectrumdisorder.html (3) A pattern of eating non-food materials, such as dirt or paper. This information was obtained from the website: https://medlineplus.gov/ency/article/001538.htm (4) A condition in which a person's head size is much smaller than that of others of the same age and sex. This information was obtained from the website: https://medlineplus.gov/ency/article/003272.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	W 159	1. The Program Manager will retrain program staff on implementing and documenting the active treatment programs for community activities, medication management, and spiritual/cultural activities for individual #1, #2, and #3. 2. The Program Manager will retrain program staff on implementing and documenting active treatment programs for communication, recreation, medication management, and spiritual/cultural activities for individual #2. 3. The Program Manager will retrain program staff on implementing and documenting active treatment programs for communication, medication management, and spiritual/cultural activities for individual #3. 4. The Program Manager will retrain Program staff on the implementation and documentation of all individuals' active treatment programs per their ISP.	10/2/2020
W 249	PROGRAM IMPLEMENTATION CFR(s): 483.440(d)(1) As soon as the interdisciplinary team has formulated a client's individual program plan, each client must receive a continuous active treatment program consisting of needed interventions and services in sufficient number and frequency to support the achievement of the objectives identified in the individual program plan. This STANDARD is not met as evidenced by: Based on observation, facility document review	W 249	5. The Program Manager will complete monthly program audits to ensure all individuals' active treatment program are being done and the documentation is being implemented appropriately. 6. The Clinical Director will review/monitor on a quarterly basis the monthly program audits and review the individuals' active treatment implementation and program documentation.	

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W 249	<p>Continued From page 22</p> <p>and staff interview it was determined that the facility staff failed to implement the active treatment program for three of three individuals individuals in the survey sample, Individuals # 1, # 2, and # 3.</p> <p>1. The facility staff failed to implement for Individual # 1's active treatment program for community activities, medication management and spiritual/cultural activities</p> <p>2. The facility staff failed to implement for Individual # 2's active treatment program for communication, recreation, medication management and spiritual/cultural activities.</p> <p>3. The facility staff failed to implement Individual # 3's active treatment program for communication, medication management and spiritual/cultural activities.</p> <p>The findings include:</p> <p>1. The facility staff failed to implement for Individual # 1's active treatment program for community activities, medication management and spiritual/cultural activities</p> <p>Individual # 1 was a 75 year old male, who was admitted to [Name of Group Home] with diagnoses that included but were not limited to: intellectual disability (1), benign prostatic hypertrophy [2], and vitamin D deficiency.</p> <p>The PCP [Person Center Plan] for Individual # 1 dated 12/01/2019 through 11/30/2020 documented, "Desired Outcome: Goal 1: [Individual # 1] will have the opportunity to participate in preferred</p>	W 249			

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W 249	<p>Continued From page 23</p> <p>community activities (i.e Church, Shopping Stores, Social Events, Restaurants, etc.) once a week for 95% of the time for 12 consecutive months by 11/30/20. Support Activities & [and] Instructions: 1. [Individual # 1] will be encouraged to participate in his weekly house meeting to plan his activities for the week ahead. 2. [Individual # 1] will be supported in putting his preferred activity on the white calendar board (i.e church service 10 am Sunday). 3. [Individual # 1] will be provided with appropriate support by staff (i.e. transporting him to outing of his choice, and providing appropriate materials/resources and verbal supports) as needed. 4. [Individual # 1] will receive verbal praises and encouragement before, during and after his community outing activity. 5. [Individual # 1] will have his data collected 1x [time] per week on his data collection sheets. Frequency: Weekly."</p> <p>"Desired Outcome: Goal 2: [Individual # 1] will participate in popping his medicine from his bubble pack every day for at least 90% of the time for 12 consecutive months by 11/30/20. Support Activities & [and] Instructions:</p> <p>1. [Individual # 1] will be reminded that it is time to take his medication. 2. [Individual # 1] will be asked to pop the medicine from his bubble pack. 3. [Individual # 1] will be shown exactly which medicine bubble to pop in to a large medicine cup. 4. [Individual # 1] will be given some verbal and physical supports to pop his bubble pack. 5. [Individual # 1] will be given verbal praises for completing his medication goal. 6. [Individual # 1] will have his data collected one time per day at 8 pm. Frequency: Daily."</p> <p>"Desired Outcome: Goal 10: [Individual # 1] will</p>	W 249			

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W 249	<p>Continued From page 24</p> <p>have the opportunity to participate and attend a spiritual/cultural activity of his choice at least once a month for 100% of the time for 12 consecutive months by 11/30/20. Support Activities & [and] Instructions: 1. [Individual # 1] will be asked if he wants to participate in a spiritual/cultural activity. 2. [Individual # 1] will be shown images (i.e. flyers, pamphlets, brochures etc.) of different spiritual/cultural events that he can choose from. 3. [Individual # 1] will attend the activity that he chooses. 4. [Individual # 1] will be provided supports by staff as needed during the activity. 5. [Individual # 1] will be given praises when he participates in his activity. 6. [Individual # 1] will have his data collected 1 [one] time per month. Frequency: Monthly."</p> <p>The facility's "Data Collection Sheet" for Individual # 1 dated "February 2020" documented, "Desired Outcome: Goal 1: [Individual # 1] will have the opportunity to participate in preferred community activities (i.e Church, Shopping Stores, Social Events, Restaurants, etc.) once a week for 95% of the time for 12 consecutive months by 11/30/20. Frequency: Weekly." Review of data sheet revealed zeros and blanks during the week of 02/20/20 through 02/08/20. Further review of the data sheet documented, "LEGEND: + = support provided. C = Chose not to participate. A = Individual not present. I = Incident. O = Other (not offered)."</p> <p>The facility's "Data Collection Sheet" for Individual # 1 dated "March 2020" documented, "Desired Outcome: Goal 1: [Individual # 1] will have the opportunity to participate in preferred community activities (i.e Church, Shopping Stores, Social Events, Restaurants, etc.) once a week for 95% of the time for 12 consecutive months by</p>	W 249			

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W 249	<p>Continued From page 25</p> <p>11/30/20. Frequency: Weekly." Review of data sheet revealed zeros and blanks during the week of 03/08/20 through 03/14/20, 03/15/20 through 03/21/20 and 03/22/20 through 03/28/20. Further review of the data sheet documented, "LEGEND: + = support provided. C = Chose not to participate. A = Individual not present. I = Incident. O = Other (not offered)."</p> <p>The facility's "Data Collection Sheet" for Individual # 1 dated "May 2020" documented, "Desired Outcome: Goal 2: [Individual # 1] will participate in popping his medicine from his bubble pack every day for at least 90% of the time for 12 consecutive months by 11/30/20. Frequency: Daily." Review of data sheet revealed zeros on 05/22/20, 05/23/20 and 05/23/20. Further review of the data sheet documented, "LEGEND: + = support provided. C = Chose not to participate. A = Individual not present. I = Incident. O = Other (not offered)."</p> <p>The facility's "Data Collection Sheet" for Individual # 1 dated "May 2020" documented, "Desired Outcome: Goal 10: [Individual # 1] will have the opportunity to participate and attend a spiritual/cultural activity of his choice at least once a month for 100% of the time for 12 consecutive months by 11/30/20. Frequency: 1 Time Per Month." Review of data sheet revealed zeros and blanks on 05/01/20 through 05/31/20. Further review of the data sheet documented, "LEGEND: + = support provided. C = Chose not to participate. A = Individual not present. I = Incident. O = Other (not offered)."</p> <p>The facility's "Data Collection Sheet" for Individual # 1 dated "July 2020" documented, "Desired Outcome: Goal 2: [Individual # 1] will participate</p>	W 249		

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W 249	<p>Continued From page 26</p> <p>in popping his medicine from his bubble pack every day for at least 90% of the time for 12 consecutive months by 11/30/20. Frequency: Daily." Review of data sheet revealed zeros and blanks on 07/03/20, 07/04/20, 07/05/20, 07/23/20 and 07/31/20. Further review of the data sheet documented, "LEGEND: + = support provided. C = Chose not to participate. A = Individual not present. I = Incident. O = Other (not offered)."</p> <p>The facility's "Data Collection Sheet" for Individual # 1 dated "August 01, 2020 through August 18, 2020" documented, "Desired Outcome: Goal 2: [Individual # 1] will participate in popping his medicine from his bubble pack every day for at least 90% of the time for 12 consecutive months by 11/30/20. Frequency: Daily." Review of data sheet revealed zeros and blanks on 08/01/20, 08/02/20, 08/07/20 and 08/30/20. Further review of the data sheet documented, "LEGEND: + = support provided. C = Chose not to participate. A = Individual not present. I = Incident. O = Other (not offered)."</p> <p>On 08/19/20 at 11:20 a.m., an interview was conducted with ASM [administrative staff member] # 2, program manager and OSM [other staff member] QIDP [Qualified Intellectual Disabilities Professional]. After reviewing the data collection sheets for Individual #1's active treatment for community activities, medication management and spiritual/cultural activities, ASM # 2 and OSM # 1 were asked about the zeros and blanks on the data sheets. ASM # 2 stated that the zeros indicated that the program was not offered as documented on the legend on the data collection sheets. OSM # 1 stated, "It looks like it's not done."</p>	W 249			

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W 249	<p>Continued From page 27</p> <p>The [Name of Group Home's] policy "4.1 Individual Service Plan (ISP)" documented, "G. ISP Implementation and Consumer Engagement: Implementation of the ISP begins at the time of its development. Components of the plan are fully implemented, with consumer receiving the support, learning environment and active engagement necessary to reach his or her objectives/desired outcomes as defined in the ISP ...All staff working with consumers must be fully engaged in active treatment with the consumer."</p> <p>On 08/19/20 at 12:20 p.m. ASM (administrative staff member) # 1, clinical director, ASM # 2, program manager and OSM # 1, QIDP were made aware of the findings.</p> <p>No further information was provided prior to exit.</p> <p>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://www.report.nih.gov/NIHfactsheets/ViewFactSheet.aspx?csid=100</p> <p>[2] An enlarged prostate. This information was obtained from the website: https://www.nlm.nih.gov/medlineplus/enlargedprostatebph.html</p>	W 249			

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W 249	<p>Continued From page 28</p> <p>2. The facility staff failed to implement for Individual # 2's active treatment program for communication, recreation, medication management and spiritual/cultural activities.</p> <p>Individual # 2 was a 59 year old female, who was admitted to [Name of Group Home] with diagnoses that included but were not limited to: moderate intellectual disability [1], mild cerebral palsy [2], seizures [3], and anxiety [4].</p> <p>The PCP [Person Center Plan] for Individual # 2 dated 12/01/2019 through 11/30/2020 documented,</p> <p>"Desired Outcome: Goal 1: [Individual # 2] will improve her communication with appropriate vocalizations when prompted by staff at least 50% of the time for 12 consecutive months by 11/30/20. Support Activities & [and] Instructions:</p> <ol style="list-style-type: none"> [Individual # 2] will be prompted to use vocalizations that available and comfortable to use. [Individual # 2] will be verbally prompted to vocally respond when asked yes or no questions. [Individual # 2] will be verbally prompted to respond in singing when verbally prompted by staff singing the songs that have call and response structures. [Individual # 2] will receive verbal praise for her participation when she communicates in a safe and healthy manner. [Individual # 2] will have his data collected 1x [time] per day at 7 pm [7:00 p.m.]. Frequency: Daily." <p>"Desired Outcome: RECREATION OUTCOME(s): MULTI-SENSORY: to increase active engagement and effective learning through stimulating her senses; to decrease her need to exhibit Disruptive Outburts. GROSS MOTOR: to</p> 	W 249			

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W 249	<p>Continued From page 29</p> <p>decrease signs/symptoms/complications of Mild Cerebral Palsy, Intermittent Explosive Disorder, mood disorder, Anxiety disorder and to increase quality and quantity of sleep - to increase skin integrity-to decrease need for PT [physical therapy] services." Support Activities & [and] Instructions: Goal: [Individual # 2] participates in multi-sensory activities for 2-5 minutes, 2-3 times per week (8-15 times per month in her home and/or community. Frequency: Twice a week."</p> <p>"Desired Outcome: Goal 3: [Individual # 2] will hold her drink container and drink her liquids using a straw after receiving medications daily for 100% of the time for 12 consecutive months by 11/30/20. Support Activities & [and] Instructions: 1. When it is time for her medication [Individual # 2] will be verbally prompted and physically assisted to the medication room. 2. [Individual # 2] will be given her drink container with a straw to hold tightly [sic] griped in both hands (i.e. cup, water or juice bottle). 3. [Individual # 2] will be verbally prompted to drink all of liquids to help digest her medications. 4. [Individual # 2] will be given verbal praises for completing her medication intake and holding her cup. 5. [Individual # 2] will have his data collected 1x [time] per day at 8 pm [8:00 p.m.]. Frequency: Daily."</p> <p>"Desired Outcome: Goal 10: [Individual # 2] will have the opportunity to participate and attend a spiritual/cultural activity of her choice at least once a month for 100% of the time for 12 consecutive months by 11/30/20. Support Activities & [and] Instructions: 1. [Individual # 2] will be asked if she wants to participate in a spiritual/cultural activity. 2. [Individual # 2] will be shown images (i.e. flyers, pamphlets, brochures</p>	W 249		

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W 249	<p>Continued From page 30</p> <p>etc.) of different spiritual/cultural events that he can choose from. 3. [Individual # 2] will attend the activity that she chooses. 4. [Individual # 2] will be provided supports by staff as needed during the activity. 5. [Individual # 2] will be given praises when he participates in his activity. 6. [Individual # 2] will have his data collected 1 [one] time per month. Frequency: Monthly."</p> <p>The facility's "Data Collection Sheet" for Individual # 2 dated "February 2020" documented, "Desired Outcome: Goal 1: [Individual # 2] will improve her communication with appropriate vocalizations when prompted by staff at least 50% of the time for 12 consecutive months by 11/30/20. Frequency: Daily." Review of data sheet revealed zeros and blanks on 02/01/20, 02/06/20, 02/14/20 and 02/15/20. Further review of the data sheet documented, "LEGEND: + = support provided. C = Chose not to participate. A = Individual not present. I = Incident. O = Other (not offered)."</p> <p>The facility's "Data Collection Sheet" for Individual # 2 dated "February 2020" documented, "Desired Outcome: Goal 2: [Individual # 2] will be supported by staff with following her Recreational Therapy Activities weekly for 25% of the time for 12 consecutive months. Frequency: Twice a week." Review of data sheet revealed zeros and blanks during the week of 02/16/20 through 02/22/20 and 02/23/20 through 02/29/20. Further review of the data sheet documented, "LEGEND: + = support provided. C = Chose not to participate. A = Individual not present. I = Incident. O = Other (not offered)."</p> <p>The facility's "Data Collection Sheet" for Individual # 2 dated "February 2020" documented, "Desired Outcome: Goal 3: [Individual # 2] will</p>	W 249		

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W 249	<p>Continued From page 31</p> <p>hold her drink container and drink her liquids using a straw after receiving medications daily for 100% of the time for 12 consecutive months by 11/30/20. Frequency: Daily." Review of data sheet revealed zeros and blanks on 02/06/20 and 02/09/20. Further review of the data sheet documented, "LEGEND: + = support provided. C = Chose not to participate. A = Individual not present. I = Incident. O = Other (not offered)."</p> <p>The facility's "Data Collection Sheet" for Individual # 1 dated "February, May, June and July 2020" documented, "Desired Outcome: Goal 10: [Individual # 1] will have the opportunity to participate and attend a spiritual/cultural activity of his choice at least once a month for 100% of the time for 12 consecutive months by 11/30/20. Frequency: 1 Time Per Month." Review of data sheet revealed zeros and blanks on 02/01/20 through 02/29/20, 05/01/20 through 05/31/20, 06/01/20 through 06/30/20 and 07/01/20 through 07/31/20. Further review of the data sheet documented, "LEGEND: + = support provided. C = Chose not to participate. A = Individual not present. I = Incident. O = Other (not offered)."</p> <p>The facility's "Data Collection Sheet" for Individual # 2 dated "March 2020" documented, "Desired Outcome: Goal 1: [Individual # 2] will improve her communication with appropriate vocalizations when prompted by staff at least 50% of the time for 12 consecutive months by 11/30/20. Frequency: Daily." Review of data sheet revealed zeros and blanks on 03/01/20, 03/06/20, 03/09/20, 03/10/20, 03/12/20, 02/14/20, 03/15/20, 03/16/20, 03/17/20, 03/21/20 and 03/29/20. Further review of the data sheet documented, "LEGEND: + = support provided. C = Chose not to participate. A = Individual not present. I =</p>	W 249			

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W 249	<p>Continued From page 32</p> <p>Incident. O = Other (not offered)."</p> <p>The facility's "Data Collection Sheet" for Individual # 2 dated "March 2020" documented, "Desired Outcome: Goal 2: [Individual # 2] will be supported by staff with following her Recreational Therapy Activities weekly for 25% of the time for 12 consecutive months. Frequency: Twice a week." Review of data sheet revealed zeros and blanks during the week of 03/08/20 through 03/14/20 and 03/22/20 through 03/28/20. Further review of the data sheet documented, "LEGEND: + = support provided. C = Chose not to participate. A = Individual not present. I = Incident. O = Other (not offered)."</p> <p>The facility's "Data Collection Sheet" for Individual # 2 dated "March 2020" documented, "Desired Outcome: Goal 3: [Individual # 2] will hold her drink container and drink her liquids using a straw after receiving medications daily for 100% of the time for 12 consecutive months by 11/30/20. Frequency: Daily." Review of data sheet revealed zeros and blanks on 03/01/20, 03/11/20 and 03/18/20. Further review of the data sheet documented, "LEGEND: + = support provided. C = Chose not to participate. A = Individual not present. I = Incident. O = Other (not offered)."</p> <p>The facility's "Data Collection Sheet" for Individual # 2 dated "July 2020" documented, "Desired Outcome: Goal 1: [Individual # 2] will improve her communication with appropriate vocalizations when prompted by staff at least 50% of the time for 12 consecutive months by 11/30/20. Frequency: Daily." Review of data sheet revealed zeros and blanks on 07/24/20. Further review of the data sheet documented, "LEGEND: + =</p>	W 249			

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NAME OF PROVIDER OR SUPPLIER NORTH 16TH STREET GRP HOME			STREET ADDRESS, CITY, STATE, ZIP CODE 5563 N 16TH STREET ARLINGTON, VA 22205		
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W 249	<p>Continued From page 33</p> <p>support provided. C = Chose not to participate. A = Individual not present. I = Incident. O = Other (not offered)."</p> <p>On 08/19/20 at 11:20 a.m., an interview was conducted with ASM [administrative staff member] # 2, program manager and OSM [other staff member] QIDP [Qualified Intellectual Disabilities Professional]. After reviewing the data collection sheets for Individual #2's active treatment for communication, recreation, medication management and spiritual/cultural activities, ASM # 2 and OSM # 1 were asked about the zeros and blanks on the data sheets. ASM # 2 stated that the zeros indicated that the program was not offered as documented on the legend on the data collection sheets. OSM # 1 stated, "It looks like it's not done."</p> <p>On 08/19/20 at 12:20 p.m. ASM (administrative staff member) # 1, clinical director, ASM # 2, program manager and OSM # 1, QIDP were made aware of the findings.</p> <p>No further information was provided prior to exit.</p> <p>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://www.report.nih.gov/NIHfactsheets/ViewFactSheet.aspx?csid=100</p>	W 249			

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W 249	<p>Continued From page 34</p> <p>[2] A group of disorders that affect a person's ability to move and to maintain balance and posture. This information was obtained from the website: https://www.nlm.nih.gov/medlineplus/cerebralpalsy.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> <p>[4] Fear. This information was obtained from the website: https://www.nlm.nih.gov/medlineplus/anxiety.html#summary.</p> <p>3. The facility staff failed to implement Individual # 3's active treatment program for communication, medication management and spiritual/cultural activities.</p> <p>Individual # 3 was a 58 year old male, who was admitted to [Name of Group Home] with diagnoses that included but were not limited to: profound intellectual disability [1], autistic disorder [2] PICA [3], microcephaly (4), fear, and gastroesophageal reflux disease [5].</p> <p>The PCP [Person Center Plan] for Individual # 3 dated 12/01/2019 through 11/30/2020 documented, "Desired Outcome: I want to communicate my needs and wants to others effectively. Support Activities & [and] Instructions: 1. [Individual # 3] will use his communication program on his iPad</p>	W 249			

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W 249	<p>Continued From page 35</p> <p>when prompted by his staff daily for 15 minutes a day at least 100% of the time for 3 consecutive months by 09/30/2020. Frequency: Daily."</p> <p>"Desired Outcome: I will pour my Benefiber powder into a cup of water and mix it every morning and evening. Support Activities & [and] Instructions: 1. [Individual # 3] will walk to the medication room when notified by staff that it is time to take his morning or evening medications. 2. [Individual # 3's] Benefiber will be measured by staff so that the appropriate dose of Benefiber will be given. Staff will provide 6-8oz [six to eight ounces] of fluid and then hand over the medication to [Individual # 3]. 3. [Individual # 3] will be given instructions by staff on how to pour the medication from the medication cup into 6-8oz of fluid. Staff will provide supervision and assistance as needed. 4. [Individual # 3] will use a spoon to mix the powder into the water. Staff will provide verbal directions and hand over hand assistance as needed. 5. [Individual # 3] This goal will be met if [Individual # 3] pours his medication (Benefiber) into 6-8 oz of fluid and stirs the medication. 6. [Individual # 3] will be praised by staff if he participates in the goal. 7. [Individual # 3] progress will be documented in Credible by staff. 8. [Individual # 3] is able to independently obtain this goal. Frequency: Daily."</p> <p>"Desired Outcome: [Individual # 3] will engage in a religious activity. Support Activities & [and] Instructions: 1. [Individual # 3] will engage in a religious activity by going to church or engaging in a religious activity for 30 minutes at least 75% of the time for 12 consecutive months by 09/30/2020. 1. [Individual # 3] will be asked what spiritual activity he would like to explore. 2. [Individual # 3] will be presented options that can</p>	W 249			

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W 249	<p>Continued From page 36</p> <p>include sacred music, storytelling, radio broadcasting related to spiritual care, nature walking or star gazing. 3. [Individual # 3] will be given the necessary support to accomplish this goal. 4. [Individual # 3] will meet this goal when staff uses 2-3 prompts every five minutes to keep him engaged in the activity. 5. [Individual # 3] will be given verbal praise at the completion of positive outcome. 6. Successful completion will be documented in Credible. 7. This goal will be met when [Individual # 3] is able to independently [sic] met the goal. Frequency: Weekly."</p> <p>The facility's "Data Collection Sheet" for Individual # 3 dated "February, March, April May July 2020" and August 1, 2020 through August 18, 2020 documented, "Desired Outcome: [Individual # 3] will use his communication program on his iPad when prompted by his staff daily for 15 minutes a day at least 100% of the time for 3 consecutive months by 09/30/2020. Frequency: Daily." Review of data sheet revealed zeros and blanks on 02/01/20 through 02/29/20, 03/01/20 through 03/31/20, 04/01/20 through 04/30/20, 05/01/20 through 05/31/20, 06/01/20 through 06/30/20 and 08/01/20 through 08/18/20. Further review of the data sheet documented, "LEGEND: + = support provided. C = Chose not to participate. A = Individual not present. I = Incident. O = Other (not offered)."</p> <p>The facility's "Data Collection Sheet" for Individual # 3 dated "February, March, April, May, June and July 2020" documented, Support Activities & [and] Instructions: 1. [Individual # 3] will engage in a religious activity by going to church or engaging in a religious activity for 30 minutes at least 75% of the time for 12 consecutive months by 09/30/2020. Frequency: Weekly." Review of</p>	W 249			

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W 249	<p>Continued From page 37</p> <p>data sheet revealed zeros and blanks from 02/23/20 through 02/29/20, 03/01/20 through 03/31/20, 04/01/20 through 04/30/20, 05/01/20 through 05/31/20, 06/01/20 through 06/30/20 and 07/01/20 through 07/31/20.</p> <p>The facility's "Data Collection Sheet" for Individual # 3 dated "February, May, July and August 2020" documented, Support Activities & [and] Instructions: I will pour my Benefiber powder into a cup of water and mix it every morning and evening. Frequency: Daily." Review of data sheet revealed zeros and blanks on 02/17/20, 05/01/20, 05/14/20, 05/18/20 through 05/31/20, 07/03/20 through 07/04/20 and 08/01/20, 08/02/20 and 08/08/20.</p> <p>On 08/19/20 at 11:20 a.m., an interview was conducted with ASM [administrative staff member] # 2, program manager and OSM [other staff member] QIDP [Qualified Intellectual Disabilities Professional]. After reviewing the data collection sheets for Individual #3's active treatment for communication, medication management and spiritual/cultural activities, ASM # 2 and OSM # 1 were asked about the zeros and blanks on the data sheets. ASM # 2 stated that the zeros indicated that the program was not offered as documented on the legend on the data collection sheets. OSM # 1 stated, "It looks like it's not done."</p> <p>On 08/19/20 at 12:20 p.m. ASM (administrative staff member) # 1, clinical director, ASM # 2, program manager and OSM # 1, QIDP were made aware of the findings.</p> <p>No further information was provided prior to exit.</p>	W 249			

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W 249	<p>Continued From page 38</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 neurological and developmental disorder that begins early in childhood and lasts throughout a person's life. It affects how a person acts and interacts with others, communicates, and learns.) This information was obtained from the website: https://www.nlm.nih.gov/medlineplus/autismspectrumdisorder.html.</p> <p>(3) A pattern of eating non-food materials, such as dirt or paper. This information was obtained from the website: https://medlineplus.gov/ency/article/001538.htm.</p> <p>(4) A condition in which a person's head size is much smaller than that of others of the same age and sex. This information was obtained from the website: https://medlineplus.gov/ency/article/003272.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>	W 249		

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