



# ICF/MR BRANCH NEWSLETTER

## Mental Health Licensure and Certification Section

Division of Health Service Regulation  
NC Department of Health and Human Services



May, 2008

Volume 6, Issue 1

**The purpose** of this Newsletter is to provide information and updates on ICF/MR issues in North Carolina. We ask that you pass it on to the homes, facilities and organizations that serve your clients. Additionally, if you have any questions, comments or suggestions, do not hesitate to contact us at: [Jay.Silva@ncmail.net](mailto:Jay.Silva@ncmail.net) or [Denise.Erwin@ncmail.net](mailto:Denise.Erwin@ncmail.net). You may also contact us by calling (919) 855-3795 and asking for an ICF/MR facility consultant or writing to:

ICF/MR Survey Team  
2718 Mail Service Center  
Raleigh, North Carolina 27699-2718

### IN THIS ISSUE

Comments from the Chief  
Stats for July - December 2007  
Deficiency Free Surveys  
Creative Corner Kudos  
General Information

## Comments from the Chief

This past spring, many of you may have been following The News and Observer series on mental health reform. Although ICF/MR facilities were not mentioned, a portion of the focus was on accurate and complete reporting of deaths to the appropriate state agency. The DHSR website is in the process of being updated and revised to be more consistent with the look and content of other divisions of the Department of Health and Human Services. Therefore, it is timely to clarify where to find the death and incident report forms. See the following link: <http://www.ncdhhs.gov/dhsr/mhics/mhforms.html>

The state ICF/MR facilities use the "Death Report Form to DHHS". The private ICF/MR facilities use the "Critical Incident & Death Report Form (Community MH Facilities)". The Division of MH/DD/SAS has developed an electronic tool for death and incident reporting. It has not yet been implemented; however, we will keep folks posted regarding the status. As always, please let me know if you have any questions or concerns about the regulatory and licensure environment that I may be able to respond to in this column.

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## ICF/MR Surveys for North Carolina - Numbers for July through December, 2007

The most frequently cited deficiencies for the second half of calendar year 2007 are:

TAGS	Total Times Cited	TAGS	Total Times Cited
W-104 Governing Body responsible for oversight	24**	W-130 Clients are assured privacy	19
W-154 Incidents must be investigated	21	W-227 IPP contains relevant training	47**
W-247 Opportunities for Client Choice	23	W-249 IPP provided as written	115
W-257 Review and Revision	24	W-263 Programs must have consent prior	23**
W-288 Management of Inappropriate Behavior	35	W-368 Drugs Administered per MD orders	19
W-369 Drugs Administered without error	27	W-382 Drugs secure	19
W-436 Provide/maintain equipment per IPP	21		

The information listed above does not include citations from life safety code (LSC) surveys. (Note: All Wtags may be evaluated and cited by the General Health Survey)

### Notes of Interest Related to Deficiencies:

The following citations have significantly increased in frequency compared to the second half of 2006:

W-104 Governing Body Responsible for Oversight  
 W-227 IPP contains Relevant Training  
 W-263 Programs must have Consent Prior to Implementation  
 W-454 Infection Control

The following citations have decreased (reflecting improvement) when compared to the second half of 2006:

W-189 Staff Training  
 W-240 Supporting Client Independence  
 W-257 IPP Revision when Failing to Make Progress  
 W-350 Dental Services  
 W-436 Provide/maintain Equipment per IPP

The following facilities had deficiency-free annual recertification surveys from July through December, 2007:

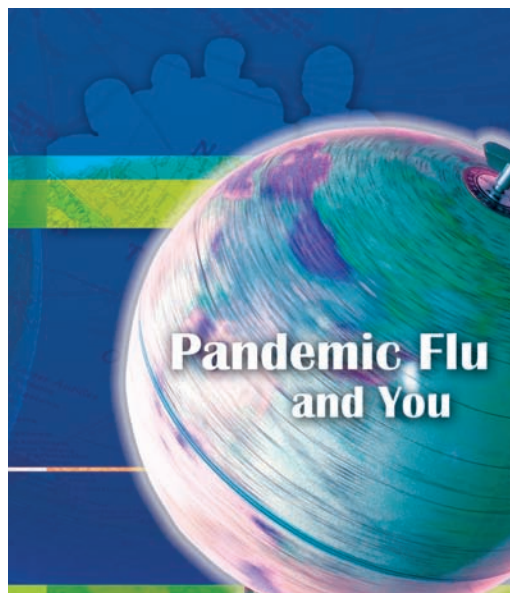
Brookwood Group Home	Ellendale Group Home	Franklin Boulevard Group Home
Greenville Loop Group Home	Life Inc. Lavenham Group Home	Life Inc. Luke Street Group Home
Mantle Court Group Home	Norwood Avenue Group Home	Oakdale Group Home
Queen's Pond I & II Group Home	SciBurke ICF/MR Group Home	SCI-Duplin Group Home
Smoky ICF/MR Group Home	Springdale Loop Group Home	Voca Oak Drive Group Home
Webster Group Home		

If you did receive a deficiency-free annual survey (General and Life Safety) and we failed to identify your facility, please notify us at [joyce.cooper@ncmail.net](mailto:joyce.cooper@ncmail.net) for inclusion in the next edition of the newsletter.

## General Information

\*\*Change to Pandemic Plan information disseminated in the last ICF/MR newsletter – NC Department of Public Health has determined that all North Carolina facilities, regardless of type, will follow the same plan for determining facility access, including residents in ICF/MR facilities. Disregard the information that was included in the last ICF/MR newsletter. For further information refer to: Selected Resources

1. The North Carolina Pandemic Influenza Preparedness and Response Plan can be found at [www.ncpublichealth.com](http://www.ncpublichealth.com)
2. International preparedness efforts as well as situation updates on human infections with avian influenza can be found at the World Health Organization website <http://www.who.int/en/>
3. Information on influenza, including avian influenza for healthcare providers and the public can be found at the Centers for Disease Control and Prevention website <http://www.pandemicflu.gov>.



## Miscellaneous

Specific additional information about ICF/MR programs can be found at the CMS ICF/MR Home Page: <http://cms.hhs.gov/medicaid/icfmr/default.asp>. All regulations and manuals are on-line and available on CD's.

Providers: Remember the Complaint section contact information is: (800) 624-3004 or (919) 733-8499.

You may also Fax the section at (919) 715-7724. We hope that you have found all the information we have provided helpful and educational. The ICF/MR Branch has a common goal with the various ICF/MR facilities in North Carolina to ensure the clients have the best life experience available to them.

Please forward any questions/ comments to [michele.brandow@ncmail.net](mailto:michele.brandow@ncmail.net) or [joyce.cooper@ncmail.net](mailto:joyce.cooper@ncmail.net).



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## Creative Corner Kudos

This part of the newsletter highlights a facility's creativity in providing services for individuals. The intent is not to outline "best practices," but to acknowledge unique events/services/approaches provided to consumers in ICF/MR facilities.

1. Wilhelm Place has implemented a quiz format to reinforce client program plans for staff development. Each question is designed to be informative and fun. Some sample questions are:

- Name the times that you should prompt {Client} to use his/her picture schedule?
- If [client] says he/she needs to use the restroom, what would you do?
- Should [client] close the microwave door and press "start" at all meals?
- Staff should use sign language and gestures to communicate with [client] throughout his/her daily schedule? TRUE or FALSE
- How much should be on a maroon colored spoon?
- What is [client's] food consistency? [Client's] plate can only be on the table for him to eat? TRUE or FALSE
- Staff should wipe [client's] mouth instead of client wiping his/her mouth? TRUE or FALSE
- The QMRP reported a positive response from staff to this approach and added they all had a great time participating.

2. ARC Services, Inc. are encouraging their direct care staff to take on-line courses offered by the "College of Direct Support". Additional information can be obtained from Regional Director, Melissa Hall at [mhall@arcofstanlinc.org](mailto:mhall@arcofstanlinc.org). The program website is: [www.collegeofdirectsupport.com](http://www.collegeofdirectsupport.com).

3. ComServ, Inc. has announced they have 2 ICF/MR residents that are active members of a local Women's Club. One is the elected Vice-President for the third consecutive year.

4. A Jack Wall Group Home in Albemarle put client's photos on a DVD and had the DVD available as a choice for leisure activities. The DVD included pictures of families, group home activities and outings.