Cynthia A. Granger

PLAN OF CORRECTION

Accepted on 8/31/23

Facility Name: **Covenant Woods of Gardendale.** Facility ID#: **P3720**

Survey Exit Date: **8/16/2023** Administrator: **Kelley Herring**

For each deficiency please provide a plan of correction using the following format.

Deficiency Number: **420-5-20-.05 (3) (h) Care of Residents—Tag A 508.** The Facility failed to report a reportable incident to the Department's Online Reporting System within 24 hours of the incident.

1. Specific corrective action taken or to be taken in response to each resident or example identified in the statement of deficiencies.

   On the day of the survey, the Administrator, the Medical Quality Assurance Manager and the Managing Partner thoroughly discussed the situation and reviewed the conditions that allowed for this reporting failure. They then reviewed all of the specific situations that require reports to be made. Additionally, a listing of all reportable incidents was posted in the nurses station and reviewed with the nurses.

2. Specific steps taken or to be taken to identify other residents or concerns not identified by the survey team who may have problems similar to those of the residents or concerns listed in each example. Include specific timetables and identification of responsible facility staff.

   During the aforementioned conversation, the Administrator and the Medical Quality Assurance Manager concluded that the conditions and situation surrounding this particular incident were unique to this Resident and that there were no other incidents that had been unreported.

3. Measures or systemic changes made or to be made to ensure that the same deficiency will not recur in the facility. Include timetables for corrections and the persons or positions responsible.

   All medical personnel at Covenant were reminded of the situations that require incident reporting on August 30th 2023.

4. Explain how you will monitor your proposed corrective actions to ensure that they are implemented and that the corrective actions adequately address the identified problems and will ensure continued effectiveness. Include staff positions assigned to accomplish the monitoring, the frequency and method by which the monitoring will take place and where the documentation will be maintained.

   The Administrator will review all incidents as they are investigated and ensure that reports are properly made.

Submitted:

Paul Roberts

Paul Roberts, Managing Partner

Kelley Herring RN/ED

Kelley Herring, RN Administrator

10/11/2021