Theresa Hamrick 12/30/2024 ACCEPTED

chg

Facility Name: Summer Village Camellia Place

Facility Identification Number: P4101

Name of Administrator: Tiffany Hornsby

Survey Exit Date: 11/21/2024

Subject: Plan of Correction

A401 420-5-20-.04 (1)(2) Personnel

- ED/Administrator / or designee Daily review of staffing schedules (Monday-Friday and Friday reviewing schedule for the upcoming weekend) to ensure appropriate staffing is in place to meet ADPH guidelines. Weekly job fairs for 4 weeks and then monthly as needed to fill open positions. Job fairs will be held, beginning on December 11, 2024. Reviewed daily by ED, Administrator, or designee. Contract has been secured with staffing agency for shifts not covered

A504 420-5-20-.05 (3)(d) Records and Reports

- Most recent inspection has been placed in a binder, clearly labeled, and placed at the front desk in a visible location for public review without needing to request access to it. Educate concierge associates to ensure that it remains visible each day.

A508 420-5-20-.05 (3)(h) Records and Reports

- On November 25, the administrator started providing education to community leaders about the importance of timely reporting. This training will continue to emphasize the proper steps to take when reporting an incident and the significance of prompt reporting. The Executive Director (ED), administrator, DOW or designee will review incidents promptly and ensure they are reported to (ADPH) within the required timeframe.
- Administrator and ED will register for an AL Regulatory review course by January 15, 2025

A604 420-5-20-.06 (3)(a)(b)(c)(d)(e) Care of Residents

- As of November 21, 2024, geriatric depression screening is available and will be completed for every pre-admission assessment. Review of charts will be completed by ED, Administrator, and DOW to ensure geriatric depression screening is completed.
- DOW will review and ensure all residents have a monthly assessment completed each month. ED and Administrator or designee will review monthly assessments to ensure completion.

A606 420-5-20-.06 (3)(g) Care of Residents

- Assessment of RI#1 was completed by DOW and a 30-day discharge notice was provided to the family member of RI#1. Assessments of all current residents have been completed by DOW to ensure that all residents meet eligibility requirements to remain in the facility. Education of staff has been completed to review proper reporting of behaviors and changes in residents.

A611 420-5-20-.06 (4)(a)(b) Care of Residents

- DOW or designee is currently reviewing and updating all resident care plans to ensure they are individualized by each resident's needs. Once completed, DOW or designee will educate staff on how to read and interpret each resident care plan to ensure staff are able to meet the needs of each resident.

A621 420-5-20-.06 (9)(b) Care of Residents

- Assessment of RI#1 was completed by DOW and a 30-day discharge notice was provided to the family member of RI#1. Assessments of all current residents have been completed by DOW to ensure that all residents meet eligibility requirements to remain in the facility. Education of staff has been completed to review proper reporting of behaviors and changes in residents.

A1101 420-5-20-.11 (1)

- Education has been completed with staff to ensure they understand they need to check and sign off on all fire extinguishers monthly. ED and Administrator will monitor to ensure compliance.
- Fire drills were conducted on Friday, December 13, 2024, and will continue to be conducted monthly per ADPH guidelines. Fire drills will be documented in TELS and signed off/reviewed by ED and/or Administrator to ensure completion.

All monitoring and education documentation will be kept in a binder in the Administrator and ED's offices.

Tiffany Hornsby