Theresa Hawkins

Approved 4/16/25

Acts
Westminster Village
Where Loving-Kindness Lives

Westminster Village
500 Spanish Fort Boulevard
Spanish Fort, AL 36527

PHONE 251 626 2900
FAX 800 843 3740

ActsRetirement.org

April 10, 2025

Facility name: OakBridge Terrace at Westminster Village

Facility identification: D0201

Name of Administrator: GloryAna Webb

Survey Exit Date: 3/27/2025

1. A 402

2. Employees #1, #2, #3, #5 identified as not having Alabama Department of Public Health Nurse Aide Abuse Registry prior to hire had abuse Registry completed by 4/8/2025.

3. Audit completed of current employee files to include Alabama Department of Public Health Nurse Aide Abuse Registry prior to hire by Director of Assisted living by 4/8/2025.

4. Education completed with Human Resource Coordinator by Administrator on requirement of Nurse Aide Abuse Registry check prior to hire by 4/11/2025. Weekly audits completed by Director of Assisted Living/Designee to audit any new hire to include Nurse Aide Abuse Registry check prior to hire.

5. Audits will be conducted by Director of Assisted Living/Designee weekly for 4 weeks and monthly for 3 months. The results of the audits will be presented to the QAPI committee for review and further recommendations monthly for 3 months and as deemed necessary.

1. A 403

2. Employment application for employees identified, #1, #2, #3, #5 as missing were completed by 4/11/2025.

3. Current employee files audited by Director of Assisted living to include new hire application by 4/11/2025.

4. Education completed by Executive Director to Administrator and Director of Assisted Living to keep initial application of new hires in employee files by 4/11/2025. Weekly audits completed by Director of Assisted living on new hire applications to include application.

5. Audits will be conducted by Director of Assisted Living/Designee weekly for 4 weeks and monthly for 3 months. The results of the audits will be presented to the QAPI committee for review and further recommendations monthly for 3 months and as deemed necessary.

1. A 506

2. Resident #1 and #3 had inventory of personal affects assessments completed by 4/11/2025.

3. Current residents audited by Director of Assisted Living/Designee of current resident charts to include admission assessment of personal inventory affects assessment by 4/11/2025.

4. Education completed by Administrator/Designee to current nurses on admission assessment policy requirements by 4/11/2025. Weekly audits will be conducted by Director of Assisted living on new admission charts.

5. Audits will be conducted by Director of Assisted Living/Designee weekly for 4 weeks and monthly for 3 months. The results of the audits will be presented to the QAPI committee for review and further recommendations monthly for 3 months and as deemed necessary.

1. A 507

2. Resident #1, #2, #3 record completed to include preference of hospital, nursing home, and funeral home by Directory of Assisted Living by 4/11/2025.

3. Current resident preferences audited to include personal preference of hospital, nursing home and funeral by Director of Assisted Living by 4/11/2025.

4. Education completed by Administrator/Designee to current nurses on admission information to include preference of hospital, nursing home, and funeral home by 4/11/2025. Weekly audits will be conducted by Director of Assist Living on new admission charts.

5. Audits will be conducted by Director of Assisted Living/Designee weekly for 4 weeks and monthly for 3 months. The results of the audits will be presented to the QAPI committee for review and further recommendations monthly for 3 months and as deemed necessary.

1. A 602

2. Annual physician examination scheduled for resident #3 on updated form to include required information and title of visit. Annual physician examination scheduled to include required information on updated form for resident #1, #2, and #3 by Director of Assisted Living by 4/11/2025.

3. Current residents charts audited for updated physician examinations by Director of Assisted living/Designee by 4/11/2025.

4. Education provided to current nurses by Administrator/Designee of updated admission/annual examination form to include required items by 4/11/2025. Weekly audits conducted by Director of Assisted Living/Designee on new resident

5. Audits will be conducted by Director of Assisted Living/Designee weekly for 4 weeks and monthly for 3 months. The results of the audits will be presented to the QAPI committee for review and further recommendations monthly for 3 months and as deemed necessary.

1. A 611

2. Resident #1 service plan was updated to include significant diagnosis and care plan of visual deficit by Director of Assisted Living on 4/1/2025.

3. Current resident service plans were audited and updated with significant diagnosis listed on service plans by Director of Assisted living on 4/4 /2025.

4. Education completed with Director of Assisted Living by Administrator on requirement of significant diagnosis and corresponding care plans for diagnosis on service plans by 4/11/2025. Weekly audits completed by Director of Assisted living/Designee of changes made to service plans.

5. Audits will be conducted by Director of Assisted Living/Designee weekly for 4 weeks and monthly for 3 months. The results of the audits will be presented to the QAPI committee for review and further recommendations monthly for 3 months and as deemed necessary.

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GloryAna Webb, Administrator

Date: 4/10/25