POC accepted on 11/7/24

To Black chg

HARTFORD RETIREMENT VILLAGE
LICENSED ASSISTED LIVING

IDENTIFICATION# D3101

ADMINISTRATOR: GLORIA JANE SHEPARD

SURVEY EXIT DATE: 10/09/2024

Gloria J. Shepard
11/7/24

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HARTFORD RETIREMENT VILLAGE

A611- In reference to June 11, 2024 and June 12, 2024, R1#1 care plan has been revised to reflect the fall and intervention.

In reference to the Monthly Wellness Review dated 7/30/24, R1#1 had a doctor's appointment and while at the doctor's office, the resident stated she was having chest pain. The family stated she was sent to the ER for evaluation and that all her labs were good but she was admitted for observation. R1#1 has never complained with chest pain before or since that day. The chest pain recorded on the care plan was a possible side effect of one of her diagnoses.

The plan of care of R1#1 has been updated and E1#3, E1#1 and/or E1#2 will follow the care plan and update monthly.

The new care plan has a fall addendum and a medication addendum added. These addendums will be added to the end of the care plan if applicable.

A number system has been put in place to match the diagnosis with symptoms and interventions.

A Review of Care Plans sheet has been made. It will reflect the update of all current care plans. This will be done by E1#3 and reviewed by E1#1 and/or E1#2. This update/review will be done for 6 months to ensure care plans are updated in a timely manner and reflect the current status of residents. This sheet will be filed in State Survey Chart 2024 and will begin in November 2024.

A611 - Per monthly wellness review dated February 3, 2024, the new care plan has been updated to reflect R1#6 fall and interventions. On May 22, 2024, care plan is updated and infected right toe has been added to diagnosis section on care plan. Services and interventions on care plan was updated to reflect the diagnosis. On June 25, 2024, R1#6 had a rash on her mouth. Care plan was updated to reflect this in diagnosis section and services and interventions was updated to reflect the diagnosis. A new Care Plan Addendum Medication sheet was added to reflect a short-term medication that was used for the diagnosis of rash on mouth.

The plan of care of R1#6 has been updated and E1#3, E1#1 and/or E1#2 will follow the care plan and update monthly.

A number system has been put in place to match the diagnosis with symptoms and interventions.

A Review of Care Plans sheet has been made. It will reflect the update of all current care plans. This will be done by E1#3 and reviewed by E1#1 and/or E1#2. This update/review will be done for 6 months to ensure care plans are updated in a timely manner and reflect the current status of residents. This sheet will be filed in State Survey Chart 2024 and will begin in November 2024.

A613 – During the survey, surveyor found Ozempic in R1#4 refrigerator. When her recent MPOC was filed out the doctor did not put as previous order that it was to be kept at bedside. A new form has been made for corrective action. It is called Bedside Order Form. This form will be signed by the doctor and the resident and will stipulate that the resident knows they have to keep their rooms locked while they are out.

The Bedside Order Form will be a standard form to use with all residents if applicable. E1#3, E1#1 and/or E1#2 will be responsible for filling out the form, faxing it to the doctor, making changes on the mar, and reminding the resident that his/her room must be locked if they are out.

E1#3, E1#5, E1#1, and/or E1#2 will check the mars on a monthly bases to see if the bedside orders match with physician order. A monthly Bedside Check Off Sheet will be made and signed off by E1#3 for 6 months to be sure this has become a routine. This sheet will start November 1, 2024. If meds are no longer listed as a bedside order, the medication will be removed from the residents' room and put in med carts until changes can be made if needed. The Bedside Check Off Sheet will be filed in the State Survey Chart 2024.

A702 – During the survey, surveyor witnessed RCAs passing out plates with no apron. 1st and 2nd shift RCA employees were retrained on Employees Cleanliness in Food Service in Rules and Regulations. A sign off sheet was signed by employees and will be filed in State Survey Chart 2024.

Aprons are under the counter where coffee pot is located. A sign will be put temporarily on the cabinet to remind staff of where they are.

A new form will be added to our Training Manual under Food Safety & Sanitation. A copy of this will be placed in the State Survey Chart 2024.

A1002 – During the survey, the surveyor found a laundry room door unlocked. Both laundry room doors and storage room door should be locked when unoccupied. E1#1 and E1#2 purchased new door locks that will self-lock from the outside but not the inside. These locks will be installed the week of Oct. 23th 2024.

As some residents wash their own clothes, they have been instructed that the laundry doors must be locked when no one is in there. A sheet has been made where they have been instructed of this rule and will be signed by the resident and filed in their chart. All floor staff have been instructed to keep laundry doors locked and must open laundry doors for residents who wish to wash their clothes.

A check off sheet will be made for the laundry rooms and supply closet. They will be checked 3 times a week for 4 weeks to ensure locks are working properly. This will start the week of Oct 28, 2024, and will be checked by E1#1 or E1#2. This check off sheet will be filed in the State Survey Chart 2024.

A1203 – Request for new cabinets have been presented to the board on 10/17/2024. 2-3 estimates are being obtained for cabinets and will be purchased for the kitchen. Pictures will be taken when new cabinets are installed. Pictures will be put in the State Survey Chart 2024. Estimated time of installment is 6 months.