

Alabama Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>P3720</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>10/08/2025</b>
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NAME OF PROVIDER OR SUPPLIER  <b>COVENANT WOODS OF GARDENDALE</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>1411 THOMPSON CIRCLE GARDENDALE, AL 35071</b>
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A 000	<p><b>Initial Comments</b></p> <p>On October 8, 2025, an unannounced licensure survey was conducted for this 32 bed Speciality Care Assisted Living Facility (SCALF) with a census of 27.</p> <p>No complaints were investigated during this survey.</p> <p>Deficiencies were cited during this survey for failure to operate in accordance with the Rules of the Alabama State Board of Health (SBOH), Alabama Department of Public Health (ADPH), Chapter 420-5-20, Alabama Administrative Code, Speciality Care Assisted Living Facilities. The deficient practices resulted in the potential for harm to all residents and requires a plan of correction.</p>	A 000		
A 604	<p>420-5-20-.06 (3) (a) (b) (c) (d) (e) Care of Residents.</p> <p>(3) Health Supervision.</p> <p>(a) Initial Assessment. No more than 30 days prior to admission, the facility RN or care coordinator shall screen prospective residents for eligibility for admission into the specialty care assisted living facility. The screening shall include a clinical history, a mental status examination to include aphasia screening, a geriatric depression screen, a physical self-maintenance screen, and a behavior screen.</p> <p>Appendix A herein, contains the Physical Self Maintenance Scale (PSMS) form and the Behavior Screening form. These forms shall be completed to screen physical functioning and behaviors. The PSMS and Behavior Screen assessments shall be completed by the RN or</p>	A 604		

Health Care Facilities  
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE \_\_\_\_\_ TITLE \_\_\_\_\_ (X6) DATE \_\_\_\_\_

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A 604	<p>Continued From page 1</p> <p>care coordinator upon admission, annually, and when there is a change in the resident's status.</p> <p>The facility RN shall perform a comprehensive assessment of each prospective resident for facility eligibility. This assessment shall document identified care needs and serve as a baseline for the RN plan of care and future assessments.</p> <p>(b) Monthly Assessments. The RN shall assess each resident monthly and more often when necessary to identify changes in the resident's health status. The monthly assessment shall include a review of monthly weights, falls, incidents, elopements, behavioral symptoms, medications, changes in resident status, and appropriateness of the resident's plan of care.</p> <p>(c) Comprehensive Assessment. The facility RN shall perform a comprehensive assessment and communicate with the resident's attending physician and with the resident's sponsor or responsible family member when a decline in health status or behavior occurs, or if the resident develops any of the following problems:</p> <p>1. Weight loss:</p> <p>(i) Each month, the facility shall accurately weigh and record the weight of each resident.</p> <p>(ii) A significant weight loss is defined as a five percent or greater weight loss in a period of one month or less, or a seven and a half percent or greater weight loss in a period of 3 months or less, or a 10 percent or greater weight loss in a</p>	A 604		

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A 604	<p>Continued From page 2</p> <p>period of 6 months or less. Any weight loss shall be considered to be an unplanned weight loss unless the affected resident has been placed on a restricted calorie diet specifically for the purpose of reducing the resident's weight, and such diet has been approved by the resident's attending physician.</p> <p>2. Falls (two or more falls within a 30 day period).</p> <p>3. Elopement.</p> <p>4. Any sign and symptom of adverse drug reaction, interaction or over sedation, or circumstances which contraindicate medications that have been prescribed for the resident.</p> <p>5. Unmanageable, combative, or potentially harmful behavior(s).</p> <p>6. Any accident with injury.</p> <p>(d) Focused Assessments. The RN or LPN shall conduct focused assessments when necessary to identify changes in resident status.</p> <p>(e) Any change in resident status requires immediate documentation and implementation of interventions or reassessment of existing interventions.</p> <p>This Rule is not met as evidenced by: Based on observation, record review and interview the facility failed to perform an initial mental status examination and aphasia screen as required.</p>	A 604		

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A 604	Continued From page 3  Findings:  On the afternoon of October 8, 2025 the surveyor observed that in the sample of ten residents' records, the facility failed to perform the mental examination and aphasia screen on one resident. Resident Identifier (RI)#6 was admitted to the facility on April 14, 2024 with diagnoses that included diabetes mellitus type 2, hyperlipidemia, history of deep vein thrombosis, hypertension, osteoporosis and hypothyroidism. During an interview with Employee Identifier (EI)#1 and EI#2 on the afternoon of October 8, 2025, neither EI#1 nor EI#2 were able to produce documentation that the evaluations were performed. EI#1 stated that it was missed in the process of admission and was omitted. EI#1 stated that the admission was before she had changed the process of review prior to EI#1 being made administrator.	A 604		
A1001	420-5-20-.10 (1) Sanitation and Housekeeping.  (1) Sanitation.  (a) Water Supply.  1. If at all possible, all water shall be obtained from a public water supply. If it is impossible to connect to a public water system, the private water supply shall meet the approval of the local County Health Department.  2. Water under pressure of not less than 15 pounds per square inch shall be piped within the building to all sinks, toilets, lavatories, tubs, showers, and other fixtures requiring water. Tubs, showers, sinks, lavatories, and other fixtures used by residents shall have hot water	A1001		

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A1001	<p>Continued From page 4</p> <p>supplied. Hot water accessible to residents shall in no case exceed 110 degrees Fahrenheit.</p> <p>(b) Disposal of Liquid and Human Wastes.</p> <p>1. There shall be installed within the building a properly designed waste disposal system, connecting to all fixtures to which water under pressure is piped.</p> <p>2. All liquid and human waste, including floor wash water and liquid waste from refrigerators, shall be disposed through trapped drains into a public sewer in localities where such system is available.</p> <p>3. In localities where a public sanitary sewer is not available, liquid and human waste shall be disposed through trapped drains into a sewage disposal system approved by the local County Health Department. The sewage disposal system shall be of a size and capacity based on the number of residents and personnel housed and employed in the institution. Where the sewage disposal system is installed at an existing facility prior to granting of a license, it shall be inspected and approved by the local County Health Department.</p> <p>(c) Premises. The premises shall be kept neat and clean. The property shall be free of rubbish, weeds, ponded water, or other conditions, which may create a health, safety, or sanitation hazard.</p> <p>(d) Control of Insects, Rodents, and other Pests. Each facility shall be kept free of ants, flies, roaches, rodents, and other pests.</p>	A1001		

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A1001	<p>Continued From page 5</p> <p>Proper and lawful methods for their eradication or control shall be used. Droppings shall be evidence of infestation by pests.</p> <p>(e) Toilet Room Cleanliness. Floors, walls, ceilings, and fixtures of all toilet rooms shall be kept clean and free of objectionable odors. These rooms shall be kept free of an accumulation of rubbish, cleaning supplies, toiletry articles. The use of a common towel and common bar soap is prohibited.</p> <p>(f) Garbage Disposal.</p> <p>1. Garbage must be kept in water-tight suitable containers with tight-fitting covers. Garbage containers must be emptied at frequent intervals and shall be thoroughly cleaned and aired before using again.</p> <p>2. Garbage and waste shall be disposed of in accordance with local and state regulations.</p> <p>(g) Control of Odors. The facility shall be free of objectionable odors.</p> <p>This Rule is not met as evidenced by: Based on observation and interview, the facility failed to ensure hot water accessible to residents was within the acceptable range.</p> <p>Findings:</p> <p>On the morning of October 7, 2025 during a tour of the facility beauty shop, the hot water temperature of the coiffure sink was found to be 113.2 degrees Fahrenheit. EI#1 stated that the</p>	A1001		

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A1001	Continued From page 6  water temperature was too high and would have maintenance adjust it to below 110 degree Fahrenheit. On recheck later that afternoon, the hot water temperature had been adjusted to within proper temperature range.  GREGORY ZEITLIN, REGISTERED NURSE	A1001		