4/11/24 Theresa Garcia

"Responses to the cited deficiencies do not constitute an admission or agreement by the provider of the truth of the facts alleged or conclusions set forth in the Statement of Deficiencies. The Plan of Correction is prepared solely as a matter of compliance with Federal and State Law."

Facility Name: Crowne Place Assisted Living
Facility Identification Number: D4902
Name of Administrator: Amber Detamore
Survey Exit Date: 3/28/2024

Plan of Correction

1. Cited deficiency number from the statement of deficiency.
   420-5-4-.06 (7) (k) (l) (m) (n) (o) Care of Residents

2. Plan of Correction must specify the corrective action that you will take in response to each resident or example identified in the statement of deficiencies.
   On 3/28/2024, RI#1 received a lock box for medication storage. RI#1 was educated on 3/28/2024 to store the medications in the provided lock box or ensure the apartment is always locked when RI#1 is not present to supervise the medications.

3. Plan of Correction must explain the steps your facility will take 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 staff are helpful.
   All residents that self-administer medications have been audited to ensure the medications are all locked when not supervised by the resident and no other issues were noted.

4. The plan of correction must describe the measures you have put into place or the systemic changes you have made, or both, to ensure the same deficiency will not recur in your facility.
   The RN Manager will monitor all residents who self-administer their medications monthly to ensure all medications are stored properly and secured when the residents are not present to supervise the medications.

5. Plan of Correction must explain how you will monitor your proposed corrective actions to ensure that they are actually implemented; that the corrective actions adequately address the identified problems; and that the corrective actions will continue to be effective. Identify positions of staff members you have assigned to accomplish this monitoring; when and how often the monitoring will take place; and where documentation of the monitoring will be kept.
   The RN Manager and/or designee will monitor all residents that self-administer monthly to ensure they are keeping their medications secured at all times. Any new residents that are approved to self-administer will be educated and monitored monthly. This will be documented in the residents' monthly assessment. The Administrator will also monitor these monthly to ensure compliance. If any non-compliance is noted, the Administrator

will conduct additional education and continued monitoring.

1. Cited deficiency number from the statement of deficiency.
   420-5-4-.07 (3) Food Service

2. Plan of Correction must specify the corrective action that you will take in response to each resident or example identified in the statement of deficiencies.
   On 3/29/2024, all missing non-perishable items were ordered from the food supplier. On 4/4/2024, all food items were delivered and stored properly in the designated emergency food supply area.

3. Plan of Correction must explain the steps your facility will take 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 staff are helpful.
   All Dietary management have been in-serviced on the inventory of the Three-Day Disaster Menu and ensuring the inventory is always kept current.

4. The plan of correction must describe the measures you have put into place or the systemic changes you have made, or both, to ensure the same deficiency will not recur in your facility.
   The Dietary Manager or Designee will check the emergency food supply monthly to ensure adequate supply remains in storage and ensure all food is within proper date range.

5. Plan of Correction must explain how you will monitor your proposed corrective actions to ensure that they are actually implemented; that the corrective actions adequately address the identified problems; and that the corrective actions will continue to be effective. Identify positions of staff members you have assigned to accomplish this monitoring; when and how often the monitoring will take place; and where documentation of the monitoring will be kept.
   The Dietary Manager will monitor the emergency food inventory monthly as part of their monthly duties. The Administrator will also monitor these monthly to ensure compliance. If any non-compliance is noted, the Administrator will conduct additional education and continued monitoring.

Signature: Amber N. DeHamer, Administrator **Date:** 4/11/2024