POC Accepted
November 1, 2022
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Plan of Correction – The Gables Assisted Living at Charlton Place

Gables at Charlton Place

D0108

Elise Beckham, LNHA, ALA

10/13/2022

This serves as the allegation of compliance for The Gables Assisted Living. We assert that all corrections described on this Plan of Correction have been implemented. In regards to the specific deficiencies, we have outlined our corrective actions and continued interventions to assure compliance with regulations and our plans of action. The staff of The Gables Assisted Living is committed to delivering high quality healthcare to its residents to obtain their highest level of physical, mental and psychosocial functioning. We respectfully submit that The Gables Assisted Living is in substantial compliance with regulations upon resurvey. The statements made on the Plan of Correction are not an admission to and do not constitute an agreement with the alleged deficiencies. The Gables Assisted Living has completed the following interventions as a result of the findings from survey exiting on 10-13-2022.

A 402

- All Assisted Living staff were audited by HR/Payroll Clerk to ensure that all employees had TB screenings on file and were up to date on October 28, 2022.
- EI#1, EI#2, EI#7, EI#9 and EI#10 all have updated TB screenings and statement from the physician that the employee is free from infectious diseases on October 28, 2022.
- All Assisted Living staff were audited by HR/Payroll Clerk on October 28, 2022 to ensure that the statement from the physician that the employee is free from infectious diseases was documented and placed in the employee file.
- Prior to hire and resident contact, the facility will ensure that new employees have a documented TB screening on file and a statement signed by the physician stating that the employee is free from infectious diseases.
- HR/Payroll Clerk and/or designee will complete an audit of 2 employees weekly for 12 weeks to ensure that the TB screening and the statement free of infectious diseases are on file.

A 403

- All Assisted Living staff were audited by HR/Payroll Clerk to ensure that all employees personnel records are complete to include date of resident contact on October 28, 2022.
- EI#1, EI#2, EI#7, EI#8, EI#9 and EI#10 personnel record were updated to include date of resident contact on October 24, 2022.
- The facility will ensure that the date of resident contact is documented in the employee's personnel file.
- HR/Payroll Clerk and/or designee will complete an audit of 2 employees weekly for 12 weeks to ensure that the date of resident contact is documented in the personnel file.

A 405

- All Assisted Living staff were educated on special needs, to include diabetes mellitus on October 28, 2022.
- All Assisted Living staff were audited to ensure that all employee files included special needs, to include diabetes mellitus on October 28, 2022.
- The facility will ensure that all staff prior to contact with residents are educated on special needs, to include diabetes mellitus.
- Administrator and/or designee will complete an audit of 2 employees weekly for 12 weeks to ensure that the employees have the documented education to include special needs.

A 508

- Administrator was in-serviced by Regional Vice President on 10/25/2022 on reporting an outbreak of a contagious disease to the Assisted Living Department's Online Incident Reporting System (ORIS) within 24 hours of a positive diagnosis of COVID-19.
- The facility will ensure that all reportable events are reported to ORIS within 24 hours.
- Administrator and/or designee will complete an audit to ensure that any reportable events are entered in ORIS weekly for 12 weeks.

A 601

- RI#3 received order for Oxygen therapy on October 12, 2022.
- An audit of all residents was completed to ensure that a physician's order is present for any residents with special needs such as oxygen on October 26, 2022.
- The facility will ensure that a physician's order is obtained for all residents with special needs, such as oxygen therapy.
- Administrator and/or designee will complete an audit of 2 residents weekly for 12 weeks to ensure that a physician's order has been received.

A 602

- RI#3 received a portable chest x-ray on October 12, 2022. No definitive radiographic evidence of TB was noted on the Radiology Report.
- RI#2 went to physician on October 19, 2022 and an updated medical plan of care was received by the facility on October 19, 2022.
- An audit was completed by Administrator and/or designee on all resident's medical plan of care to ensure that vitals and weight was documented, a chest x-ray or TB skin test was documented on the medical plan of care with any supporting documentation, and all residents had an up-to-date medical plan of care in their chart.
- Administrator and/or designee will audit 2 residents weekly for 12 weeks to ensure that vitals and weights are documented on the medical plan of care, a chest x-ray or TB skin test is documented on the medical plan of care with supporting documentation and the residents have an up-to-date medical plan of care in the chart.

A 604

- An audit was completed by Administrator and/or designee on all residents to ensure that residents had an initial monthly assessment and a weight for the month of October.

- All resident's weight and monthly assessment on all residents was updated for the month of October on October 26, 2022 and documented on October 26, 2022. The monthly assessment includes documentation of identified changes in resident status.
- On October 28, 2022, residents that self-administer their medications were assessed for the month of October.
- The facility will ensure that all residents have a monthly weight, assessment completed monthly to self-administer medications and a documented monthly assessment.
- Administrator and/or designee will complete an audit on all residents monthly for three months to ensure that all the residents are weighed and documented.
- Administrator and/or designee will complete an audit on all residents monthly for three months to ensure that all residents have a monthly assessment completed.
- Administrator and/or designee will complete an audit on residents that self-administer medications monthly for three months to ensure that all residents can safely self-administer medications.

A 611

- RI#2's care plan has been updated to address and include history of falls with intervention, low vision due to macular degeneration and glaucoma with safety interventions, podiatry care related to peripheral vascular disease with interventions to include staff to visually inspect feet and report problems ASAP, and any other change of condition or new diagnosis with interventions on October 26, 2022.
- RI#3's care plan has been updated to address diabetes with interventions that also included staff to recognize complications related to diabetes and any other change of condition and diagnoses with interventions for staff to observe and report. RI# 3's care plan has also been updated to reflect the number of liters per minute on October 26, 2022.
- RI#5's care plan has been updated to include interventions for CHF and hypertension, as well as resident's history of a UTI with signs or symptoms for staff to monitor. RI#5's care plan has also been updated with the diagnosis of depression and anxiety with interventions, as well as interventions for edema on October 26, 2022.
- All resident's care plans have been reviewed and updated to reflect any diagnosis and/or problems with interventions in place on October 26, 2022.
- The facility will ensure that all resident's care plan will be updated timely to reflect any new diagnosis or problems identified by providers.
- Administrator and/or designee will review care plans for 2 residents weekly for 12 weeks to ensure that the care plan has been updated with interventions in place.

A 612

- EI#6, Activity Coordinator, was in-serviced by Administrator and Activity Director on activity calendar and providing meaningful activities for the Assisted Living residents on October 25, 2022.
- Activity Director interviewed all residents on Assisted Living and discussed preferences for activities on Assisted Living on October 14, 2022. Care plans have been updated to reflect preferences.

- An updated activity calendar was reviewed for the month of October and activities were added to the calendar for the remainder of the month as of October 17, 2022.
- The facility will ensure that meaningful activities are provided to the residents daily.
- Activity Director and/or designee will interview 2 residents weekly for 12 weeks to ensure that they are being provided with meaningful activities.

A 1101

- EI#4, Maintenance Director was in-serviced by Administrator instructing him to have separate fire drills for the Assisted Living and Skilled Nursing on October 17, 2022.
- A fire drill was completed separately for the Assisted Living on all three shifts on October 21, 2022.
- The facility will ensure that fire drills are documented separately from the Skilled Nursing.
- Administrator and/or designee will audit 1 fire drill monthly for 3 months to ensure that the fire drill is documented separately for the Assisted Living.