Accepted September 8, 2022

Connie Cherry

COUNTRY PLACE
SENIOR LIVING
Care For Your Way of Life

FAX

To:	From:	
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~~Resident Name~~: Tammy Nix, Administrator

Plan of Correction

CONFIDENTIALITY STATEMENT

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STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	D4705	A. BUILDING: _____ B. WING _____	08/31/2022

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
COUNTRY PLACE SENIOR LIVING OF WINFIELD	480 TAHOE ROAD WINFIELD, AL 35594

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
A 000	Initial Comments On August 31, 2022, an unannounced licensure survey and complaint investigation was conducted for this 28 bed Assisted Living Facility (ALF) with a census of 22. There was one complaint investigated during this survey. LC#20200415008 was unsubstantiated with no deficiencies cited as a result of the complaint investigation. 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 420-5-4, Alabama Administrative Code, for Assisted Living Facilities. The deficiencies cited pose a potential risk of harm to the residents and require a plan of correction.	A 000		
A 620	420-5-4-.06 (11) (a) Care of Residents. (11) Admission and Retention of Residents. Residents admitted to and retained in assisted living facilities must meet all eligibility and continued stay requirements specified in these rules. (a) Admission 1. An assisted living facility shall not admit any individual who: (i) Is receiving or requires skilled nursing care. (ii) Has a wound that requires care beyond basic first aid. (iii) Lacks the ability to make decisions	A 620		

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A 620	Continued From page 1 related to personal safety. (iv) Cannot direct his or her care. (v) Has behaviors that may be dangerous to themselves or others. (vi) Cannot safely self-manage medications or self-administer medications with assistance. (vii) Is receiving or in need of hospice services. (viii) Cannot safely reside in the facility unless his or her egress from the facility is restricted. (ix) Is diagnosed with acute infectious pulmonary disease, such as influenza, or active tuberculosis, or with other diseases capable of transmission to other individuals through normal person-to-person contact. This Rule is not met as evidenced by: Based on observations, interviews and record reviews, the facility admitted a resident who required care beyond the level of care allowed in an assisted living facility. Findings: Resident Identifier (RI)#5 was admitted to the facility on April 4, 2022 with diagnoses which included hypertension, diabetes mellitus type II, gastroesophageal reflux disorder, benign	A 620	1) 420-5-4-.06 (11) (a) Care of Residents 2) The facility will ensure that all new residents qualify for admission within the boundaries of the levels of care allowable in an assisted living facility. 3) The Facility Nurse will audit all current resident charts to ensure no other resident was admitted with conditions outside of the regulations for assisted living facilities.	

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A 620	Continued From page 2 prostatic hypertrophy, cellulitis of the right and left lower extremities, neuropathy and peripheral artery disease of the lower extremities. RI#5 had an indwelling Foley catheter which had been managed independently by RI#5 for several years. RI#5 was currently receiving wound care by home health and the wound treatment center for an ulcer to the right heel. Review of home health records revealed the onset date of RI#5's heel ulcer was February 24, 2022, prior to admission to the facility. Review of RI#5's assisted living facility admission records confirmed the heel ulcer was present at the time RI#5 was admitted to the facility. EI#1 acknowledged RI#5 was receiving skilled care for the heel ulcer at the time of admission to the facility but stated she (EI#1) thought the wound was allowed since it was not infected. EI#1 added she (EI#1) had transported RI#5 to the wound treatment center the previous week and was informed by the physician that RI#5's heel wound would likely be healed within two weeks.	A 620	4) September 1, 2022 a 30- day discharge notice was given to RI#5 addressing an ulcer wound to the right heel currently being treated by home health and a wound treatment center. September 1, 2022 a review of the assisted living rules and regulations pertaining to new admissions was conducted by the Facility Administrator and Nurse. 5) Facility Administrator will discuss RI #5 wound care with physician and if not healed within 30 days resident will be discharged.	
A 703	420-5-4-.07 (3) Food Service. (3) Dietary Service. (a) Number of Meals. No fewer than three meals shall be provided each 24 hours. Food service shall be provided in a resident's room during temporary illness if necessary. The diet shall be well-balanced, palatable, properly prepared, and sufficient in quantity and quality to meet the nutritional needs of the residents in accordance with Dietary Reference Intakes of the Food and Nutrition Board of the National Research Council, National Academy of Sciences. The food must be adapted in type and preparation to the habits, preferences, and	A 703	1) 20-5-4-.07 (3) Food Service 2) The facility will ensure that a mealtime schedule is posted and visible to all residents at all times. 3) September 1, 2022 Facility Administrator conducted visual search for all required postings to ensure complete regulatory compliance. No violations were identified	

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A 703	Continued From page 3 physical abilities of the residents. (b) Timing of Meals. A time schedule for serving meals to residents and personnel shall be established. Meals shall be served approximately five hours apart with no more than 14 hours between the evening meal and breakfast. The time schedule of meals shall be posted with the menu. The facility shall make evening snacks available after service of the evening meal. The facility shall provide fluids throughout the day and shall make between-meal nourishment (snacks) available. (c) Menu. The menu shall be planned and written at least 1 week in advance. The current week's menu shall be posted in the food service area and shall be kept on file for the following 2 weeks. For any resident with a physician's order for a therapeutic diet, the facility shall have a copy of the diet and the facility shall document the adjustment of its menu to accommodate the resident's needs. (d) Alternate food selections or substitutes shall be made available to all residents. (e) A facility shall not obtain food from charitable organizations. A facility shall not avoid serving a meal by sending or transporting residents to missions, soup kitchens, or other charitable facilities for meals. (f) The amount of food on hand shall be sufficient to serve three meals per day to all residents for 3 days. Non-perishable food and potable water shall be maintained in the facility in sufficient quantity to serve three meals per day to	A 703	4) August 31, 2022 The mealtime schedule has been framed and placed in a more permanent location to deter future movement, discarding or misplacement. In addition, the current 2022 Spring/Summer menu has been edited to include mealtimes and are distributed weekly to all residents. All future 6-month cycle menus will be edited to reflect mealtimes. 5) The Facility Administrator will conduct a visual check to ensure posting remains in place with a clear view for all residents. Each 6-month cycle menu change will include the addition of mealtimes. Checks for visual posting will be conducted weekly by the Facility Administrator, beginning August 31, 2022, for 4 weeks, and monthly for 5 months. Cycle menus will be monitored for inclusion of mealtimes, beginning with the current 2022 Spring/Summer menu edits to include mealtimes. Monitoring for the 2022 Fall/Winter and 2023 Spring Summer menus will be monitored for compliance. Record of all monitoring will be kept in the Facility Administrator's office.	

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A 703	Continued From page 4 all residents for 3 days. This Rule is not met as evidenced by: Based on observations and interview, the facility failed to post the scheduled meal times. Findings: During a tour of the facility on August 30, 2022, the surveyor was unable to locate a posting of meal times. On August 31, 2022, EI#1 was also unable to locate a posting of the meal time schedule but stated it would be posted immediately. CONNIE CHERRY, REGISTERED NURSE	A 703		