

Alabama Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>D0215</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>C</b> <b>02/03/2026</b>
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NAME OF PROVIDER OR SUPPLIER  <b>GARDENS OF DAPHNE, THE</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>1307 DAPHNE AVENUE</b> <b>DAPHNE, AL 36526</b>
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A 000	<p>Initial Comments</p> <p>On February 3, 2026, an unannounced complaint investigation was conducted for this 16 bed Assisted Living Facility (ALF) with a census of 13.</p> <p>One complaint was investigated during this survey. LC#20251112005 was unsubstantiated. Citations were written as a result of the investigation.</p> <p>Citations were cited during this on-site survey and require a plan of correction. The facility was operating in substantial compliance 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.</p>	A 000		
A 508	<p>420.5.4-.05 (3) (h) Records and Reports.</p> <p>(h) Incident Investigation. When an incident, as defined below, occurs in an assisted living facility, the facility administrator shall be immediately notified, the facility shall conduct a thorough investigation, and appropriate corrective actions and interventions shall be devised and implemented immediately. A detailed and accurate report shall be completed within 72 hours of the incident. The report shall be given immediately upon completion to the administrator for review.</p> <p>1. Incidents which require investigation are:</p> <p>(i) An accident or injury of known or unknown origin that was unusual or suspicious in nature such as bruising, pain, or injury that is not consistent with actions necessary in providing day to day care to a resident or for which medical</p>	A 508		

Health Care Facilities LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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A 508	<p>Continued From page 1</p> <p>treatment was sought.</p> <p>(ii) A fracture or an injury resulting in medical attention. For the purposes of these rules, medical attention shall be defined as care that rises above the level of first aid, including but not limited to: a physician ordered portable X-ray, a visit to an emergency department, urgent care facility, clinic or physician office.</p> <p>(iii) The onset of wandering behavior by any resident who is not fully cognitively intact.</p> <p>(iv) Elopement by a resident.</p> <p>(v) Suspected, alleged, confessed, witnessed, or actual abuse of a resident or residents by staff, visitors, or other residents. This includes all types of abuse including mental abuse, physical abuse, sexual abuse, and verbal abuse as defined in these rules.</p> <p>(vi) Suspected, alleged, confessed, witnessed, or actual neglect of a resident or residents as defined in these rules.</p> <p>(vii) Suspected, alleged, confessed, witnessed, or actual exploitation of a resident or residents as defined in these rules.</p> <p>(viii) An outbreak (for purposes of these rules, an outbreak is considered to be two or more affected people within 72 hours or less) of a contagious disease or condition including those listed in Appendix I of Alabama Administrative Code Sec. 420-4-1-.04 (for example food-borne illness, scabies, influenza, or Staphylococcus aureus).</p>	A 508		

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A 508	<p>Continued From page 2</p> <p>(ix) A fire, earthquake, storm, other act of God, or other occurrence (for example, a natural gas leak or a bomb threat) that causes physical damage to the building in which the facility is located, or that results in the evacuation or partial evacuation of the facility.</p> <p>(x) Intentional self-inflicted injury, suicide, or suicide attempt by a resident.</p> <p>(xi) An unplanned occurrence that results in media attention.</p> <p>(xii) A medication error, overdose, or over sedation.</p> <p>(xiii) Ingestion by a resident of a toxic substance that requires medical attention.</p> <p>(xiv) Any indication of malfunction of the sprinkler system, or fire alarm system.</p> <p>2. In addition to other items required by the facility's policies and procedures, the incident investigation shall contain the following:</p> <p>(i) Names of all residents involved.</p> <p>(ii) Names of all staff involved including person in charge at the time of the incident.</p> <p>(iii) When the administrator was notified (date and time).</p> <p>(iv) Circumstances under which the incident occurred.</p> <p>(v) When the incident occurred (date and time).</p>	A 508		

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A 508	<p>Continued From page 3</p> <p>(vi) Where the incident occurred (for example, bathroom, bedroom, street, or lawn).</p> <p>(vii) Immediate actions taken.</p> <p>(viii) The extent and description of injury, if any, to the affected resident or residents.</p> <p>(ix) Immediate treatment rendered.</p> <p>(x) Symptoms, pain, or injury discussed with the physician, and the date and time the physician was notified.</p> <p>(xi) Names, telephone numbers, and addresses of witnesses.</p> <p>(xii) Date and time relatives or sponsor were notified.</p> <p>(xiii) Out-of-facility treatment.</p> <p>(xiv) Follow-up care.</p> <p>(xv) Outcome resolution.</p> <p>(xvi) The action taken by the facility to prevent the occurrence of similar incidents in the future.</p> <p>(xvii) The investigative file includes the incident report itself, the incident investigation and all records, documents, statements, images, and information created or reviewed in connection with the investigation.</p> <p>(xviii) The entire investigative file shall be made available for inspection and copying by</p>	A 508		

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A 508	<p>Continued From page 4</p> <p>representatives of the Department upon request.</p> <p>(xix) The entire investigative file and documentation of all corrective action taken shall be retained for a period of not less than 3 years after the resident is discharged or dies.</p> <p>(xx) Interventions devised as a result of the investigation shall be included in a resident record that is available to the personal care staff.</p> <p>3. In addition, the following incidents shall be reported to the Department's Online Incident Reporting System within 24 hours of the incident:</p> <p>(i) A fracture or an injury resulting in death, EMS activation, or the need for medical attention as defined in these rules.</p> <p>(ii) Elopement by a resident.</p> <p>(iii) Suspected, alleged, confessed, or witnessed abuse, neglect, or exploitation of a resident or residents by staff, visitors, or other residents. This includes all types of abuse including mental abuse, physical abuse, sexual abuse, and verbal abuse as defined in these rules. The victim's sponsor or responsible family member shall be notified within 24 hours. All incidents of suspected abuse, neglect, or exploitation shall be reported immediately to the Department of Human Resources or to appropriate law enforcement authorities as required by law. These documents shall be retained with the facility investigative file.</p> <p>(iv) A fire, earthquake, storm, other act of God, or other occurrence (for example, a natural</p>	A 508		

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A 508	<p>Continued From page 5</p> <p>gas leak or a bomb threat) that causes physical damage to the building in which the facility is located, or that results in the evacuation or partial evacuation of the facility.</p> <p>(v) Intentional self-inflicted injury, suicide, or suicide attempt by a resident.</p> <p>(vi) An unplanned occurrence that results in media attention.</p> <p>(vii) Any medication error, overdose, or over sedation. The incident shall be immediately reported to the attending physician, facility medical director, or back-up physician.</p> <p>(viii) Ingestion by a resident of a toxic substance that requires medical attention.</p> <p>(ix) Notifiable diseases and health conditions listed in Appendix I of the Alabama Administrative Code Sec. 420-4-1-.04. shall be reported by the facility to the State Health Officer or the County Health Officer within the time frames specified in 420-4-1-.04. The facility shall maintain documentation of any reports of notifiable diseases or health conditions. This documentation shall be retained for a period of not less than 3 years.</p> <p>(x) Any indication of malfunction of the sprinkler system, or fire alarm system.</p> <p>4. The report to the Department's Online Incident Reporting System shall include the following:</p> <p>(i) Facility name and direct phone number.</p>	A 508		

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A 508	<p>Continued From page 6</p> <ul style="list-style-type: none"> <li>(ii) Time and date of the report.</li> <li>(iii) Reporter's name.</li> <li>(iv) Name of resident(s), staff, or visitor(s) involved in the incident.</li> <li>(v) Names of staff on duty at the time of the incident.</li> <li>(vi) Date and time of the incident.</li> <li>(vii) A brief description of the incident.</li> <li>(viii) Any injury or injuries to resident(s).</li> <li>(ix) Action taken by the facility in response to the incident.</li> </ul> <p>This Rule is not met as evidenced by: Based on record review and interview, the facility failed to report an allegation of abuse.</p> <p>Findings:</p> <p>A complaint was received by the ADPH Online Incident Reporting System (OIRS) related to the condition a resident was in when he/she was brought to the emergency room alleging neglect.</p> <p>On February 3, 2026, an on-site complaint survey was conducted. Employee Identifier (EI)#1, the administrator, acknowledged she had received a</p>	A 508		

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A 508	Continued From page 7  call from a staff member of a local free-standing Emergency Room (ER) alleging Resident Identifier (RI)#1 had presented to the ER heavily soaked in urine and feces. On February 3, 2026, EI#1 said she had reported the fall to the ADPH OIRS and when she (EI#1) got the call from the facility she did not think to report the allegation from hospital staff. EI#1 said there were ongoing details with RI#1 that were well documented to indicate he/she had not been neglected and she did investigate the allegation. EI#1 just forgot to file an incident report. This investigation was reviewed by the surveyor and found to be thorough.	A 508		
A 611	420-5-4-.06 (4) (a) (b) Care of Residents.  (4) Personal Care and Services. The facility shall provide care and services consistent with community standards.  (a) Portions of residents' records necessary for staff to provide care, including the plans of care and relevant portions of the medical examination records and admission records, shall be accessible to the direct care staff at all times.  (b) Plan of Care. There shall be a written plan of care developed for each resident prior to or at the time of admission. The plan of care shall be based on the initial medical examination, diagnoses, and recommendations of the resident's treating physician. The plan of care shall be reviewed and updated based on the annual examination, and all other physician examinations, diagnoses, and recommendations of the resident's treating physician, and the resident's monthly assessments. The plan of care shall be developed and updated in cooperation	A 611		

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A 611	<p>Continued From page 8</p> <p>with the resident and, if appropriate, the sponsor. All entries on the plan of care shall be accurately dated.</p> <ol style="list-style-type: none"> <li>1. The plan shall at all times reflect the current condition of the resident and document the personal care and services required from the facility by the resident. In addition to other items that may be required by the facility's own policies and procedures, the plan of care shall contain the following:</li> <li>2. A listing of the resident's individual needs or problems that require intervention by the facility.</li> <li>3. A listing of interventions provided by the facility to address the resident's identified needs or problems.</li> <li>4. A copy of any outside provider's certification and plan of care, such as the current Home Health Certification and Plan of Care for each resident receiving care from an outside provider.</li> <li>5. Activities of Daily Living. Residents of assisted living facilities shall be assisted and encouraged to maintain a clean, well-kept personal appearance. Each facility shall provide all needed assistance with activities of daily living to each resident.               <ol style="list-style-type: none"> <li>(i) Bathing. Residents shall be offered a bath or partial bath or shall be assisted with a bath or partial bath daily, and more often when necessary or requested.</li> <li>(ii) Oral Hygiene. Residents shall be</li> </ol> </li> </ol>	A 611		

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A 611	<p>Continued From page 9</p> <p>assisted with oral hygiene to keep mouth, teeth, or dentures clean. Measures shall be used to prevent dry, cracked lips.</p> <p>(iii) Hair. Resident's hair shall be kept clean, neat, and well groomed.</p> <p>(iv) Manicure. Fingernails and toenails shall be kept clean and trimmed.</p> <p>(v) Shaving. Men shall be assisted with shaving or shaved as necessary to keep them clean and well groomed.</p> <p>(vi) Personal Safety. Residents shall be provided assistance with personal safety.</p> <p>6. As changes in medication and personal services become necessary, the plan of care shall be promptly updated and all changes shall be documented.</p> <p>This Rule is not met as evidenced by: Based on record review and interview, a resident's facility care plan did not reflect the resident's current condition and did not contain appropriate interventions to meet the resident's care needs.</p> <p>Findings:</p> <p>A review of RI#1's facility care plan revealed, "Scope of Service ... Bathing Assistance ... Resident needs assistance with bathing. RA (Resident Assistant) to standby ... Toileting ... Resident is independent with toileting. ..." On</p>	A 611		

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A 611	<p>Continued From page 10</p> <p>February 3, 2026, EI#2, a resident assistant, reported RI#1 needed 2 persons to assist with showers on a good day. EI#2 said RI#1 was not only incontinent, but RI#1 would refuse peri-care after incontinence episodes. EI#3 said RI#1 was resistive to showers and incontinence care. EI#4 said she worked the 11:00 PM to 7:00 AM shift and would ask RI#1 if she could help him/her to the bathroom and RI#1 would refuse. EI#1 was asked if RI#1's facility care plan "Scope of Assistance" (what assistance RI#1 needed) matched RI#1 regarding bathing and toileting and she said no.</p> <p>THERESA HARRISON, REGISTERED NURSE</p>	A 611		