Accepted October 17, 2022

Connie Cherry

The Olive Home

Facility ID: P0503

Plan of Correction

Survey Exit Date: 09/28/2022

Administrator: Melissa Gilliland

Melissa Gilliland
10/12/2022

Olive Home Inc Oneonta, The
Facility ID: P0503
Administrator: Melissa Gilliland
Survey Exit Date: 09/28/2022

1. **A604 420-5-20-.06 (3) (a) (b) (c) (d) (e) Care of Residents. The facility failed to assess a resident for admission eligibility as required.**

2. All residents will be assessed for admission eligibility as required.

3. The RN will ensure that all residents are assessed for eligibility and results of the assessments are documented in the residents' charts.

4. The Administrator and the RN will audit all resident charts by 12/01/2022 to ensure that all assessments have been completed and documented in the residents' charts. The results of the audit will be documented in the POC binder.

5. The Regional Director of Nursing will audit resident charts quarterly beginning 01/2023 and ending 06/2023 to ensure that all assessments are completed and documented. Documentation of the audits will be placed in the POC binder in the Administrator's office.

Olive Home Inc Oneonta, The
Facility ID: P0503
Administrator: Melissa Gilliland
Survey Exit Date: 09/28/2022

1. **A620-420-5-20-.06 (9) (a) Care of Residents. The facility admitted a resident in need of skilled nursing services.**

2. All residents will be assessed within 30 days prior to admission for admission eligibility as required to ensure that the resident is not in need of skilled nursing services.

3. The RN will ensure that all potential residents are assessed by a nurse for eligibility within 30 days prior to admission and the results of the assessments are documented in the resident's chart.

4. The RN will create an assessment form to ensure that any potential resident is assessed for any skilled nursing needs prior to admission to the facility. The assessment form will be created by 11/01/2022 and placed in the POC binder in the Administrator's office.

5. The Regional Director of Nursing will audit resident charts quarterly beginning 12/2022 and ending 06/2023 to ensure that all assessments are completed within 30 days prior to admission. Documentation of the audits will be placed in the POC binder in the Administrator's office.