Accepted April 5, 2023

Connie Cherry

Rosewood Manor I

1513 County Park Road
Scottsboro, Al 35769
PH: 256-574-4800
Fax: 256-574-4700
Facility ID: # D3602
Administrator: Annette Almy
Survey Exit Date: 3/29/2023

1. **A 302 Administration**
   A. The policy and procedure titled "Medication Administration" was revised to reflect crushing or splitting of his or her own medications, may be assisted with crushing or splitting medications by unlicensed staff so long as the assistance provided is under the total control and direction of the resident. **COMPLETED 4/3/23**
   B. All residents in ALF were audited to ensure no other residents receive medications that are to be crushed. **COMPLETED 3/29/23**
   C. The one resident who receives medication crushed was instructed in order for her medication to be crushed, due to texture, she will need to self-direct and have total control of medication.
   **COMPLETED 3/31/23**
   D. Education to all Licensed Nurses and Employees who assist with medications in Assisted Living were educated in any medications that need to be crushed must be under the total control and direction of the resident. Licensed Nurses and employees who assist in medication assistance were educated in the policy and procedure titled "Medication Administration" **COMPLETED 4/3/23**
   E. All residents who have their medication crushed will be audited by the Resident Care Director or designee weekly to ensure the employees who assist with the crushing are being self-directed by the resident, weekly x4 then monthly x 3 **Commenced 4/7/23**
   F. Audits will be maintained in the executive Directors Office

2. **A 402 Personnel**
   A. Audit of all current Employee personnel records. **Completed 3/31/23**
   **B.** All current employees have been verified through the Alabama Department of Public Health Nurse Aid Abuse Registry. **Completed 3/29/2023 and 4/1/23**
   C. Policy has been changed to ensure that the Alabama Nurse Aid Abuse Registry is performed prior to hire **Completed 4/4/23**
   D. Education provided to all Employees on Personnel Requirements Prior to hire.
   **Completed 4/3/23**
   E. All new hires Personnel files will be audited prior to hire weekly x4 and then monthly x3 by the Executive Director or Designee to ensure Compliance **Commence 4/7/2023**

F. All audits will be maintained in the Executive Directors Office

**A 402 Personnel**

A. Audit of all current Employee personnel records. **Completed 3/31/23**

B. All current employees will have a physical examination certifying that the employee is free of signs and symptoms of infectious skin lesions and diseases that are capable of transmission to residents through normal staff to resident contact by a Nurse Practioner or Physician. The Medical Director has initiated the exams **Commenced 3/31/23, To Be Completed 4/7/23**

**C.** Initial Pre-Employment Physical has been revised to ensure MD/NP signature and certifying that the employee is free of signs and symptoms of infectious skin lesions and diseases that are capable of transmission to residents through normal staff to resident contact **Completed 3/30/23**

D. Education provided to all Employees on Employee Screening Prior to hire **Completed 4/3/23**

E. All new hires Personnel files will be audited prior to starting employment weekly x4 and Then monthly x3 by the Executive Director or Designee to ensure compliance **Commence 4/7/23**

F. All audits will be maintained in the Executive Directors Office

**2. A 614 Care of Residents**

A. All residents in ALF were audited to ensure no other residents receive medications that are to be crushed. **Completed 3/29/23**

B. The one resident who receives medication crushed was instructed in order for her medication to be crushed, due to texture, she will need to self-direct and have total control of medication. **Completed 3/31/23**

C. Education to all Licensed Nurses and Employees who assist with medications in Assisted Living were educated in any medications that need to be crushed must be under the total control and direction of the resident. Licensed Nurses and employees who assist in medication assistance were educated in the policy and procedure titled "Medication Administration" **Completed 4/3/23**

D. All residents who have their medication crushed will be audited by the Resident Care Director or designee weekly to ensure the employees who assist with the crushing are being self-directed by the resident, weekly x4 then monthly x 3 **Commenced 4/7/23**

E. Audits will be maintained in the executive Directors Office

**3. A 702 FOOD SERVICE**

A. Dishwasher in Assisted Living Community is without a control to record temperature

**B.** Taylor Precision Digital Dishwasher Thermometer was ordered **on 3/30/23**

**Thermometer Features:**

- Temperature range of 32 to 194 degrees Fahrenheit
- Features accuracy of +/- 1.8 degrees Fahrenheit
- Measures the surface temperature of water and records the maximum temperature in commercial dishwashers

- IP67 waterproof rating
- Replaces the ongoing cost of single use test strips

C. Dietary, Maintenance Director and Care staff will be educated in use of thermometer and recordings To be **Completed upon arrival of part , due to arrive 4/6/23**

D. Dietary Manager will be responsible for auditing temperatures of sanitizing temperature or all meals daily x 3 months **Commence 4/14/23**

E. All audits will be maintained in the Dietary Managers Office and reviewed by the Executive Director weekly.

SIGNATURE _____ DATE 4-9-23

ANNETTE ALMY RN EXECUTIVE DIRECTR/ADMINISTRATOR