Accepted August 4, 2023

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**Plan of Correction**

Facility name: HarborChase of Huntsville Specialty Care Assisted Living Facility

Facility ID: P4501

Administrator: Joel A. Burdette

Survey Exit Date: 6 Jul 2023

1. **Cited deficiency number: A401 - Personnel**

2. **Corrective Action taken for each resident / example identified in the SOD / frequency of action:**
   Staffing for the memory care (Sound and Cove) has been reviewed and weekly schedules posted to ensure the community meets or exceeds the staffing requirements per 420-5-20-.04 for SCALF. The Director of Resident Care (EI#2) has started managing the scheduling and will verify, in coordination with the Director of Memory Care (EI#3), that the staffing is in accordance with regulations, census and acuity requirements.

3. **Additional corrective actions for residents not identified or concerns / frequency:**
   The Director of Resident Care will balance staffing needs for the SCALF and rotate, if the need arises within the community, staff from the ALF / SCALF to ensure proper staffing as well as med pass requirements per the state staffing requirement table. Responsible personnel: Director of Resident Care. The community has also interviewed additional personnel, offered positions and three new staff have begun orientation July 20th with goal of orientation completed by Aug 4th to ensure adequate staffing with orientation addressing the company policy on attendance and staffing patterns required for SCALF operations.

4. **Measures and changes put in place to ensure deficiency will not recur:**
   Scheduling and staffing are posted in the nurse's station(s) as well as by the time clock. We are also texting schedules to our staff to ensure all know when they are on shift with the requirement to call in advance (2 hrs, per company policy), as well as the task to locate a replacement, if an employee is unable to fill their scheduled shift.

5. **Monitoring of corrective actions and staff accountable / frequency and location of logs:**
   A log is maintained in the Director of Resident Care office for the next 90 days (25 Jul - 31 Oct 2023) to ensure staffing is maintained to adequately cover the SCALF. Responsible personnel: Director of Resident Care (EI#2), Director of Memory Care (EI#3) and Executive Director (EI#1).

Joel A Burdette **Date: 24 Jul 2023**

Executive Director, HarborChase Huntsville, AL

**Plan of Correction**

Facility name: HarborChase of Huntsville Specialty Care Assisted Living Facility

Facility ID: P4501

Administrator: Joel A. Burdette

Survey Exit Date: 6 Jul 2023

1. **Cited deficiency number: A508 – Records and Reports**

2. **Corrective Action taken for each resident/example identified in the SOD / frequency of action.** The community will ensure all potential incidents or change in care observations, to include those residents on hospice, communicate with their respective services each visit to assure all care plans/observations/changes in care and subsequent updated care plans are accurate and communicated to the Director of Resident Care and/or the Director of Memory Care or Executive Director.

3. **Additional corrective actions for residents not identified or concerns / frequency:** All residents that are receiving 3rd party care, to include home health, hospice and therapy, are required by their providers to report any changes in care or observations that may drive a change in care plans to the Director of Resident Care, Director of Memory Care or Executive Director each visit with a resident. We also had an in-service by our Ombudsman on 20 July 2023 to educate on abuse, neglect and exploitation to ensure all residents are up to date with care plans as well as the necessity to report to DHR as required.

4. **Measures and changes put in place to ensure deficiency will not recur:** We will maintain a log of all 3rd party services in the Director of Resident's care office to document who came, resident seen and annotation of any resident change in condition. We will maintain this log indefinitely to ensure open and updated information for our residents at all times. All resident care plans will be reviewed monthly, per regulation, and as needed.

5. **Monitoring of corrective actions and staff accountable / frequency and location of logs:** A log is maintained in the Director of Resident Care office for the next 90 days (25 Jul - 31 Oct 2023) to ensure 3rd party services are adhering to our policies and procedures to report changes in resident conditions so we can update care plans monthly accordingly. Responsible personnel: Director of Resident Care (EI#2) Director of Memory Care (EI#3) and Executive Director (EI#1)

Joel A Burdette _____ **Date: 24 Jul 2023**

Executive Director, HarborChase Huntsville, AL

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Administrator: Joel A. Burdette

Survey Exit Date: 6 Jul 2023

1. **Cited deficiency number: A604 – Care of Residents**

2. **Corrective Action taken for each resident/example identified in the SOD / frequency of action.** RI#1 was identified with a PSMS score of 5 in ambulation. This resident is currently on hospice service. A 30 day discharge notice has been provided to POA, based on the 5 in ambulation.

3. **Additional corrective actions for residents not identified or concerns / frequency:** All memory care residents (Sound and Cove) will have a new PSMS review to ensure they are not in jeopardy of exceeding the PSMS score. And, if so, a 30 day notice will be given. Completion for this review will occur NLT 31 Jul 2023.

4. **Measures and changes put in place to ensure deficiency will not recur:** We will ensure all monthly reviews, to include behavioral and PSMS screenings occur monthly and proper notice given if needed, as well as updating care plans.

5. **Monitoring of corrective actions and staff accountable / frequency and location of logs:** A monthly review of PSMS scores and care plans log will be maintained in the Director of Resident Care and Director of Memory Care offices for the next 90 days (25 Jul - 31 Oct 2023) to ensure monthly reviews for all residents occur so we can report changes in resident conditions and update care plans monthly accordingly. Responsible personnel: Director of Resident Care, Director of Memory Care and Executive Director.

Joel G Burdette _____ **Date: 24 Jul 2023**

Executive Director, HarborChase Huntsville, AL

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Facility ID: P4501

Administrator: Joel A. Burdette

Survey Exit Date: 6 Jul 2023

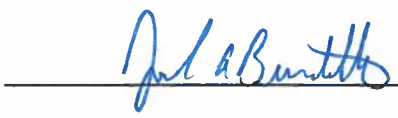
1. **Cited deficiency number: A611 – Care of Residents**

2. **Corrective Action taken for each resident/example identified in the SOD / frequency of action.** RI#1 was identified as needing more care than what her current care plan indicated. She is currently on hospice services, although our community is responsible for updating and enforcing care plans individually. A 30 day discharge notice will be given, based on the reported 5 in ambulation.

3. **Additional corrective actions for residents not identified or concerns / frequency:** All memory care residents (Sound and Cove) will have a new PSMS review to ensure they are not in jeopardy of exceeding the PSMS score. And, if so, a 30 day notice will be given. Completion for this review will occur NLT 31 Jul 2023. In addition, all resident care plans in the assisted living and memory care will be reviewed and updated NLT 31 Jul 2023.

4. **Measures and changes put in place to ensure deficiency will not recur:** We will ensure all resident care plans accurately reflect current care needs and update when there are any significant changes.

5. **Monitoring of corrective actions and staff accountable / frequency and location of logs:** A monthly review of a care plans log will be maintained in the Director of Resident Care and Director of Memory Care offices for the next 90 days (25 Jul - 31 Oct 2023) to ensure monthly care plans are occurring for all residents so we can report changes in resident conditions and update care plans monthly accordingly. Responsible personnel: Director of Resident Care, Director of Memory Care and Executive Director.



**Date: 24 Jul 2023**

Executive Director, HarborChase Huntsville, AL

**Plan of Correction**

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Administrator: Joel A. Burdette

Survey Exit Date: 6 Jul 2023

1. **Cited deficiency number: A612 – Care of Residents**

2. **Corrective Action taken for each resident/example identified in the SOD / frequency of action.** RI#2 was identified as wandering within the community without this behavior documented in the care plan. RI#2 resides in the Sound, a lower acuity SCALF. The higher acuity SCALF, the Cove, has a larger space and other active/restless residents. A plan has been developed and implemented that transitions her, accompanied by a staff member, from the Sound to the Cove during the daytime from approx. 8a-11:30a, then after lunch until approx. 2:30p. We will continue this regime through 31 Oct 2023. If there are still wandering issues, we will issue a notice to either transfer from the Sound permanently to the Cove. If she doesn't acclimate well to this transition, we will then proceed with a 30 day discharge notice for a higher level of care.

3. **Additional corrective actions for residents not identified or concerns / frequency:** All memory care residents care plans will be reviewed to ensure they accurately address a specific activity program, if warranted. All memory care resident care plans for specific/tailored activities that adequately address resident needs will occur and be updated NLT 31 Jul 2023.

4. **Measures and changes put in place to ensure deficiency will not recur:** We will ensure all resident care plans accurately reflect current activity needs and update when there are any significant changes in the engagement of meaningful activities.

5. **Monitoring of corrective actions and staff accountable / frequency and location of logs:** A monthly review of the activity plans log will be maintained in the Director of Resident Care and Director of Memory Care offices for the next 90 days, in coordination with the Director of Life Enrichment (25 Jul - 31 Oct 2023) to ensure monthly activity plans are occurring for all residents. Responsible personnel: Director of Resident Care, Director of Memory Care and Executive Director.



**Date: 24 Jul 2023**

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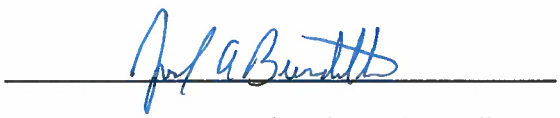
1. **Cited deficiency number: A621 – Care of Residents**

2. **Corrective Action taken for each resident/example identified in the SOD / frequency of action.**
RI#1 PSMS will be conducted NLT 31 Jul 2023. The staff will be in-serviced again on the requirements for regulatory compliance on what is defined as an appropriate resident NLT 31 Jul, to include education on the PSMS.
RI#2 was identified as wandering within the community without this behavior documented in the care plan. RI#2 resides in the Sound, a lower acuity SCALF. The higher acuity SCALF, the Cove, has a larger space and other active/restless residents. A plan has been developed and implemented that transitions her, accompanied by a staff member, from the Sound to the Cove during the daytime from approx. 8a-11:30a, then after lunch until approx. 2:30p. We will continue this regime through 31 Oct 2023. If there are still wandering issues, we will issue a notice to transfer from the Sound permanently to the Cove. If she doesn't acclimate well to this transition, we will then proceed with a 30 day discharge notice for a higher level of care.

3. **Additional corrective actions for residents not identified or concerns / frequency:**
All memory care residents care plans will be reviewed to ensure they accurately address a specific activity program, if warranted. All memory care resident care plans for specific/tailored activities that adequately address resident needs will occur and be updated NLT 31 Jul 2023.

4. **Measures and changes put in place to ensure deficiency will not recur:**
We will ensure all resident care plans accurately reflect current ADL/health and activity needs and update when there are any significant changes in the engagement of meaningful activities.

5. **Monitoring of corrective actions and staff accountable / frequency and location of logs:**
A monthly review of the activity plans log will be maintained in the Director of Resident Care and Director of Memory Care offices for the next 90 days, in coordination with the Director of Life Enrichment (25 Jul - 31 Oct 2023) to ensure monthly care plans that address ADL and activity plans are occurring for all residents. Responsible personnel: Director of Resident Care, Director of Memory Care and Executive Director.



**Date: 24 Jul 2023**

Executive Director, HarborChase Huntsville, AL