

Alabama Department of Public Health

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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:<br><br><b>D0302</b> | (X2) MULTIPLE CONSTRUCTION<br>A. BUILDING: _____<br><br>B. WING _____ | (X3) DATE SURVEY COMPLETED<br><br><b>06/17/2025</b> |
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| NAME OF PROVIDER OR SUPPLIER<br><br><b>RIVER OAKS ASSISTED LIVING</b> | STREET ADDRESS, CITY, STATE, ZIP CODE<br><b>903 WEST UNION STREET<br/>EUFAULA, AL 36027</b> |
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| A 000              | <p>Initial Comments</p> <p>On June 17, 2025, an unannounced licensure survey was conducted for this 16 bed Assisted Living Facility (ALF) with a census of 11.</p> <p>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 (ALF). The deficiencies cited pose a potential risk of harm to the residents and require a plan of correction.</p>  | A 000         |   |                    |
| A 618              | <p>420-5-4-.06 (9) Care of Residents.</p> <p>(9) Oxygen Therapy.</p> <p>(a) A resident of an assisted living facility that requires oxygen therapy shall self-manage his or her own oxygen therapy or self-administer his or her own oxygen therapy with assistance of facility staff. A resident that cannot safely self-manage or self-administer his or her own oxygen therapy with assistance shall have oxygen administered only by a physician, RN, or LPN. A resident that cannot direct his or her administration of oxygen and cannot be taught to direct his or her administration of oxygen shall be appropriately discharged.</p> <p>(b) Oxygen use including date, time, rate, and proper function of the equipment shall be documented on the medication administration or medication assistance record at least once per shift unless oxygen therapy is self-managed by the resident.</p> <p>(c) If a resident receives oxygen therapy in a facility:</p> | A 618         |   |                    |

Health Care Facilities  
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE \_\_\_\_\_ TITLE \_\_\_\_\_ (X6) DATE \_\_\_\_\_

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| A 618              | <p>Continued From page 1</p> <ol style="list-style-type: none"> <li>1. All oxygen equipment, such as tubing, masks, and nasal cannula shall be maintained in a safe and sanitary condition.</li> <li>2. All oxygen tanks shall be safely maintained and stored.</li> <li>3. The facility shall require safe use of oxygen therapy. No smoking and appropriate precautionary signs shall be posted.</li> <li>4. The facility shall ensure that each resident using oxygen therapy maintains an adequate supply of oxygen.</li> </ol> <p>Refer to National Fire Protection Association (NFPA) 99 for oxygen storage requirements.</p> <p>This Rule is not met as evidenced by:<br/>Based on observation and interview the facility failed to safely store oxygen bottles.</p> <p>Findings:<br/><br/>On June 17, 2025, at approximately 9:30 AM while residents were engaged in an activity the surveyor observed a cart on the back porch with thirteen (13) oxygen bottles lying flat and unsecured. During an interview later that same day with EI#1 he/she agreed with the surveyor's observation and was going to call the Durable Medical Equipment (DME) company for a resolution to the issue.</p> | A 618         |   |                    |
| A 701              | <p>420-5-4-.07 (1) Food Service.</p> <p>(1) General.</p>   | A 701         |   |                    |

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| A 701              | <p>Continued From page 2</p> <p>(a) Direction and Supervision. The services of a Dietitian shall be provided to any resident of an assisted living facility who requires a therapeutic diet. Congregate assisted living facilities shall be under the direction and supervision of a full or part-time professionally qualified dietitian or a consulting dietitian that is licensed in the State of Alabama. Responsibility for the supervision of dietary services shall be delegated to a responsible employee who is a graduate of a Dietary Managers course or has completed an approved course that includes basic sanitation. The facility shall provide meals, fluids, and snacks to the residents that meet the Dietary References Intakes from the basic food groups. The meals shall be of the quality and quantity necessary to meet the residents' needs, and must be in accordance with the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.</p> <p>This Rule is not met as evidenced by:<br/>Based on observation and interview, there was no responsible employee who had a certification in basic food sanitation or a Dietary Managers course.</p> <p>Findings:</p> <p>During a kitchen tour on June 17, 2025, the surveyor interviewed EI#1 about the certification in basic food sanitation or a Dietary Managers course for employees. EI#1 stated that there was not a current employee that had a course in basic food sanitation or a Dietary Managers</p> | A 701         |   |                    |

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| A 701              | Continued From page 3<br><br>course. EI#1 stated the facility had a dietician that approves the menu, but EI#1 has not seen the dietician in the facility since he/she has been the administrator (approximately 6 months). EI#1 agreed with the surveyors' findings and stated an employee would take the next available course.<br><br>TROY BLACK, REGISTERED NURSE | A 701         |   |                    |