

Alabama Department of Public Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: D2706	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 09/22/2022
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NAME OF PROVIDER OR SUPPLIER SUMMIT, THE	STREET ADDRESS, CITY, STATE, ZIP CODE 140 MCRAE STREET ATMORE, AL 36502
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(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
A 000	<p>Initial Comments</p> <p>On September 22, 2022, an unannounced focused care survey was conducted for this 28 bed Assisted Living Facility by the Alabama Department of Public Health to investigate the unexpected death of a resident involved in an incident which occurred on the facility's premises.</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 risk of significant harm or even death to the 18 residents living in the facility.</p>	A 000		
A 302	<p>420-5-4-.03 (1) (e) Administration.</p> <p>Policies.</p> <p>The governing authority shall be responsible for establishing and implementing written policies for the management and operation of the facility and shall be responsible for development of, and adherence to, procedures implementing those policies. The policies and procedures shall be made available to residents, any guardians, next of kin, sponsoring agency(ies), or representative payee(s). All residents shall be informed of new policies or changes in existing policies that may have bearing on the residents. All residents shall be provided a copy of such policies at least 30 days prior to the policies taking effect. Policies shall cover the following:</p> <p>(i) Facility responsibility to protect all residents from abuse, neglect, and exploitation.</p>	A 302		

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

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A 302	<p>Continued From page 1</p> <p>(ii) How allegations of abuse, neglect, and exploitation will be handled by the facility.</p> <p>(iii) Resident confidentiality.</p> <p>(iv) Admission and continued stay criteria.</p> <p>(v) Discharge criteria and notification procedures for residents and sponsors.</p> <p>(vi) Facility responsibility when a resident's personal belongings are lost.</p> <p>(vii) What services the facility is capable and not capable of providing.</p> <p>(viii) Medication management.</p> <p>(ix) Infection control.</p> <p>(x) Meal service, timing, menus and food preparation, storage, and handling.</p> <p>(xi) Fire safety and emergency plan, fire drills, fire alarm system, sprinkler and fire extinguisher checks, and disaster preparedness.</p> <p>(xii) Staffing and conduct of staff while on duty.</p> <p>(xiii) Oxygen administration and storage if used in the facility.</p> <p>(xiv) Dietary Policies. The dietitian, with the approval of the administrator, shall develop written policies and procedures for the guidance of all personnel handling food as outlined by the most current Food and Drug</p>	A 302		

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A 302	<p>Continued From page 2</p> <p>Administration Food Code published by the U.S. Department of Health and Human Services. The facility shall develop and implement dietary policies and procedures to meet the needs of the residents in the facility. In addition to other matters deemed necessary by the facility, dietary policies shall address:</p> <p>(I) Sanitation of dishes, utensils, and service equipment, and sanitary food preparation and handling.</p> <p>(II) The attire and cleanliness of staff members who prepare, handle, or serve food.</p> <p>(III) A schedule of meals, which shall include between-meal nourishment or snacks, and fluids.</p> <p>(IV) Food substitutions or alternatives.</p> <p>(V) Method to ensure an adequate dietary plan is implemented for any resident with a therapeutic diet or special dietary needs.</p> <p>(VI) Procedure to be followed if a resident is nutritionally compromised or is not eating adequate quantities of food.</p> <p>(VII) Provision of necessary services to any resident requiring adaptive devices to eat.</p> <p>(VIII) Procedure for the handling of potentially hazardous foods such as meat, milk, ice, and eggs.</p> <p>(IX) Storage of food.</p> <p>(X) Procedure for food service in the</p>	A 302		

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A 302	<p>Continued From page 3</p> <p>event of a disaster. Disaster menus shall be developed. The policy shall address how food will be obtained and maintained at safe temperatures if electricity is not available.</p> <p>This Rule is not met as evidenced by: Based on interview and record review facility employees failed to follow the CPR policy for a resident who was found unresponsive after a wreck with a golf cart. This deficient practice placed all 18 residents at risk for significant harm and even death.</p> <p>Findings:</p> <p>On September 09, 2022, Employee Identifier (EI) #1 reported an incident involving Resident Identifier (RI)#1 and a golf cart to ADPH's Online Incident Reporting System.</p> <p>On September 22, 2022, at approximately 4:50 PM, the surveyor reviewed RI#1's record and September 08, 2022 incident documentation with EI#1 and EI#6.</p> <p>RI#1 was admitted to the facility on August 26, 2022, with diagnoses which included cerebrovascular accident with right hemiplegia, diabetes mellitus type II, seizure disorder, coronary artery disease, hypertension and atrial fibrillation. RI#1's record documented that RI#1 was a full code and did not have a "Do Not Resuscitate" (DNR) order by RI#1's physician.</p> <p>EI#1 told the surveyor that RI#1's sponsor brought RI#1's golf cart to the facility on approximately September 05, 2022, for RI#1's use.</p>	A 302		

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A 302	<p>Continued From page 4</p> <p>El#1, El#2, El#3, El#4 and El#5 were all working on September 08, 2022, when RI#1 and RI#1's golf cart were found laying behind the facility in the drainage ditch approximately 12 feet beyond the facility's courtyard.</p> <p>El#1, El#2, El#3, El#4 and El#5 all had documentation in their employee files that they had been trained in first aid upon hire as required. El#2 and El#3 were the only employees working that shift who had a current cardiopulmonary resuscitation (CPR) certification. El#5's CPR certification had expired in July 2022.</p> <p>El#1 told the surveyor that on September 08, 2022, at approximately 4:10 PM, RI#1 was found behind the facility, with the golf cart turned over in the drainage ditch. RI#1 was found by RI#2 and RI#3's dog.</p> <p>RI#1 was described in separate interviews by El#1, El#2, El#3, El#4 and El#5 as unresponsive and not moving when RI#1 was first observed by each employee.</p> <p>El#1 did not check for a pulse or if RI#1 was breathing.</p> <p>El#2 checked RI#1's wrist, thought he/she felt a weak pulse and did not check if RI#1 was breathing.</p> <p>El#3 did not check for a pulse or if RI#1 was breathing.</p> <p>El#4 did not check for a pulse and could not tell if RI#1 was breathing.</p> <p>El#5 did not check for a pulse or if RI#1 was breathing.</p> <p>During separate interviews with El#1, El#2, El#3, El#4, and El#5, none of the employees provided any type of first aid or CPR. Each employee told</p>	A 302		

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A 302	Continued From page 5 the surveyor that he/she was afraid to move RI#1, fearful of causing additional injuries. EI#1 told the surveyor that the fire department crew initiated CPR upon their arrival. According to the emergency medical services (EMS) run report, dispatch received the 9-1-1 call at 4:13 PM; the EMS crew arrived on the scene at 4:31 PM, and RI#1 was pronounced dead at 4:34 PM. The facility's CPR Policy (undated) documented: "... PROCEDURE: All residents will be administered CPR when need is identified unless an appropriate Alabama Emergency Medical Service Do Not Attempt Resuscitation order is completed. (see attached form). ..." EI#1 and EI#6 told the surveyor that they had not developed a plan of action to address the lack of response by the facility employees to provide first aid or CPR to RI#1 after RI#1 was found unresponsive in the facility's drainage ditch. EI#1 and EI#6 agreed that the facility needed to ensure that at least one properly trained employee who was willing to provide first aid and CPR was scheduled on each shift.	A 302		
A 405	420-5-4-.04 (6) Personnel. (6) Training. (a) All staff who have contact with residents, including the administrator, shall have initial training prior to resident contact and refresher training annually and as necessary. Documentation of all staff training to include attendance records and any required post-test or evaluations shall be maintained in the facility. In	A 405		

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A 405	<p>Continued From page 6</p> <p>addition to any information otherwise required by the facility's policies and procedures, the facility shall ensure that prior to resident contact, all staff members receive training on the subject matter listed below:</p> <ol style="list-style-type: none"> 1. State law and rules on assisted living facilities. 2. Facility policies and procedures. 3. Resident rights. 4. Current certification from the American Heart Association or the American Red Cross in cardiopulmonary resuscitation (CPR) within 90 days of hire. 5. Identifying and reporting abuse, neglect, and exploitation. 6. Basic first aid. 7. Advance directives. 8. Protecting resident confidentiality. 9. Resident fire and environment safety. 10. Special needs of the elderly, mentally ill, and mentally retarded. 11. Safety and nutritional needs of the elderly. 12. Identifying signs and symptoms of dementia. <p>(b) Cardiopulmonary Resuscitation. An</p>	A 405		

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A 405	<p>Continued From page 7</p> <p>assisted living facility shall be staffed at all times by at least one individual who has a current certification from the American Heart Association or the American Red Cross in CPR. All employees of an assisted living facility who have contact with residents must be certified in CPR from the American Heart Association or the American Red Cross. New employees must obtain certification in CPR within 90 days of hire. An assisted living facility equipped with an automated external defibrillator (AED) shall be staffed at all times by at least one individual who has a current certification from the American Heart Association or the American Red Cross in AED utilization. Substitute training approved by the Department for use by emergency medical services personnel (EMSP) may be utilized in lieu of those courses or certifications offered by the American Heart Association or American Red Cross in CPR or AED utilization.</p> <p>(c) If the facility admits or retains residents with special needs such as diabetes, hospice, or oxygen therapy, the facility shall provide staff with the appropriate training.</p> <p>(d) Continuing Education. All staff must receive annual continuing education sufficient to remain knowledgeable of the training specified above.</p> <p>This Rule is not met as evidenced by: Based on record review and interview, the facility failed to ensure that employees were properly trained to provide first aid and CPR. This deficient practice placed all 18 remaining residents at risk for significant harm and even death.</p>	A 405		

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A 405	<p>Continued From page 8</p> <p>Findings:</p> <p>On September 09, 2022, EI#1 reported an incident involving RI#1 and a golf cart to ADPH's Online Incident Reporting System.</p> <p>On September 22, 2022, at approximately 4:50 PM, the surveyor reviewed RI#1's record and the September 08, 2022, incident documentation with EI#1 and EI#6.</p> <p>RI#1 was admitted to the facility on August 26, 2022, with diagnoses which included cerebrovascular accident with right hemiplegia, diabetes mellitus type II, seizure disorder, coronary artery disease, hypertension and atrial fibrillation. RI#1's record documented that RI#1 was a full code and did not have a "Do Not Resuscitate" (DNR) order by RI#1's physician.</p> <p>EI#1 told the surveyor that RI#1's sponsor brought RI#1's golf cart to the facility on approximately September 05, 2022, for RI#1's use.</p> <p>EI#1, EI#2, EI#3, EI#4, and EI#5 were all working on September 08, 2022, when RI#1 and RI#1's golf cart were found laying behind the facility in the drainage ditch approximately 12 feet beyond the facility's courtyard.</p> <p>EI#1, EI#2, EI#3, EI#4, and EI#5 all had documentation in their employee files that they had been trained in first aid upon hire as required. EI#2 and EI#3 were the only employees working that shift who had a current cardiopulmonary resuscitation (CPR) certification. EI#5's CPR certification had expired in July 2022. EI#1's file did not contain any CPR documentation. EI#4</p>	A 405		

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A 405	<p>Continued From page 9</p> <p>was within the first 90 days of employment with the facility.</p> <p>El#1 told the surveyor that on September 08, 2022, at approximately 4:10 PM, RI#1 was found behind the facility, with the golf cart turned over in the drainage ditch. RI#1 was found by RI#2 and RI#3's dog.</p> <p>RI#1 was described in separate interviews by El#1, El#2, El#3, El#4 and El#5 as unresponsive and not moving when RI#1 was first observed by each employee.</p> <p>El#1 did not check for a pulse or if RI#1 was breathing.</p> <p>El#2 checked RI#1's wrist, thought he/she felt a weak pulse and did not check if RI#1 was breathing.</p> <p>El#3 did not check for a pulse or if RI#1 was breathing.</p> <p>El#4 did not check for a pulse and could not tell if RI#1 was breathing.</p> <p>El#5 did not check for a pulse or if RI#1 was breathing.</p> <p>During separate interviews with El#1, El#2, El#3, El#4, and El#5, not one of the facility employees provided any type of first aid or CPR to RI#1. Each employee told the surveyor that he/she was afraid to move RI#1, fearful of causing additional injuries.</p> <p>El#1 told the surveyor that the fire department crew initiated CPR immediately upon their arrival.</p> <p>According to the emergency medical services (EMS) run report, dispatch received the 9-1-1 call at 4:13 PM; the EMS crew arrived on the scene at 4:31 PM, and RI#1 was pronounced dead at 4:34 PM.</p>	A 405		

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A 405	Continued From page 10 EI#1 and EI#6 told the surveyor that they had not developed a plan of action to address the lack of response by the facility employees to provide first aid or CPR to RI#1 after RI#1 was found unresponsive in the facility's drainage ditch. EI#1 and EI#6 agreed that the facility needed to ensure that at least one properly trained employee who was willing to provide first aid and CPR was scheduled on each shift.	A 405		
A 504	420-5-4-.05 (3) (d) Records and Reports. (d) Residents' Rights. Each resident shall be fully informed, prior to or at the time of admission of these rights. A copy of these rights shall be conspicuously posted in a resident common area. Each resident's file shall contain a copy of a written acknowledgment that he or she has read these rights, or has had these rights fully explained by facility staff to the resident, or, if appropriate, to the resident's sponsor. The acknowledgment shall be signed and dated by the administrator or the administrator's designee and by the resident or sponsor, when appropriate. 1. No resident shall be deprived of any civil or legal rights, benefits, or privileges guaranteed by law or the Constitution of the U.S. solely by reason of status as a resident of the facility. 2. Every resident shall have the right to live in a safe and decent environment, to be free from abuse, neglect, and exploitation, and to be free from chemical and physical restraints. 3. Every resident shall have the right to be treated with consideration, respect, and due	A 504		

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A 504	<p>Continued From page 11</p> <p>recognition of personal dignity, individuality, and the need for privacy.</p> <p>4. Every resident shall have the right to unrestricted private communication, including receiving and sending unopened correspondence, access to a telephone, and visiting with any person of his or her choice, at any reasonable time.</p> <p>5. Every resident shall have freedom to participate in and benefit from social, religious, and community services and activities and to achieve the highest possible level of independence, autonomy, and interaction within the community.</p> <p>6. Every resident shall have the right to manage his or her own financial affairs. If a resident or his or her legally appointed guardian authorizes the administrator of the facility to provide a safe place to keep funds on the premises, an individual account record for each resident shall be maintained by the administrator and an up-to-date record shall be maintained for all transactions.</p> <p>7. Every resident shall have the right to share a room with his spouse if both are residents of the facility and agree to do so.</p> <p>8. Every resident shall have the right to a reasonable opportunity for regular exercise several times a week and to be outdoors at regular and frequent intervals.</p> <p>9. Every resident shall have the right to exercise civil and religious liberties, including the right to independent personal decisions. No</p>	A 504		

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A 504	<p>Continued From page 12</p> <p>religious beliefs or practices, nor compulsory attendance at religious services, shall be imposed upon any resident.</p> <p>10. Every resident shall have access to adequate and appropriate health care consistent with established and recognized standards within the community including the right to receive or reject medical care, dental care, or other health care services except those required to control communicable diseases.</p> <p>11. Every resident shall have the right to at least 30 days prior written notice of involuntary relocation or termination of residence from the facility unless the resident is a patient in a facility providing a higher level of care and no longer meets the eligibility and continued stay requirements in these rules, or for medical reasons the resident is considered by a physician to require an emergency relocation to a facility providing a more skilled level of care, or unless the resident engages in a pattern of conduct that is harmful or dangerous to himself or herself or to other residents. Such actions will be documented in the resident's admission record.</p> <p>12. Every resident shall have the right to present grievances and recommend changes in policies, procedures, and services to the staff of the facility, the facility's management and governing authority, and to any other person without restraint, interference, coercion, discrimination, or reprisal.</p> <p>13. Every resident shall have the right to confidential treatment of personal and medical records. A resident may authorize the release of records to any individual of his or her choice.</p>	A 504		

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A 504	<p>Continued From page 13</p> <p>Such authorization must be given by the resident in writing and the written authorization must be included in the resident's file.</p> <p>14. Every resident shall have the right to refuse to perform work or services for the facility unless the resident expressly agrees to perform such work or services and this agreement is plainly documented in the admission agreement. A resident may voluntarily perform work or services for the facility, provided that:</p> <p>(i) The facility has documented the resident's desire to perform work in the resident's plan of care, and the resident has signed this plan of care.</p> <p>(ii) The plan of care specifies the nature of the work to be performed and sets forth the compensation to be paid for the service, unless the service is to be performed without compensation; and</p> <p>(iii) The resident has the right and understands that he or she has the right to terminate the agreement to work at any time without recourse.</p> <p>15. Every resident shall be fully informed, prior to or at the time of admission and at regular intervals during his or her stay, of services available in the facility, and of related charges.</p> <p>16. Every resident shall be fully informed, as evidenced by the resident's written acknowledgment, prior to or at the time of admission, of all rules and regulations governing residents' conduct and responsibilities.</p>	A 504		

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A 504	<p>Continued From page 14</p> <p>17. Every resident shall have the right to have the name, telephone number, and address of the Department's Bureau of Health Provider Standards, the Local Ombudsman, the Department of Human Resources, and the telephone numbers of the Department of Public Health toll-free Assisted Living Facilities Complaint Hotline and the Department of Human Resources toll-free Elder Abuse Hotline. All of this information shall be posted in a conspicuous location in a resident common area.</p> <p>18. All state inspection reports and any resulting corrective action plan from the past 24 months shall be posted in a prominent location. If there has been no inspection in the past 24 months, then the results of the most recent inspection and any resulting corrective action plan shall be posted.</p> <p>19. Every resident shall have the right to 30 days prior written notice to both resident and sponsor of any increase of fees or charges.</p> <p>20. Every resident shall have the right to 30 days prior written notice of any involuntary change in the resident's room or roommate unless the change is necessary because the resident or the resident's roommate engages in a pattern of conduct that is harmful or dangerous to himself or herself or to other residents.</p> <p>21. Every resident shall have the right to wear his or her own clothes, to keep and use his or her own personal possessions including toilet articles except for personal possessions too large to be stored in the resident's room.</p> <p>22. Every resident shall have the right to</p>	A 504		

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A 504	<p>Continued From page 15</p> <p>be afforded privacy for sleeping and for storage of personal belongings.</p> <p>23. Every resident shall have the right to have free access to day rooms, dining, and other group living or common areas at reasonable hours and to freely come and go from the home.</p> <p>24. Every resident shall have the right to participate in devising the resident's care plan, including providing for the resident's preferences for physician, hospital, nursing home, acquisition of medication, emergency plans, Advance Directives, and funeral arrangements. A copy of this care plan shall be kept in the resident's file.</p> <p>This Rule is not met as evidenced by: Based on interview and record review, the facility failed to maintain a safe environment. This deficient practice affected at least one resident (RI#1) and placed the remaining 18 residents at risk for significant harm.</p> <p>Findings:</p> <p>On September 09, 2022, EI#1 reported an incident involving RI#1 and a golf cart to ADPH's Online Incident Reporting System. The OIR (online incident report) did not describe the injuries suffered by RI#1.</p> <p>On September 22, 2022, at approximately 4:50 PM, the surveyor reviewed RI#1's record and the September 08, 2022 incident documentation with EI#1 and EI#6.</p> <p>RI#1 was admitted to the facility on August 26, 2022, with diagnoses which included</p>	A 504		

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A 504	<p>Continued From page 16</p> <p>cerebrovascular accident with right hemiplegia, diabetes mellitus type II, seizure disorder, coronary artery disease, hypertension, and atrial fibrillation. RI#1 had physician's orders for Plavix (a medication which alters blood clotting). RI#1's physician medical examination, dated August 20, 2022, documented that RI#1 required assistance with all activities of daily living including grooming, bathing, dressing, and toileting.</p> <p>RI#1's record documented on the care plan and the medication administration record that RI#1 was a full code and RI#1 did not have a "Do Not Attempt Resuscitation" (DNAR) order signed by RI#1's physician.</p> <p>On September 06, 2022, RI#1 was found on the floor after a fall. RI#1 did not have any injuries noted at that time. EI#1 documented, "Getting home health to work with (RI#1). (RI#1) really needs to push pendant (for assistance)."</p> <p>EI#1 told the surveyor that RI#1's sponsor brought RI#1's golf cart to the facility on approximately September 05, 2022, for RI#1's use. EI#1 told the surveyor that EI#1 nor any other employee had completed any kind of assessment of RI#1's ability to safely drive the golf cart and nobody had checked to ensure that RI#1's golf cart was safe for RI#1 to drive. The golf cart delivery was documented on RI#1's care plan with no interventions for RI#1's safety.</p> <p>EI#2, EI#3, and EI#5 all told the surveyor that RI#1 was able to transfer without any assistance. EI#2, EI#3, and EI#5 also told the surveyor that RI#1 required some assistance in the morning, but was able to transfer independently throughout the rest of the day, even though RI#1 had weakness and limited mobility of RI#1's right leg.</p>	A 504		

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A 504	<p>Continued From page 17</p> <p>El#2, El#3, El#4, and El#5 all told the surveyor during separate interviews, that they had not ridden on the golf cart with RI#1. El#2 told the surveyor that El#2 had observed RI#1 drive the golf cart all over the facility property including in front of and behind the drainage ditch. El#2 told the surveyor that El#2 was aware of only one instance where an employee had seen RI#1 drive the golf cart to the mall located not far from the facility. El#3 and El#5 told the surveyor that RI#1 was only seen driving the golf cart on the facility grounds.</p> <p>El#1, El#2, El#3, El#4, and El#5 were all working on September 08, 2022, at approximately 3:00 PM, when they began looking for RI#1 due to a change in the weather conditions (overcast and looking like rain) and also because RI#1 had not been seen in the facility since approximately 2:00 PM. RI#1 had not signed himself/herself out of the facility. RI#1's sponsor had also been searching around the community for RI#1 on the golf cart since approximately 3:00 PM.</p> <p>El#1 told the surveyor that on September 08, 2022, at approximately 4:10 PM, RI#1 and RI#1's golf cart were found laying behind the facility in the facility's drainage ditch approximately 12 feet beyond the facility's courtyard. The facility fence had thin rails and the drainage ditch was clearly visible from inside the fence, and also from the sidewalk surrounding the facility. The drainage ditch was mown grass approximately five feet from front to back, and three to four feet deep from top to bottom. The sides of the ditch were angled, not straight down. The sidewalk that surrounded the facility varied in it's distance from the drainage ditch. Some areas of the sidewalk were approximately three to four feet from the</p>	A 504		

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A 504	<p>Continued From page 18</p> <p>ditch while others were six feet or more from the drainage ditch. There was no fence or railing between the sidewalk and the drainage ditch. RI#1 was found by RI#2 and RI#3's dog.</p> <p>RI#2's statement, dated September 08, 2022, written by EI#1 documented that RI#2 assisted RI#1 to get transferred into the golf cart, on the day of the incident/September 08, 2022, because RI#1 was "having a very difficult time getting on the (golf) cart ... (RI#1) took off going pretty fast."</p> <p>RI#1 was described in separate interviews by EI#1, EI#2, EI#3, EI#4, and EI#5, as unresponsive and not moving when RI#1 was first observed by each employee. EI#1 told the surveyor that EI#1 did not check for a pulse, if RI#1 was breathing, and did not provide any type of first aide or CPR. EI#2 told the surveyor that EI#2 checked RI#1's wrist, thought he/she felt a weak pulse, did not check to see if RI#1 was breathing, and did not provide any type of first aide or CPR. EI#3 told the surveyor that EI#3 did not check for a pulse, if RI#1 was breathing, and did not provide any type of first aide or CPR. EI#4 told the surveyor that EI#4 did not check for a pulse, could not tell if RI#1 was breathing, and did not provide any type of first aide or CPR. EI#5 told the surveyor that EI#5 did not check for a pulse, if RI#1 was breathing, and did not provide any type of first aide or CPR.</p> <p>Each employee told the surveyor in separate interviews that he/she was afraid to move RI#1 and fearful of causing additional injuries. RI#3 told the surveyor that EI#3, EI#4, and EI#5 removed the golf cart which had RI#1's head pinned to the ground.</p>	A 504		

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A 504	<p>Continued From page 19</p> <p>El#1, El#2, El#3, El#4, and El#5, all had documentation in their employee files that they had been trained in first aid upon hire as required. El#2 and El#3, were the only employees working that shift, who had current CPR training documentation in their employee files. El#5's CPR training certification had expired in July 2022. El#1 and El#4 did not have any CPR training documentation in their employee files. El#4 was within the first 90 days of employment with the facility.</p> <p>El#1 told the surveyor that the fire department crew initiated CPR immediately upon their arrival.</p> <p>According to the emergency medical services (EMS) run report, dispatch received the 9-1-1 call at 4:13 PM; the EMS crew's arrived on the scene at 4:31 PM, and RI#1 was pronounced dead at 4:34 PM. The EMS run report described RI#1 as "unresponsive... chest was cold to touch... hands were blue....".</p> <p>On September 22, 2022, at approximately 4:50 PM, El#1 and El#6 told the surveyor that they had not developed a plan of action to address the lack of response by the facility employees to provide first aid or CPR to RI#1 after RI#1 was found unresponsive in the facility's drainage ditch. They had also not developed a plan of action to prevent the reoccurrence of a similar incident. El#1 and El#6 agreed that the facility needed to ensure that at least one properly trained employee who was willing to provide first aid and CPR was scheduled on each shift.</p>	A 504		
A 508	<p>420.5.4-.05 (3) (h) Records and Reports.</p> <p>(h) Incident Investigation. When an</p>	A 508		

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A 508	<p>Continued From page 20</p> <p>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 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</p>	A 508		

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A 508	<p>Continued From page 21</p> <p>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> <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</p>	A 508		

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A 508	<p>Continued From page 22</p> <p>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> <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>	A 508		

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A 508	<p>Continued From page 23</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 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>	A 508		

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A 508	<p>Continued From page 24</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 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</p>	A 508		

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A 508	<p>Continued From page 25</p> <p>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> <p>(ii) Time and date of the report.</p> <p>(iii) Reporter's name.</p> <p>(iv) Name of resident(s), staff, or visitor(s) involved in the incident.</p> <p>(v) Names of staff on duty at the time of the incident.</p> <p>(vi) Date and time of the incident.</p> <p>(vii) A brief description of the incident.</p> <p>(viii) Any injury or injuries to resident(s).</p> <p>(ix) Action taken by the facility in response to the incident.</p>	A 508		

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A 508	<p>Continued From page 26</p> <p>This Rule is not met as evidenced by: Based on interview and record review the facility administrator did not accurately describe the injuries received by a resident in a report submitted to ADPH through the Online Incident Reporting System. The facility administrator also did not develop an action plan to prevent reoccurrence of a similar type of incident. This deficient practice placed all 18 residents at risk for significant harm.</p> <p>Findings:</p> <p>On September 09, 2022, EI#1 reported an incident, which occurred on September 08, 2022, involving RI#1 and a golf cart, to ADPH's Online Incident Reporting System. The OIR (online incident report) was inaccurately completed by EI#1. The incident report listed RI#3's name under the area where the administrator was supposed to describe the injuries suffered by RI#1. The online report also did not document the actions taken to prevent reoccurrence of a similar incident.</p> <p>On September 22, 2022, the surveyor was told by EI#1 that he/she had almost quit because of the incident involving RI#1, and had not been able to develop a plan of action to prevent a similar incident from reoccurring.</p> <p>For additional information please refer to deficiency #504.</p>	A 508		

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A 611	Continued From page 27	A 611		
A 611	<p>420-5-4-.06 (4) (a) (b) Care of Residents.</p> <p>(4) Personal Care and Services. The facility shall provide care and services consistent with community standards.</p> <p>(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.</p> <p>(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 with the resident and, if appropriate, the sponsor. All entries on the plan of care shall be accurately dated.</p> <p>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:</p> <p>2. A listing of the resident's individual needs or problems that require intervention by the facility.</p>	A 611		

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A 611	<p>Continued From page 28</p> <p>3. A listing of interventions provided by the facility to address the resident's identified needs or problems.</p> <p>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.</p> <p>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.</p> <p>(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.</p> <p>(ii) Oral Hygiene. Residents shall be 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</p>	A 611		

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A 611	<p>Continued From page 29</p> <p>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, facility employees did not provide first aid and cardiopulmonary resuscitation (CPR) to a non-responsive resident who was seriously injured in a golf cart incident on the facility grounds. This deficient practice affected at least one resident (RI#1) and placed the remaining 18 residents at risk for significant harm and even death.</p> <p>Findings:</p> <p>On September 09, 2022, EI#1 reported an incident involving RI#1 and a golf cart to ADPH's Online Incident Reporting System. The OIR (online incident report) did not describe the injuries suffered by RI#1.</p> <p>On September 22, 2022, at approximately 4:50 PM, the surveyor reviewed RI#1's record and the September 08, 2022 incident documentation with EI#1 and EI#6.</p> <p>RI#1 was admitted to the facility on August 26, 2022, with diagnoses which included cerebrovascular accident with right hemiplegia, diabetes mellitus type II, seizure disorder, coronary artery disease, hypertension, and atrial</p>	A 611		

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A 611	<p>Continued From page 30</p> <p>fibrillation. RI#1 had physician's orders for Plavix (a medication which alters blood clotting). RI#1's physician medical examination, dated August 20, 2022, documented that RI#1 required assistance with all activities of daily living including grooming, bathing, dressing, and toileting.</p> <p>RI#1's record documented on the care plan and the medication administration record that RI#1 was a full code and RI#1 did not have a "Do Not Attempt Resuscitation" (DNAR) order signed by RI#1's physician.</p> <p>On September 06, 2022, RI#1 was found on the floor after a fall. RI#1 did not have any injuries noted at that time. EI#1 documented, "Getting home health to work with (RI#1). (RI#1) really needs to push pendant (for assistance)."</p> <p>EI#1 told the surveyor that RI#1's sponsor brought RI#1's golf cart to the facility on approximately September 05, 2022, for RI#1's use. EI#1 told the surveyor that EI#1 nor any other employee had completed any kind of assessment of RI#1's ability to safely drive the golf cart and nobody had checked to ensure that RI#1's golf cart was safe for RI#1 to drive.</p> <p>EI#2, EI#3 and EI#5 all told the surveyor that RI#1 was able to transfer without any assistance. EI#2, EI#3 and EI#5 also told the surveyor that RI#1 required some assistance in the morning, but was able to transfer independently throughout the rest of the day, even though RI#1 had weakness and limited mobility of RI#1's right leg.</p> <p>EI#2, EI#3, EI#4 and EI#5 all told the surveyor that they had not ridden on the golf cart with RI#1. EI#2 told the surveyor that EI#2 had observed RI#1 drive the golf cart all over the facility</p>	A 611		

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A 611	<p>Continued From page 31</p> <p>property including in front of and behind the drainage ditch. EI#2 was aware of only one instance where an employee had seen RI#1 drive the golf cart to the mall located not far from the facility. EI#3 and EI#5 told the surveyor that RI#1 was only seen driving the golf cart on the facility grounds.</p> <p>EI#1, EI#2, EI#3, EI#4 and EI#5 were all working on September 08, 2022, when they began looking for RI#1 due to a change in the weather conditions (overcast and looking like rain) and also because RI#1 had not been seen since approximately 2:00 PM. RI#1 had not signed himself/herself out of the facility. RI#1's sponsor was also searching around the community for RI#1 on the golf cart.</p> <p>On September 08, 2022, at approximately 4:10 PM, RI#1 and RI#1's golf cart were found laying behind the facility in the facility's drainage ditch approximately 12 feet beyond the facility's courtyard. The facility fence had thin rails and the ditch was clearly visible from inside the fence, and also from the sidewalk surrounding the facility. The drainage ditch was mown grass approximately five feet from front to back, and three to four feet deep from top to bottom. The sides of the ditch were angled not straight down. The sidewalk that surrounded the facility varied in it's distance from the drainage ditch. Some areas of the sidewalk were approximately three to four feet from thee ditch while others were six feet or more from the drainage ditch. There was no fence or railing between the sidewalk and the drainage ditch.</p> <p>EI#1 told the surveyor that on September 08, 2022, at approximately 4:10 PM, RI#1 was found behind the facility, with the golf cart turned over in</p>	A 611		

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A 611	<p>Continued From page 32</p> <p>the drainage ditch on the facility's property. RI#1 was found by RI#2 and RI#3's dog.</p> <p>RI#2's statement, dated September 08, 2022, written by EI#1, documented that RI#2 assisted RI#1 to get transferred into the golf cart on the day of the incident/September 08, 2022, because RI#1 was "having a very difficult time getting on the (golf) cart ... (RI#1) took off going pretty fast."</p> <p>RI#1 was described in separate interviews by EI#1, EI#2, EI#3, EI#4, and EI#5, as unresponsive and not moving when RI#1 was first observed by each employee.</p> <p>EI#1 did not check for a pulse, if RI#1 was breathing, and did not provide any type of first aide or CPR.</p> <p>EI#2 checked RI#1's wrist, thought he/she felt a weak pulse, did not check to see if RI#1 was breathing, and did not provide any type of first aide or CPR.</p> <p>EI#3 did not check for a pulse, if RI#1 was breathing, and did not provide any type of first aide or CPR.</p> <p>EI#4 did not check for a pulse, could not tell if RI#1 was breathing, and did not provide any type of first aide or CPR.</p> <p>EI#5 did not check for a pulse, if RI#1 was breathing, and did not provide any type of first aide or CPR.</p> <p>Each employee told the surveyor that he/she was afraid to move RI#1, fearful of causing additional injuries. RI#3 told the surveyor that EI#3, EI#4 and EI#5 removed the golf cart which had RI#1's head pinned to the ground. EI#1, EI#2, EI#3, EI#4 and EI#5 all had documentation in their employee files that they had been trained in first aid upon hire as required. EI#2 and EI#3 were the only employees working that shift who had current</p>	A 611		

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A 611	<p>Continued From page 33</p> <p>CPR training documentation in their employee files. EI#5's CPR training certification had expired in July 2022. EI#1 and EI#4 did not have any CPR training documentation in their employee files.</p> <p>EI#1 told the surveyor that the fire department crew initiated CPR upon their arrival.</p> <p>According to the emergency medical services (EMS) run report, dispatch received the 9-1-1 call at 4:13 PM; the EMS crew's arrived on the scene at 4:31 PM, and RI#1 was pronounced dead at 4:34 PM. The EMS run report described RI#1 as "unresponsive... chest was cold to touch... hands were blue....".</p> <p>EI#1 and EI#6 told the surveyor that they had not developed a plan of action to address the lack of response by the facility employees to provide first aid or CPR to RI#1 after RI#1 was found unresponsive in the facility's drainage ditch. EI#1 and EI#6 agreed that the facility needed to ensure that at least one properly trained employee who was willing to provide first aid and CPR was scheduled on each shift.</p> <p>TONYA AVENATTI, REGISTERED NURSE</p>	A 611		