

Department of Human Services
Bureau of Human Service Licensing

October 18, 2021

[REDACTED]
LCB CHADDS FORD LLC
[REDACTED]
[REDACTED]

[REDACTED]: THE RESIDENCE AT CHADDS FORD
1778 WILMINGTON PIKE
GLEN MILLS, PA, 19342
LICENSE/COC#: 14536

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 05/11/2021 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,
Shawn Parker

Enclosure
Licensing Inspection Summary (LIS)

cc: Pennsylvania Bureau of Human Service Licensing

**Department of Human Services
Bureau of Human Service Licensing
LICENSING INSPECTION SUMMARY**

Facility Information

Name: *THE RESIDENCE AT CHADDS FORD* License #: *14536* License Expiration Date: *12/06/2021*
Address: *1778 WILMINGTON PIKE, GLEN MILLS, PA 19342*
County: *DELAWARE* Region: *SOUTHEAST*

Administrator

Name: [REDACTED] Phone: *6102223333* Email: [REDACTED]

Legal Entity

Name: *LCB CHADDS FORD LLC*
Address: *3 EDGEWATER DRIVE, SUITE 101, NORWOOD, MA, 2062*
Phone: *6102223333* Email: [REDACTED]

Certificate(s) of Occupancy

Type: *I-1* Date: *10/08/2019* Issued By: *Chadds Ford Township*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *50* Waking Staff: *38*

Inspection

Type: *Partial* Notice: *Unannounced* BHA Docket #:
Reason: *Incident* Exit Conference Date: *05/11/2021*

Inspection Dates and Department Representative

05/11/2021 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *108* Residents Served: *33*

Secured Dementia Care Unit

In Home: *Yes* Area: *Reflections* Capacity: *24* Residents Served: *11*

Hospice

Current Residents: *0*

Number of Residents Who:

Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *33*
Diagnosed with Mental Illness: *1* Diagnosed with Intellectual Disability: *0*
Have Mobility Need: *17* Have Physical Disability: *1*

Inspections / Reviews

05/11/2021 - Partial

Lead Inspector: [REDACTED]

Follow-Up Type: *POC Submission*

Follow-Up Date: *07/23/2021*

9/22/2021 - POC Submission

Lead Reviewer: [REDACTED]

Follow-Up Type: *Document Submission*

Follow-Up Date: *10/18/2021*

10/18/2021 - Document Submission

Lead Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

16c - Written Incident Report

1. Requirements

2600.

- 16.c. The home shall report the incident or condition to the Department’s personal care home regional office or the personal care home complaint hotline within 24 hours in a manner designated by the Department. Abuse reporting shall also follow the guidelines in § 2600.15 (relating to abuse reporting covered by law).

Description of Violation

Resident #1 is prescribed Quetiapine Fumarate Oral Tablet 25 MG. However, this medication was not administered to resident #1 on 5/4/21 at 6:00 am because the medication was not available in the home. This was not reported to the Department

Resident #1 is prescribed Alprazolam Oral Tablet 0.25 MG. However, this medication was not administered to resident #1 on 5/8/21 at 4:00 pm because the medication was not available in the home. This was not reported to the Department.

Plan of Correction

Accept

*Audit of MARs will be completed, and additional medication errors, if discovered, will be reported.
Nurses and Medication Technicians will receive in-service education regarding written incident report process, medication omission, as it relates to the regulatory requirement stated in 2600.16c
Education will be completed by October 16, 2021.
MARS will be reviewed for completion by the Nurse/Medication Technician prior to the end of their shift. RCD or his/her designee will conduct random audit consisting of 10% sample of MARs for compliance twice weekly for a period of 90 days.*

Completion Date: 10/16/2021

Document Submission

Implemented

*16c – Written Incident Report
Audit of MARs will be completed, and additional medication errors, if discovered, will be reported.
Nurses and Medication Technicians will receive in-service education regarding written incident report process, medication omission, as it relates to the regulatory requirement stated in 2600.16c
Education will be completed by October 16, 2021.
MARS will be reviewed for completion by the Nurse/Medication Technician prior to the end of their shift. RCD or his/her designee will conduct random audit consisting of 10% sample of MARs for compliance twice weekly for a period of 90 days.*

42b - Abuse

1. Requirements

2600.

- 42.b. A resident may not be neglected, intimidated, physically or verbally abused, mistreated, subjected to corporal punishment or disciplined in any way.

42b - Abuse (continued)

Description of Violation

Resident #1 has dementia with behavioral disturbances. Resident #1 is prescribed medications to help with [REDACTED] behaviors. Resident #1's support plan dated [REDACTED] lists dementia with behavioral disturbances and psychosis under the section "Medical Diagnosis- Psychological". The plan to meet resident #1's psychological needs is to "medicate as ordered". The medications resident #1 is currently prescribed are Quetiapine Fumarate Oral Tablet 25 MG, Rivastigmine Transdermal Patch 24 Hour 4.6 MG, and Alprazolam Oral Tablet 0.25 MG.

The home has been failing to medicate the resident as ordered by the resident #1's physician. According to resident #1's Medication Administration Record (MAR) for April 2021 and May 2021, the resident is not being administered the medications per the prescriber's orders and the home has not been notifying the prescriber. Resident #1 is prescribed Alprazolam Oral Tablet 0.25 MG, 1 tablet by mouth twice per day. However, resident #1's MAR shows the medication was not administered on 5/7/21 at 4:00 pm, 5/8/21 at 8:00 am, and 5/9/21 at 8:00 am and 4:00 pm. Resident #1 is prescribed Quetiapine Fumarate Oral Tablet 25 MG, 1/2 tablet by mouth every 8 hours. However, resident #1's MAR shows the medication was not administered on 4/5/21 at 2:00 pm and 10:00 pm, 4/7/21 at 2:00 pm, 4/8/21 at 10:00 pm, 4/12/21 at 10:00 pm, 4/13/21 at 6:00 am, 4/15/21 at 2:00 pm, 4/20/21 at 2:00 pm, 4/22/21 at 2:00 pm, 4/24/21 at 6:00 am and 10:00 pm, 4/25/21 at 6:00 am, 4/26/21 at 2:00 pm, 4/30/21 at 2:00 pm, 5/2/21 at 6:00 am, 5/8/21 at 2:00 pm, and 5/9/21 at 6:00 am, 2:00 pm, and 10:00 pm. Resident #1 is prescribed Rivastigmine Transdermal Patch 24 Hour 4.6 MG, 1 patch transdermal every day. However, resident #1's MAR shows the medication was not administered on 4/30/21, 5/1/21, 5/2/21, 5/8/21, and 5/9/21.

The home has two confirmed instances in which the medications necessary to help with resident #1's behaviors have not been available in the home. Quetiapine Fumarate Oral Tablet 25 MG was not administered to resident #1 on 5/4/21 at 6:00 am because the medication was not available in the home and Alprazolam Oral Tablet 0.25 MG was not administered to the resident on 5/8/21 at 4:00 pm because the medication was not available in the home.

Plan of Correction**Accept**

All Nurses and Medication Technicians have been assigned logins for the EMAR system to date. Associates will receive in-service education regarding abuse as it applies to medication omission and documentation thereof as it relates to the regulatory requirement stated in section 2600.42 Education will be completed by October 16, 2021. MARS will be reviewed for completion by the Nurse/Medication Technician prior to the end of their shift. RCD or his/her designee will conduct random audit consisting of 10% sample of MARs for compliance twice weekly for a period of 90 days.

Completion Date: 10/16/2021

Document Submission**Implemented**

42b – Abuse

All Nurses and Medication Technicians have been assigned logins for the EMAR system to date. Associates will receive in-service education regarding abuse as it applies to medication omission and documentation thereof as it relates to the regulatory requirement stated in section 2600.42 Education will be completed by October 16, 2021. MARS will be reviewed for completion by the Nurse/Medication Technician prior to the end of their shift. RCD or his/her designee will conduct random audit consisting of 10% sample of MARs for compliance twice weekly for a period of 90 days.

183d - Prescription Current**1. Requirements**

2600.

183.d. Only current prescription, OTC, sample and CAM for individuals living in the home may be kept in the home.

Description of Violation

On 5/11/21, Rivastigmine Transdermal Patch 24 Hour 9.5 MG prescribed for resident #1, was in the home's medication cart in Reflections; however, the medication was discontinued on 4/6/21.

Plan of Correction**Accept**

Medication carts will be audited for discontinued medications with each delivery from the pharmacy.

Nurses and Medication Technicians will receive in- service education regarding medication management with emphasis on removal of dis-continued medications upon receipt of discontinue order in relation to requirement

2600.183d

Education will be completed by October 16,2021

RCD or [REDACTED] designee will conduct a monthly random audit to ensure discontinued medications are not present in the medication carts. Sample size to include 10% sample of those residents receiving medication assistance.

Monitoring for compliance will continue for a period of 90 days.

Completion Date: 10/16/2021

Document Submission**Implemented**

183d – Prescription Current

Medication carts will be audited for discontinued medications with each delivery from the pharmacy.

Nurses and Medication Technicians will receive in- service education regarding medication management with emphasis on removal of dis-continued medications upon receipt of discontinue order in relation to requirement

2600.183d

Education will be completed by October 16,2021

or [REDACTED] designee will conduct a monthly random audit to ensure discontinued medications are not present in the medication RCD carts. Sample size to include 10% sample of those residents receiving medication assistance.

Monitoring for compliance will continue for a period of 90 days.

185b - Medication Procedures**1. Requirements**

2600.

185.b. At a minimum, the procedures must include:

1. Documentation of the receipt of controlled substances and prescription medications.
2. A process to investigate and account for missing medications and medication errors.
3. Limited access to medication storage areas.
4. Documentation of the administration of prescription medications, OTC medications and CAM for residents who receive medication administration services or assistance with self-administration. This requirement does not apply to a resident who self-administers medication without the assistance of a staff person and stores the medication in his room.

Description of Violation

Staff person A administered Alprazolam Oral Tablet 0.25 MG to resident #1 On 05/11/21 at 9:00 am. Staff member A did not update the narcotic count sheet to reflect resident #1 had been administered the medication until 5/11/21 at 12:07 pm, after an agent from the Department asked to see the narcotic count book.

185b - Medication Procedures (continued)

Plan of Correction**Accept**

Narcotic counts will be conducted each shift.

Nurses and Medication Technicians will receive in- service education regarding medication management with emphasis on controlled substances in relation to requirement 2600.185b

Education will be completed by October 16, 2021

RCD or [REDACTED] designee will conduct, and administrative narcotic count weekly to ensure compliance. Monitoring for compliance will continue for a period of 90 days.

Completion Date: 10/16/2021

Document Submission**Implemented**

185b – Medication Procedures

Narcotic counts will be conducted each shift.

Nurses and Medication Technicians will receive in- service education regarding medication management with emphasis on controlled substances in relation to requirement 2600.185b

Education will be completed by October 16, 2021

RCD or [REDACTED] designee will conduct, and administrative narcotic count weekly to ensure compliance. Monitoring for compliance will continue for a period of 90 days.

187b - Date/Time of Medication Admin.

1. Requirements

2600.

187.b. The information in subsection (a)(13) and (14) shall be recorded at the time the medication is administered.

Description of Violation

According to staff member B, agency staff administers medication but they do not have access to the home's system to update electronic MARs when medications are administered.

Plan of Correction**Accept**

All Nurses and Medication Technicians have been assigned logins for the EMAR system to date.

Nurses and Medication Technicians will receive in- service education regarding medication management with emphasis on timely documentation following administration of all medications in relation to requirement 2600.187b

Education will be completed by October 16, 2021.

MARS will be reviewed for completion by the Nurse/Medication Technician prior to the end of their shift. RCD or his/her designee will conduct random audit consisting of 10% sample of MARs for compliance twice weekly for a period of 90 days.

Completion Date: 10/16/2021

187b - Date/Time of Medication Admin. (continued)

Document Submission**Implemented***187b – Date/Time of Medication Administration**All Nurses and Medication Technicians have been assigned logins for the EMAR system to date.**Nurses and Medication Technicians will receive in- service education regarding medication management with emphasis on timely documentation following administration of all medications in relation to requirement 2600.187b Education will be completed by October 16, 2021.**MARS will be reviewed for completion by the Nurse/Medication Technician prior to the end of their shift. RCD or [REDACTED] designee will conduct random audit consisting of 10% sample of MARs for compliance twice weekly for a period of 90 days.*

187c - Refusal of Medication

1. Requirements

2600.

187.c. If a resident refuses to take a prescribed medication, the refusal shall be documented in the resident's record and on the medication record. The refusal shall be reported to the prescriber within 24 hours, unless otherwise instructed by the prescriber. Subsequent refusals to take a prescribed medication shall be reported as required by the prescriber.

Description of Violation

On 4/22/21 at 8:00 pm, resident #1 refused to take a scheduled dose of Melatonin 5 MG and a dose of Mirtazapine Oral Tablet 15mg. The home did not document the refusal in the resident's record and did not report the refusal to the prescriber.

On 4/22/21 at 8:00 pm and 5/7/21 at 2:00 pm, resident #1 refused to take a scheduled dose of Quetiapine Fumarate Oral Tablet 25 MG. The home did not document the refusal in the resident's record and did not report the refusal to the prescriber.

On 5/5/21 at 8:00 am, 5/6/21 at 8:00 am, and 5/7/21 at 8:00 am, resident #1 refused TED Stockings. The home did not document the refusal in the resident's record and did not report the refusal to the prescriber.

On 5/7/21 at 7:00 am, resident #1 refused to take a scheduled dose of Amlodipine Besylate Oral Tablet 5 MG. The home did not document the refusal in the resident's record and did not report the refusal to the prescriber.

Plan of Correction**Accept***Audit of MARS will be completed, and further refusals, if discovered, will be documented, and reported.**Nurses and Med Techs will receive in-service education regarding medication management with emphasis on medication refusal in relation to requirement 2600.187c**Education shall be completed by October 16, 2021**MARS will be reviewed for completion by the Nurse/Medication Technician prior to the end of their shift. RCD or his/her designee will conduct random audit consisting of 10% sample of MARS for compliance twice weekly for a period of 90 days.***Completion Date:** 10/16/2021

187c - Refusal of Medication (continued)

Document Submission

Implemented

187c – Refusal of Medication

Audit of MARS will be completed, and further refusals, if discovered, will be documented, and reported.

Nurses and Med Techs will receive in-service education regarding medication management with emphasis on medication refusal in relation to requirement 2600.187c

Education shall be completed by October 16, 2021

MARS will be reviewed for completion by the Nurse/Medication Technician prior to the end of [REDACTED] shift. RCD or [REDACTED] designee will conduct random audit consisting of 10% sample of MARS for compliance twice weekly for a period of 90 days.

187d - Follow Prescriber's Orders

1. Requirements

2600.

187.d. The home shall follow the directions of the prescriber.

Description of Violation

Resident #1 is prescribed Quetiapine Fumarate Oral Tablet 25 MG. However, this medication was not administered on 5/4/21 at 6:00 am because the medication was not available in the home.

Resident #1 is prescribed Alprazolam Oral Tablet 0.25 MG. However, this medication was not administered on 5/8/21 at 4:00 pm because the medication was not available in the home.

Plan of Correction

Accept

All Nurses and Medication Technicians have been assigned logins for EMAR system to date.

Nurses will receive in-service education regarding Physician order management and documentation in relation to requirement 2600.187d.

Education will be completed by October 16, 2021.

MARS will be reviewed for completion by the Nurse/Medication Technician prior to the end of their shift. RCD or [REDACTED] designee will conduct random audit consisting of 10% sample of MARS for compliance twice weekly for a period of 90 days.

Completion Date: 10/16/2021

Document Submission

Implemented

187d – Follow Prescriber’s Order

All Nurses and Medication Technicians have been assigned logins for EMAR system to date.

Nurses will receive in-service education regarding Physician order management and documentation in relation to requirement 2600.187d.

Education will be completed by October 16, 2021.

MARS will be reviewed for completion by the Nurse/Medication Technician prior to the end of their shift. RCD or [REDACTED] designee will conduct random audit consisting of 10% sample of MARS for compliance twice weekly for a period of 90 days.

2. Requirements

2600.

187d - Follow Prescriber's Orders (continued)

187.d. The home shall follow the directions of the prescriber.

Description of Violation

Resident #1 is prescribed Alprazolam Oral Tablet 0.25 MG, 1 tablet by mouth twice per day. However, resident #1's MAR shows the medication was not administered on 5/7/21 at 4:00 pm, 5/8/21 at 8:00 am, and 5/9/21 at 8:00 am and 4:00 pm.

Resident #1 is prescribed Amlodipine Besylate Oral Tablet 5 MG, one tablet by mouth every day. However, resident #1's MAR shows the medication was not administered on 4/15/21, 4/22/21, 4/30/21, 5/8/21, and 5/9/21.

Resident #1 is prescribed Furosemide Oral Tablet 20 MG, one tablet by mouth every day. However, resident #1's MAR shows the medication was not administered on 4/30/21, 5/1/21, 5/2/21, 5/8/21, and 5/9/21.

Resident #1 is prescribed Melatonin 5 MG, one tablet by mouth every day at bedtime. However, resident #1's MAR shows the medication was not administered on 4/5/21, 4/8/21, 4/12/21, 4/24/21, and 5/9/21.

Resident #1 is prescribed Mirtazapine Oral Tablet 15 MG, two tablets by mouth every day at bedtime. However, resident #1's MAR shows the medication was not administered on 4/5/21, 4/8/21, 4/12/21, 4/24/21, and 5/9/21.

Resident #1 is prescribed Quetiapine Fumarate Oral Tablet 25 MG, 1/2 tablet by mouth every 8 hours. However, resident #1's MAR shows the medication was not administered on 4/5/21 at 2:00 pm and 10:00 pm, 4/7/21 at 2:00 pm, 4/8/21 at 10:00 pm, 4/12/21 at 10:00 pm, 4/13/21 at 6:00 am, 4/15/21 at 2:00 pm, 4/20/21 at 2:00 pm, 4/22/21 at 2:00 pm, 4/24/21 at 6:00 am and 10:00 pm, 4/25/21 at 6:00 am, 4/26/21 at 2:00 pm, 4/30/21 at 2:00 pm, 5/2/21 at 6:00 am, 5/8/21 at 2:00 pm, and 5/9/21 at 6:00 am, 2:00 pm, and 10:00 pm.

Resident #1 is prescribed Rivastigmine Transdermal Patch 24 Hour 4.6 MG, 1 patch transdermal every day. However, resident #1's MAR shows the medication was not administered on 4/30/21, 5/1/21, 5/2/21, 5/8/21, and 5/9/21.

Resident #1 is prescribed TED Stockings, on in the morning and remove at bedtime. However, resident #1's MAR shows the TED stockings were not applied on 4/21/21, 4/22/21, 4/26/21, 4/28/21, 4/30/21, 5/3/21, 5/8/21, 5/9/21, and 5/10/21.

Plan of Correction**Accept**

All Nurses and Medication Technicians have been assigned logins for EMAR system to date.

Nurses will receive in-service education regarding Physician order management and documentation in relation to requirement 2600.187d.

Education will be completed by October 16, 2021.

MARS will be reviewed for completion by the Nurse/Medication Technician prior to the end of their shift. RCD or [REDACTED] designee will conduct random audit consisting of 10% sample of MARS for compliance twice weekly for a period of 90 days.

Completion Date: 10/16/2021

187d - Follow Prescriber's Orders *(continued)***Document Submission****Implemented***187d – Follow Prescriber's Order**All Nurses and Medication Technicians have been assigned logins for EMAR system to date.**Nurses will receive in-service education regarding Physician order management and documentation in relation to requirement 2600.187d.**Education will be completed by October 16, 2021.**MARS will be reviewed for completion by the Nurse/Medication Technician prior to the end of their shift. RCD or [REDACTED] designee will conduct random audit consisting of 10% sample of MARS for compliance twice weekly for a period of 90 days.*

188b - Medication Error Reporting

1. Requirements

2600.

188.b. A medication error shall be immediately reported to the resident, the resident's designated person and the prescriber.

Description of Violation*Resident #1 is prescribed Quetiapine Fumarate Oral Tablet 25 MG. However, this medication was not administered to resident #1 on 5/4/21 at 6:00 am because the medication was not available in the home. This was not reported to the prescriber.**Resident #1 is prescribed Alprazolam Oral Tablet 0.25 MG. However, this medication was not administered to resident #1 on 5/8/21 at 4:00 pm because the medication was not available in the home. This was not reported to the prescriber.***Plan of Correction****Accept***MARS and progress notes will be audited for notation of unavailability of medications.**Nurses and Medication Technicians will receive in-service education regarding medication error reporting in relation to unavailability of medications as stated in regulatory requirement 2600.188b**Education will be completed by October 16, 2021.**MARS will be reviewed for completion by the Nurse/Medication Technician prior to the end of their shift. RCD or [REDACTED] designee will conduct random audit consisting of 10% sample of MARs and progress notes for compliance twice weekly for a period of 90 days.***Completion Date:** 10/16/2021

188b - Medication Error Reporting (continued)

Document Submission

Implemented

188b- Medication error reporting

MARS and progress notes will be audited for notation of unavailability of medications.

Nurses and Medication Technicians will receive in-service education regarding medication error reporting in relation to unavailability of medications as stated in regulatory requirement 2600.188b

Education will be completed by October 16, 2021.

MARS will be reviewed for completion by the Nurse/Medication Technician prior to the end of their shift. RCD or [redacted] designee will conduct random audit consisting of 10% sample of MARs and progress notes for compliance twice weekly for a period of 90 days.

225a - Assessment 15 Days

1. Requirements

2600.

225.a. A resident shall have a written initial assessment that is documented on the Department’s assessment form within 15 days of admission. The administrator or designee, or a human service agency may complete the initial assessment.

Description of Violation

An assessment was not completed for resident #1, who was admitted to the home on [redacted].

Plan of Correction

Accept

Assessments will be audited for completion within the 15-day period from move in, with change of condition and annually.

Nurses will receive in service education regarding completion of assessments in a timely fashion to fulfill the regulatory requirement stated in 2600.225a and 2600.225c.

Education will be completed by October 16,2021.

RCD or [redacted] designee will review each move in assessment, change of condition assessment, as well as annual assessment for accurate time of completion. Monitoring for compliance will continue for a period of 90 days.

Completion Date: 10/16/2021

Document Submission

Implemented

225a – Assessment requirements

Assessments will be audited for completion within the 15-day period from move in, with change of condition and annually.

Nurses will receive in service education regarding completion of assessments in a timely fashion to fulfill the regulatory requirement stated in 2600.225a and 2600.225c.

Education will be completed by October 16,2021.

RCD or [redacted] designee will review each move in assessment, change of condition assessment, as well as annual assessment for accurate time of completion. Monitoring for compliance will continue for a period of 90 days.

225c - Additional Assessment

1. Requirements

2600.

225c - Additional Assessment (continued)

225.c. The resident shall have additional assessments as follows:

- 1. Annually.
- 2. If the condition of the resident significantly changes prior to the annual assessment.
- 3. At the request of the Department upon cause to believe that an update is required.

Description of Violation

Resident #2's current assessment was completed on [redacted] However, the resident's previous assessment was completed on [redacted]

Plan of Correction

Accept

Assessments will be audited for completion within the 15-day period from move in, with change of condition and annually.

Nurses will receive in service education regarding completion of assessments in a timely fashion to fulfill the regulatory requirement stated in 2600.225a and 2600.225c.

Education will be completed by October 16,2021.

RCD or [redacted] designee will review each move in assessment, change of condition assessment, as well as annual assessment for accurate time of completion. Monitoring for compliance will continue for a period of 90 days.

Completion Date: 10/16/2021

Document Submission

Implemented

225c – Assessment requirements

Assessments will be audited for completion within the 15-day period from move in, with change of condition and annually.

Nurses will receive in service education regarding completion of assessments in a timely fashion to fulfill the regulatory requirement stated in 2600.225a and 2600.225c.

Education will be completed by October 16,2021.

RCD or his/her designee will review each move in assessment, change of condition assessment, as well as annual assessment for accurate time of completion. Monitoring for compliance will continue for a period of 90 days.

227g -Support Plan Signatures

1. Requirements

2600.

227.g. Individuals who participate in the development of the support plan shall sign and date the support plan.

Description of Violation

Resident #2's support plan dated [redacted] does not have a signature page.

Resident #2's support plan dated [redacted] was not signed by the assessor.

227g -Support Plan Signatures (continued)

Plan of Correction

Accept

Support plans will be audited for signatures of all that participated in the development of said plan.
 Nurses will receive in-service education regarding support plan documentation to fulfill the regulatory requirement as stated in 2600.227g
 Education will be provided by October 16, 2021
 ED/RCD or his/her designee will review each support plan prior to 30 days post move in to ensure appropriate signatures are present. Monitoring for compliance will continue for a period of 90 days.

Completion Date: 10/16/2021

Document Submission

Implemented

227g
 Support plans will be audited for signatures of all that participated in the development of said plan.
 Nurses will receive in-service education regarding support plan documentation to fulfill the regulatory requirement as stated in 2600.227g
 Education will be provided by October 16, 2021
 ED/RCD or [redacted] designee will review each support plan prior to 30 days post move in to ensure appropriate signatures are present. Monitoring for compliance will continue for a period of 90 days.

231c - Preadmission Screening

1. Requirements

2600.

231.c. A written cognitive preadmission screening completed in collaboration with a physician or a geriatric assessment team and documented on the Department's preadmission screening form shall be completed for each resident within 72 hours prior to admission to a secured dementia care unit.

Description of Violation

Resident #1 was admitted to the Secure Dementia Care Unit (SDCU) on [redacted]. However, the resident #1's written cognitive preadmission screening was not completed.

Plan of Correction

Accept

Preadmission screenings will be audited for timely completion within the 72-hour time frame.
 Nurses will receive in-service education regarding preadmission screen as it relates to the regulatory requirement stated in 2600.231c
 Education will be completed by October 16,2021.
 ED/RCD/ or [redacted] designee will review all move in documentation for completion on day of move in. Monitoring for compliance will continue for a period of 90 days.

Completion Date: 10/16/2021

231c - Preadmission Screening (continued)**Document Submission****Implemented***231c**Preadmission screenings will be audited for timely completion within the 72-hour time frame.**Nurses will receive in-service education regarding preadmission screen as it relates to the regulatory requirement stated in 2600.231c**Education will be completed by October 16,2021.**ED/RCD/ or his/her designee will review all move in documentation for completion on day of move in. Monitoring for compliance will continue for a period of 90 days.*