



**DELAWARE HEALTH  
AND SOCIAL SERVICES**

Division of Long Term Care  
Residents Protection

DHSS - DLTCRP  
3 Mill Road, Suite 308  
Wilmington, Delaware 19806  
(302) 577-6661

STATE SURVEY REPORT

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NAME OF FACILITY: Foulk Manor North Assisted Living

DATE SURVEY COMPLETED: March 4, 2013

| SECTION  | STATEMENT OF DEFICIENCIES<br>Specific Deficiencies  | ADMINISTRATOR'S PLAN FOR CORRECTION<br>OF DEFICIENCIES WITH ANTICIPATED<br>DATES TO BE CORRECTED   |
|--|---|--|
| <p>3225.5.0</p> <p>3225.11.0</p> <p>3225.11.4</p> <p>3225.11.5</p> | <p>An unannounced annual survey was conducted at this facility beginning February 26, 2013 and ending March 4, 2013. The facility census on the entrance day of the survey was 40. The survey sample was composed of 4 residents. The survey process included observations, interviews and review of resident clinical records, facility documents and facility policies and procedures.</p> <p><b>Assisted Living Regulations</b></p> <p><b>Resident Assessment</b></p> <p><b>The resident assessment shall be completed in conjunction with the resident.</b></p> <p><b>This requirement is not met as evidenced by:</b></p> <p>Based on clinical record reviews and staff interviews it was determined that the facility failed to ensure that UAI assessments were completed in conjunction with one resident (Resident #3) out of 4 sampled. Findings include:</p> <p>Review of Resident #3's annual UAI dated 6/30/2012 revealed it was incomplete without the date and signature of the facility.</p> <p>This finding was reviewed with E1 (executive director), E2 (RN/RSD) and E3 (Human Resource Manager) on 3/4/2013.</p> <p><b>The UAI, developed by the Department, shall be used to update the resident assessment. At a minimum, regular</b></p> | <p>Responses to the cited deficiencies do not constitute an admission of agreement by Foulk Manor North of the truth of the facts alleged or conclusions set forth in the Statement of Deficiencies. The plan of Correction is prepared solely as a matter of Compliance with federal and state law.</p> <ol style="list-style-type: none"> <li>1. An addendum to Resident #3's UAI assessment was added by the Resident Services Director to reflect the date and signature of the Facility.</li> <li>2. The Resident Services Director or designee, will conduct a random audit of other resident UAI assessments for completeness.</li> <li>3. The Resident Services Director or designee, will review all UAI assessments, prior to placing documents in the residents medical record.</li> <li>4. The Resident Services Director of designee, will perform quarterly audits on all UAI assessments and review them during the facility's quarterly Quality Assurance Meetings.</li> </ol> <p>Completion Date: May 1, 2013 and Ongoing</p> |

Provider's Signature

*Wendy L. Gray, NHA*

Title

*Executive Director*

Date

*April 1, 2013*



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| <p><b>3225.13.0</b></p> <p><b>3225.13.1</b></p> | <p><b>updates must occur 30 days after admission, annually and when there is a significant change in the resident's condition.</b></p> <p><b>This requirement is not met as evidenced by:</b></p> <p>Based on clinical record review it was determined that the facility failed to ensure that a UAI assessment occurred 30 days after the admission of one resident (Resident #1) out of four sampled to the assisted living facility. Findings include:</p> <p>Review of the clinical record revealed that an annual UAI was completed for Resident #1 on the day of admission to the assisted living facility, 11/27/2012. Further review of the clinical record revealed that the above referenced UAI was absent an updated assessment completed 30 days after admission of Resident #1 to the assisted living facility.</p> <p>This finding was reviewed with E1 (executive director), E2 (RN/RSD) and E3 (Human Resource Manager) on 3/4/2013.</p> <p><b>Service Agreements</b></p> <p><b>A service agreement based on the needs identified in the UAI shall be completed prior to or no later than the day of admission. The resident shall participate in the development of the agreement. The resident and the facility shall sign the agreement and each shall receive a copy of the signed agreement. All persons who sign the agreement must be able to comprehend and perform their obligations under the agreement.</b></p> | <ol style="list-style-type: none"> <li>1. An Addendum to Resident #1's UAI thirty (30) day Assessment was added by the Resident Services Director.</li> <li>2. The Resident Services Director or designee, will conduct a random audit of other resident assessments for completeness.</li> <li>3. The Resident Services Director or designee, will review all UAI's, prior to pacing documents in the residents medical record.</li> <li>4. The Resident Services Director or designee, will perform quarterly audits on all UAI assessments and review them during the facility's quarterly Quality Assurance Meetings.</li> </ol> <p>Completion Date: May 1, 2013 and Ongoing</p> |



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| 3225.13.5 | <p><b>This requirement is not met as evidenced by:</b></p> <p>Based on clinical record reviews and staff interviews it was determined that the facility failed to ensure that initial service agreements were completed prior to or no later than the day of admission for two residents (Resident #1 and Resident #4) out of four residents sampled. Findings include:</p> <p>1. Review of the clinical record revealed that an initial service agreement was incomplete with absence of the signature and date signed by Resident #1 or his family representative prior to or no later than 11/27/2012, the date of her admission to the assisted living facility.</p> <p>This finding was reviewed with E1 (executive director), E2 (RN/RSD) and E3 (Human Resources Manager) on 3/4/2013.</p> <p>2. Review of the clinical record revealed that the initial service agreement was signed and dated by Resident #4 on 9/6/2012, two days following his admission to the assisted living facility on 9/4/2012.</p> <p>This finding was reviewed with E1 (executive director), E2 (RN/RSD) and E3 (Human Resources Manager) on 3/4/2013.</p> <p><b>The service agreement shall be developed and followed for each resident consistent with that person's unique physical and psychosocial needs with recognition of his/her capabilities and preferences.</b></p> | <ol style="list-style-type: none"> <li>1. The Resident Service Agreement has been signed and dated by Resident #1.<br/><br/>Resident #4's medical record is closed.</li> <li>2. The Resident Services Director or designee, will conduct a random audit of all Service Agreements for completeness.</li> <li>3. The Resident Services Director or designee, will review all Service Agreements, prior to placing documents in the residents medical record.</li> <li>4. The Resident Services Director or designee, will perform quarterly audits on all Service Agreements and review them during the facility's quarterly Quality Assurance Meetings.</li> </ol> <p>Completion Date: May 1, 2013 and Ongoing</p> |



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| 3225.13.6 | <p><b>This requirement is not met as evidenced by:</b></p> <p>Based on clinical record review and staff interview it was determined that the facility developed a service agreement that failed to address and to include interventions specific to a pressure ulcer sustained by one resident (Resident #3) out of four sampled. Findings include:</p> <p>Review of the clinical record revealed a nurse's note dated 1/28/13 and timed (8:00 PM) that stated "(Resident #3 complaining of) pain (right heel)...". Another nurse's note dated 2/1/13 and without a specific time stated "(Received) new order for open blister (right) heel wound...". However review of the current service agreement dated 5/30/2012 revealed that the facility failed to develop a service agreement with measurable goals and specific interventions to address a pressure ulcer sustained by Resident #3.</p> <p>This finding was reviewed with E1 (executive director), E2 (RN/RSD) and E3 (Human Resources Manager) on 3/4/2013.</p> <p><b>The service agreement shall be reviewed when the needs of the resident have changed and, minimally, in conjunction with each UAI. Within 10 days of such assessment, the resident and the assisted living facility shall execute a revised service agreement if indicated.</b></p> <p><b>This requirement is not met as evidenced by:</b></p> | <ol style="list-style-type: none"> <li>1. An addendum to Resident #3's Service Agreement, addressing resident's right heel pressure ulcer, was added by the Resident Services Director.</li> <li>2. The Resident Services Director or designee, will conduct a random audit for residents with skin integrity issues and establish an appropriate plan of care or service interventions to be added to their Service Agreement.</li> <li>3. The Resident Services Director or designee, will review all Service Agreements, prior to placing documents in the residents medical record.</li> <li>4. The Resident Services Director or designee, will perform Quarterly audits on all Service Agreements and review them during the facility's quarterly Quality Assurance Meetings.</li> </ol> <p style="text-align: right;">Completion Date: May 1, 2013 and Ongoing</p> |
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|         | <p>Based on clinical record reviews and staff interviews it was determined that the facility failed to execute service agreements within 10 days of annual UAI assessments developed for two residents (Resident #2 and Resident #3) out of 4 sampled. Findings include:</p> <p>1. Review of Resident #2's clinical record revealed the absence of an annual service agreement dated within 10 days of an annual UAI assessment completed and dated 9/5/2012. Instead the clinical record review revealed the development of one service agreement dated 12/6/12 and a second service agreement dated 1/7/13.</p> <p>This finding was reviewed with E1 (executive director), E2 (RN/RSD) and E3 (Human Resources Manager) on 3/4/2013.</p> <p>2. Review of Resident #3's clinical record revealed the absence of an annual service agreement developed and dated within 10 days of an annual UAI assessment dated 6/30/2012. Clinical record review revealed the current service agreement was completed and dated 5/30/2012, approximately 30 days prior to the completion of the annual UAI assessment dated 6/30/2012.</p> <p>This finding was reviewed with E1 (executive director), E2 (RN/RSD) and E3 (Human Resources Manager) on 3/4/2013.</p> | <ol style="list-style-type: none"> <li>1. An addendum to Resident #2's Service Agreement reflects the correct dates.</li> <li>2. The Resident Services Director or designee, will conduct a random audit of all resident Service Agreements for completeness.</li> <li>3. The Resident Services Director or designee, will review all Service Agreements, prior to placing documents in the residents medical records.</li> <li>4. The Resident Services Director or designee, will perform quarterly Audits on all Service Agreements and review them during the facility's quarterly Quality Assurance Meetings.</li> </ol> <p>Completion Date: May 1, 2013 and Ongoing</p> <ol style="list-style-type: none"> <li>1. An addendum to Resident #2's Service Agreement reflects the correct dates.</li> <li>2. The Resident Services Director or designee, will conduct a random audit of all resident Service Agreements for completeness.</li> <li>3. The Resident Services Director or designee, will review all Service Agreements, prior to placing documents in the residents medical records.</li> <li>4. The Resident Services Director or designee, will perform quarterly Audits on all Service Agreements and review them during the facility's quarterly Quality Assurance Meetings.</li> </ol> <p>Completion Date: May 1, 2013 and Ongoing</p> |