



DELAWARE HEALTH AND SOCIAL SERVICES

Division of Health Care Quality
Office of Long-Term Care
Residents Protection

DHSS - DHCQ
263 Chapman Road, Ste 200, Cambridge Bldg.
Newark, Delaware 19702
(302) 421-7400

STATE SURVEY REPORT

NAME OF FACILITY: Meadowcrest at Middletown Senior Living **DATE SURVEY COMPLETED:** March 29, 2023

SECTION	STATEMENT OF DEFICIENCIES SPECIFIC DEFICIENCIES	ADMINISTRATOR'S PLAN FOR CORRECTION OF DEFICIENCIES	COMPLETION DATE
<p>3225.11.0</p> <p>3225.11.5</p>	<p>An unannounced Complaint Survey was conducted at this facility from March 28, 2023 through March 29, 2023. The deficiencies contained in this report are based on interview, record review and review of other facility documentation as indicated. The facility census on the first day of the survey was sixty (60). The survey sample totaled eight (8) residents.</p> <p>Abbreviations/definitions used in this state report are as follows:</p> <p>Dementia - the loss of cognitive functioning — thinking, remembering, and reasoning, to such an extent that it interferes with a person's daily life and activities;</p> <p>DON – Director of Nursing;</p> <p>ED - Executive Director;</p> <p>Resident Assessment – evaluation of a resident's physical, medical, and psychosocial status as documented in a Uniform Assessment Instrument (UAI), by a Registered Nurse;</p> <p>UAI (Uniform Assessment Instrument) - a document setting forth standardized criteria developed by the Division to assess each resident's functional, cognitive, physical, medical, and psychosocial needs and status. The assisted living facility shall be required to use the UAI to evaluate each resident on both an initial:</p>	<p>R1's UAI's are now up to date. R2 has been discharged from the facility. R6's UAI's are now up to date. R7's UAI's are now up to date.</p>	<p>04-28-2023</p>

Provider's Signature *Christina Madellini, RNH*

Title *Executive Director*

Date *4-14-2023*



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	<p>when there is a significant change in the resident's condition.</p> <p>This requirement was not met as evidenced by:</p> <p>Based on record review and review of other facility documentation, it was determined that for four (R1, R2, R6 and R7) out of eight residents sampled, the facility lacked evidence that the UAIs were completed timely. Findings include:</p> <ol style="list-style-type: none"> 1. 9/16/21 – R1 was admitted with diagnosis of dementia. The initial UAI was completed 9/3/21 and the 30-day UAI was completed 10/16/21. The annual UAI was due around 10/16/22, but it was completed two months late on 12/22/22. 2. 10/26/21 – R2 was admitted with a diagnosis of high blood pressure. The initial UAI was completed on 10/20/21. The 30-day UAI was due 11/26/21, but it was completed about two months late on 2/4/22. 3. 12/19/22 – R6 was admitted with a diagnosis of tremor. The initial UAI was completed 12/12/22. The 30-day UAI was due 1/19/23, but it was completed about three weeks late on 2/3/23. 4. 12/19/22 – R7 was admitted with a diagnosis of gastric reflux. The initial UAI was completed 12/7/22. The 30-day UAI was due 1/19/23, but it was completed about three weeks late on 2/6/23. <p>3/29/23 - Findings were reviewed with E1 (ED) and E2 (DON) at the exit conference, beginning at approximately 2:30 PM.</p>	<p>All residents have the potential to be affected by this practice. All residents have been audited and all UAIs are up to date for all active residents in the facility.</p> <p>A root cause analysis was completed, and it was determined that the current system in place to notify when a UAI is due was not accurate. The system has been updated to accurately calculate/notify when a UAI (30 day and annual) assessment is due. NHA or designee will in-service RSD and assistant Director on the system change.</p> <p>RSD/NHA or designee will audit resident UAI due dates weekly x 4 weeks until 100% compliant, then every other week x 4 weeks until 100% compliant, then monthly x 2 months. All audits will be submitted to the QAPI committee for any further follow-up determined by the committee.</p>	

Provider's Signature Shenna Indellie, NHA

Title Executive Director

Date 4-14-2023