



**DELAWARE HEALTH
AND SOCIAL SERVICES**

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

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

STATE SURVEY REPORT

NAME OF FACILITY: Westminster Village Assisted Living

DATE SURVEY COMPLETED: April 17, 2026

SECTION	STATEMENT OF DEFICIENCIES SPECIFIC DEFICIENCIES	ADMINISTRATOR'S PLAN FOR CORRECTION OF DEFICIENCIES WITH ANTICIPATED DATES TO BE CORRECTED	Completion Date
<p>3225 3225.11.0 3225.11.3 S/S - D</p>	<p>An unannounced Annual and Complaint Survey was conducted at this facility from April 10, 2026, through April 17, 2026. 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 fifty-five (55). The survey sample totaled ten (10) residents plus an additional six (6) sub-sampled residents.</p> <p>Abbreviations/definitions used in this state report are as follows:</p> <p>ED - Executive Director; EMR – Electronic Medical Record; LPN – Licensed Practical Nurse; RN – Registered Nurse; ROM – Range of Motion; RS – Resident Subsampled; RSD – Resident Services Director; VPO – Vice President of Operations.</p> <p>Assisted Living Facilities</p> <p>Resident Assessment</p> <p>Within 30 days prior to admission, a prospective resident shall have a medical evaluation completed by a physician.</p> <p>This requirement was not met as evidenced by:</p> <p>Based on record review, interview and review of other facility documentation, it was determined that for one (R7) out of ten resi-</p>	<p>R7 is currently a resident in the facility. R7 did not experience any ill effects from having their medical evaluation completed outside of the 30 days of admission.</p> <p>Current residents residing in the facility have the potential to be affected by this practice. An audit of current resident admissions for the past three months was conducted on 4.28.2026. Findings could not be retroactively corrected. No ill effects were identified.</p> <p>The root cause revealed re-education of the Resident Services Director (RN) by the Regional Nurse (RN) of the requirement for completion of the medical evaluation by physician within 30 days of admission to the facility. The "Assisted Living Pre-Move-in Process Checklist" has been updated (section 3) to include the specific requirement of the medical evaluation completion within 30 days of admission to the facility by May 27, 2026. Additionally, the Instruction sheet for Medical Evaluations located in the physician's evaluation packet were clarified (page 1) to include the completion of medical evaluation documentation must be completed and dated by a physician within 30 days prior to admission.</p>	

Provider's Signature Windy M. Mad, NHA

Title Executive Director

Date 5/4/26



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<p>3225.16.0 3225.16.2 S/S – E</p>	<p>dents sampled for a pre-admission evaluation, the facility failed to provide evidence of a physician's evaluation completed within 30-days of admission. Findings include:</p> <p>7/28/25 – R7 was admitted to the facility. The physician evaluation visit was done on 5/21/25, more than 30-days prior to admission.</p> <p>4/16/26 12:01 PM – Per interview with E2 (RSD), E2 confirmed the evaluation visit done by the physician was over the 30-day regulation.</p> <p>4/17/26 - Findings were reviewed with E1 (ED), E2 and E9 (VPO) per telephone exit conference, beginning at approximately 1:06 PM.</p> <p>Staffing</p> <p>A staff of persons sufficient in number and adequately trained, certified or licensed to meet the requirements of the residents shall be employed and shall comply with applicable state laws and regulations.</p> <p>State Of Delaware Board of Nursing- "RN (registered nurse), LPN (licensed practical nurse) and NA (nurse's aide)/ UAP (unlicensed assistive personnel) Duties 2024...Post Fall Assessment & Documentation- RN..." Updated 4/10/24.</p> <p>This requirement was not met as evidenced by:</p> <p>Based on record review and interview, it was determined that four (R7, R9, R10 and RS11) out of sixteen residents reviewed for Acci-</p>	<p>The Resident Services Director (RN)/designee will conduct an audit of all new admissions to ensure that the medical evaluation by physician is completed and dated within 30 days of admission to the facility.</p> <p>Audits will be conducted daily x5 until 100% is verified as compliant, then weekly x4 until 100% is verified as compliant, then monthly x2 until 100% is verified. Results will be presented to the Quality Assurance Performance Improvement Committee for review and recommendation.</p> <p>R7 is currently a resident in the facility. R9 is currently a resident in the facility. R10 is currently a resident in the facility. RS11/F1 was discharged from the facility on 1.10.2026.</p> <p>There were no ill effects identified from the LPN completing post resident fall assessments for each resident.</p> <p>Current residents residing in the facility have the potential to be affected by this practice. An audit completed by the Resident Services Manager (RN) of the past 3 months' resident falls was conducted and no ill effects were identified from LPN completing post resident fall assessments.</p>	<p>5.27.2026</p>

Provider's Signature Wendy Mead, NHA Title Executive Director Date 5/4/26



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	<p>dents, the facility failed to ensure that nursing services met professional standards as evidenced by having LPNs complete the post fall assessment and documentation for residents' post fall which violates the Delaware State Board of Nursing Scope of Practice.</p> <p>1. 7/18/25 - R7 was admitted to the facility.</p> <p>10/28/25 7:45 PM -- Per EMR entry by E5 (LPN), E5 noted that R7 was observed sitting on the floor near his bed when he slid from his chair to the floor. E5 noted there were no injuries other than a skin tear to his right forearm which was dressed per the physician's standing order.</p> <p>The post fall assessment was completed by E5, not an RN as required by the Delaware State regulation of the Board of Nursing Scope of Practice.</p> <p>1/12/26 3:35 AM -- Per EMR entry by E5 (LPN), E5 documented that R7 was observed lying on the floor in his living room. E5 noted his ROM was within his normal limits, denied hitting his head and his ROM was within his normal limits. E5 noted he had a small skin tear to his left shin which was dressed per the physician's standing order.</p> <p>The post fall assessment was completed by E5, not an RN as required by the Delaware State regulation of the Board of Nursing Scope of Practice.</p> <p>3/17/26 6:20 AM - Per EMR entry by E5 (LPN), E5 noted that R7 was found lying on the floor in his living room. E5 documented there were no injuries noted, he denied hitting his head</p>	<p>A root cause analysis revealed the need for re-education of the licensed staff by the Resident Services Manager (RN) by the Regional RN regarding the standard of practice that an RN is required to complete the post resident fall assessments. Re-education of the licensed staff by the Resident Services Manager (RN) was completed regarding the Delaware Board of Nursing Professional Regulation Decision Tree 2024 ensuring post resident fall assessments are completed by an RN. A facility policy for RN assessment post resident falls which includes engaging a virtual visit with an RN when one is not present in the facility was developed and implemented and Assisted Living clinical staff were educated on this policy by the Resident Services Manager (RN) by May 27, 2026.</p> <p>The Resident Services Director (RN)/designee will conduct an audit of all post resident falls to ensure that the post fall assessment is completed by an RN. Audits will be conducted daily x5 until 100% is verified as compliant, then weekly x4 until 100% is verified as compliant, then monthly x2 until 100% is verified. Results will be presented to the Quality Assurance Performance Improvement Committee for review and recommendation.</p>	<p>5.27.2026</p>

Provider's Signature Wendy Mead, NHA

Title Executive Director

Date 5/14/26



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	<p>and had no complaints of discomfort. E5 noted "staff will monitor".</p> <p>The post fall assessment was completed by E5, not an RN as required by the Delaware State regulation of the Board of Nursing Scope of Practice.</p> <p>2. 6/14/24 - R9 was admitted to the facility.</p> <p>11/29/25 3:36 PM - Per EMR entry by E5 (LPN), E5 documented that R9 was "observed going to sit on the chair, the chair moved and R9 lost her balance and fell to the floor". E5 documented there were no injuries noted and R9 had no complaints of pain and did not hit her head. E5 noted R9's ROM remains at her normal limits.</p> <p>The post fall assessment was completed by E5, not an RN as required by the Delaware State regulation of the Board of Nursing Scope of Practice.</p> <p>3. 4/11/24 - R10 was admitted to the facility.</p> <p>8/13/25 10:51 PM - Per EMR entry by E10 (LPN), E10 noted R10 was on the floor in her apartment stating she tried to sit in the chair and slipped down to the floor. E10 noted on evaluation that R10 was breathing normally, pupils were equal and no pain on palpitation of head and neck, all extremities or her back. E10 noted staff will continue to monitor.</p> <p>The post fall assessment was completed by E10, not an RN as required by the Delaware State regulation of the Board of Nursing Scope of Practice.</p>		

Provider's Signature Monique Reed, NHA Title Executive Director Date 5/4/26



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	<p>12/8/25 3:30 PM - Per EMR entry by E5 (LPN), E5 noted that R10 was "observed by staff sitting on the floor." E5 documented there were no injuries noted but R10 complained of right hip pain. E5 noted two staff personnel assisted R10 off the floor and she was administered Tylenol. E5 noted R10 was able to ambulate at her normal limits with no signs of distress. E5 noted "staff will continue monitor".</p> <p>The post fall assessment was completed by E5, not an RN as required by the Delaware State regulation of the Board of Nursing Scope of Practice.</p> <p>4. RS11 was admitted to the facility.</p> <p>11/30/25 12:43 PM – Per EMR by E6 (LPN), E6 noted that RS11 "removed himself from the floor and ambulating without issues." E6 noted RS11 was able to move all extremities and denies hitting his head.</p> <p>The post fall assessment was completed by E6, not an RN as required by the Delaware State regulation of the Board of Nursing Scope of Practice.</p> <p>12/22/25 9:10 PM - Per EMR documentation by E5 (LPN), E5 noted that RS11 was observed sitting on the floor in his room with no visible injury or complaints of pain. E5 noted that RS11 was assisted off the floor by three staff members. E5 noted the staff will continue to monitor.</p> <p>The post fall assessment was completed by E5, not an RN as required by the Delaware State regulation of the Board of Nursing Scope of Practice.</p>		

Provider's Signature Mendel Ward, NHA Title Executive Director Date 5/4/26



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	<p>12/29/25 2:25 AM - Per EMR by E5 (LPN), E5 documented that RS11 was seen sitting on the dining room floor. E5 documented F1 had no complaints of pain, and no injuries were noted.</p> <p>The post fall assessment was completed by E5, not an RN as required by the Delaware State regulation of the Board of Nursing Scope of Practice.</p> <p>4/10/26 10:00 AM – Per interview with E2 (RSC), E2 stated the LPN has been performing the residents' post fall assessments. E2 stated the resident is sent to the ER for evaluation if complaints of hitting their head or a visible injury are noted.</p> <p>4/17/26 - Findings were reviewed with E1 (ED), E2 and E9 (VPO) per telephone exit conference, beginning at approximately 1:06 PM.</p>		

Provider's Signature Wendy Mead, NHA Title Executive Director Date 5/4/26