



**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

Page 1 of 2

NAME OF FACILITY: Millcroft Living Nursing Home

DATE SURVEY COMPLETED: March 25, 2025

| SECTION | STATEMENT OF DEFICIENCIES SPECIFIC DEFICIENCIES | ADMINISTRATOR'S PLAN FOR CORRECTION OF DE- FICIENCIES | | | | | | | | | | | | |
|---|--|--|--------|------|---------------------------|-------------------|--|---------|------|------|-------|------|------|---|
| 16 Del. code, Chapter 11, Subchapter VII 1162 Nursing Staffing | <p>Minimum Staffing Levels for Residential Health Facilities</p> <p>(c) By January 1, 2002, the minimum staffing level for nursing services direct caregivers shall not be less than the staffing level required to provide 3.28 hours of direct care per resident per day, subject to Commission recommendation and provided that funds have been appropriated for 3.28 hours of direct care per resident for Medicaid eligible reimbursement.</p> <p>Nursing staff must be distributed in order to meet the following minimum weekly shift ratios:</p> <table><thead><tr><th></th><th>RN/LPN</th><th>CNA*</th></tr></thead><tbody><tr><td>Day - 1 nurse per 15 res.</td><td>1 aide per 8 res.</td><td></td></tr><tr><td>Evening</td><td>1:23</td><td>1:10</td></tr><tr><td>Night</td><td>1:40</td><td>1:20</td></tr></tbody></table> <p>* or RN, LPN, or NAIT serving as a CNA.</p> <p>Nursing Facilities must be in compliance with 16 Del. code, Chapter 11, Subchapter VII 1162 Nursing Staffing at all times.</p> <p>This requirement is not met as evidenced by:</p> <p>A desk review staffing audit was conducted by the State of Delaware, Division of Health Care Quality, Office of Long-Term Care Residents Protection. The facility was found to be noncompliant with 16 Delaware Code Chapter 11 Nursing Facilities and Similar Facilities.</p> | | RN/LPN | CNA* | Day - 1 nurse per 15 res. | 1 aide per 8 res. | | Evening | 1:23 | 1:10 | Night | 1:40 | 1:20 | <p>Corrective Action</p> <p>Corrective actions have been ensured by the director of Nursing. The Director of Nursing has completed the education of the scheduler for the facility on the minimum staffing levels for nursing services direct caregivers especially as it pertains to the minimum shift ratios.</p> <p>Identification of Residents affected</p> <p>All Residents have the potential to be affected by the noncompliance. The facility will ensure that staffing level is appropriate and complies with the 16 De. Code, Chapter II, Subchapter VII 1162 Nursing staffing always.</p> <p>System Changes</p> <p>The root cause of the concern was the failure of the facility to comply with 16 Delaware Code Chapter II Nursing facilities and similar facilities minimum nursing staffing level for the week 2/1/2025 – 2/7/2025 for CNA on the day shift. The census level at the facility saw an increase without a corresponding increase in the staffing level for the day shift during the period. The facility system for monitoring staffing level has been updated to include a daily meeting of the Director of Nursing or designee with the facility staff scheduler where staffing levels for the next day are discussed to ensure compliance. Anticipated changes in census will be communicated to the scheduler by the Director of Nursing or designee at this daily meeting. The executive director or designee will provide oversight to ensure compliance.</p> <p>Success Evaluation</p> <p>A weekly staffing level audit with a focus on staffing ration will be conducted to ensure that the facility is in compliance with the minimum staffing level for nursing services direct care givers. Audits will be completed by the Director of Nursing or Designee. Audits will have a goal of 100% compliance. The system will be reviewed if goals are not met. Results of the audits will be reviewed by the quality assurance team.</p> |
| | RN/LPN | CNA* | | | | | | | | | | | | |
| Day - 1 nurse per 15 res. | 1 aide per 8 res. | | | | | | | | | | | | | |
| Evening | 1:23 | 1:10 | | | | | | | | | | | | |
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Provider's Signature

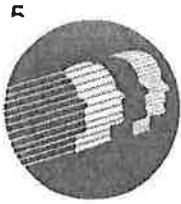
Felarin Esundina

Title

RN/D.O.A.

Date

3/27/2025



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|---------|--|---|
| | <p>Findings include:</p> <p>Review of the Facility Staffing Worksheets, completed by E1 (Nursing Home Administrator) revealed the following:</p> <p>During the week of 2/1/25-2/7/25, the facility failed to maintain the CNA ratio of 1:8 on the day shift.</p> | |

Provider's Signature _____ Title _____ Date _____