



**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

Page 1 of 14

NAME OF FACILITY: AL - Ingleside Assisted Living, LLC

DATE SURVEY COMPLETED: July 23, 2025

SECTION	STATEMENT OF DEFICIENCIES SPECIFIC DEFICIENCIES	ADMINISTRATOR'S PLAN FOR CORRECTION OF DEFICIENCIES WITH ANTICIPATED DATES TO BE CORRECTED	Completion Date
	<p>An unannounced complaint survey was conducted at this facility from July 18, 2025, through July 23, 2025. The deficiencies contained in this report are based on interview, observations and review of facility and other documentation as indicated. The facility census on the day of the survey was fifty-seven (57).</p> <p>Abbreviations/definitions used in this state report are as follows:</p> <p>AA – Administrative Assistant; AD – Activity Director; BCC – Background Check Center/electronic system which combines data streams from various sources within and outside the State in order to assist an employer in determining the suitability of a person for employment in a nursing facility or similar facility; CBC – Criminal background check/the process conducted by the State Bureau of Identification (SBI) of using an individual's fingerprints to identify the person and to conduct both a State and a Federal criminal background check; CAN – Certified Nurse's Aide; DA – Dietary Aide; Del.C. – Delaware Code; DHCQ – Division of Health Care Quality/division responsible for background checks for licensed facilities; DON – Director of Nursing; E – Employee of facility; ED – Executive Director; HC – Home Care under PASA license; HCA – Home Care Aide employed by a PASA licensed provider; IC – Independent Contractors; LNHA – Licensed Nursing Home Administrator;</p>		

Provider's Signature Anna Williams

Title Executive Director

Date 8/12/25



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STATE SURVEY REPORT

Page 2 of 14

NAME OF FACILITY: AL - Ingleside Assisted Living, LLC

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	<p>LPN – Licensed Practical Nurse; Master List – list maintained by the BCC for each employer. The list contains the names of all persons who: -Are employed in the employer's facility as defined in 16 Del.C. 1141(b)(5); -Are employed by a temporary employment agency, home health or personal care agency, or any other entity to work in a facility or in a private residence as defined in 16 Del.C. 1145(b)(8); -Are self-employed individuals working as an independent contractor for the employer; NP – Nurse Practitioner; PASA – Personal Assistance Services Agency/any business entity or subdivision thereof, whether public or private, proprietary or not-for-profit, which refers direct care workers to provide personal assistance services to individuals primarily in their home or private residence; PT – Physical Therapist; RA – Resident Assistant; RN – Registered Nurse; ST – Speech Therapist.</p>		
3225.0	Assisted Living Facilities		
3225.16.6	Staffing		
3225.16.6	The Director/Nursing Home Administrator shall have overall responsibility for managing the assisting living facility such that all requirements of state law and regulations are met.		
S/S = E	<p>This requirement was not met as evidenced by:</p> <p>Based on interview and review of facility and other documentation as indicated, it</p>		

Provider's Signature

Shonda Williams

Title

Executive Director

Date

8/12/25



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STATE SURVEY REPORT

Page 3 of 14

NAME OF FACILITY: AL - Ingleside Assisted Living, LLC

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	<p>was determined that for 46 out of 52 staff (including facility staff, independent contractors and aides employed by a PASA licensed provider), the facility failed to ensure each individual working in the assisted living had completed background checks in the BCC and drug screening as required under Title 16 Del. C. Subchapter IV § 1141 Criminal background checks and § 1142 Mandatory drug screening and the required assisted living training under 3225.16.14.2. Findings included:</p> <p>Cross refer 3225.16.14.2, Title 16 Del.C. Chapter 11, Subchapter IV § 1141 and § 1142</p> <p>Review of the facility's job description of the Administrator, effective 10/28/05, listed "... Essential Duties... 2. Directs the overall operation of Ingleside's Assisted Living's activities in accordance with Ingleside Homes, Inc.'s philosophy and current applicable federal, state, and local laws..."</p> <p>7/18/25 9:53 AM – During an interview, E1 (LNHA/ED) stated that her responsibilities included pre-employment, background checks and hiring.</p> <p>7/18/25 10:30 AM through 11:30 AM – Interviews with three staff [E3 (RA), E18 (LPN), E19 (CNA)] working on the resident's floors, revealed that aides [employed by a PASA licensed provider] were being sent over from an independent living location to work in the assisted living facility when they were short-staffed.</p>		

Provider's Signature

Heidi Williams

Title

Health Director

Date

8/14/25



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STATE SURVEY REPORT

Page 4 of 14

NAME OF FACILITY: AL - Ingleside Assisted Living, LLC

DATE SURVEY COMPLETED: July 23, 2025

SECTION	STATEMENT OF DEFICIENCIES SPECIFIC DEFICIENCIES	ADMINISTRATOR'S PLAN FOR CORRECTION OF DEFICIENCIES WITH ANTICIPATED DATES TO BE CORRECTED	Completion Date
	<p>7/18/25 11:39 AM – During a combined interview with E1 and E2 (DON), E1 confirmed that (PASA) aides worked in the assisted living when they were short-staffed.</p> <p>7/18/25 2:29 PM – E1 provided the schedules of the 25 (PASA) aides who worked in the assisted living from November 2024 through June 2025.</p> <p>7/18/25 3:00 PM - Review of the following staff personnel records and the DHCQ BCC with E1 revealed:</p> <ul style="list-style-type: none">- E1 (LNHA/ED), hired on 1/3/22, was not listed in the BCC and did not have a background check; and- E2 (DON), hired on 2/14/22, was not listed in the BCC and did not have a background check. <p>The following 11 employees had incomplete background checks:</p> <ul style="list-style-type: none">- E4 (AD), hired on 7/25/23;- E5 (Receptionist), hired on 1/20/23;- E6 (Receptionist), hired on 7/18/24;- E7 (Receptionist), hired on 9/16/24;- E8 (Dietary Aide), hired on 4/1/25;- E9 (RA), hired on 1/24/24;- E10 (DA), hired on 11/25/24;- E11 (DA), hired on 10/16/23;- E12 (Receptionist), hired on 9/17/24;- E14 (LPN), hired 1/25/24; and- E15 (RN), hired on 2/27/22. <p>The following 4 employees did not have marijuana/cannabis testing included in the mandatory drug screening:</p> <ul style="list-style-type: none">- E8 (DA), hired on 4/1/25;	<p>3225.16.6</p> <p>1) (E1) LNHA/ED and (E2) DON were entered and processed through BCC and fingerprints on July 28, 2025. The 11 employees who had incomplete background check in BCC system are up to date with hired or terminated status. The 4 employees who did not have the marijuana/cannabis testing included were retested on August 11, 2025, to include the Marijuana/Cannabis panel. Independent Contractors who work for a company, the company will update contract to include their responsibility of background checks and drug screens. Independent Contractors who work for themselves will be enter in BCC. The facility will no longer use HCA effective July 23, 2025.</p> <p>2) All other staff and independent contractors had the potential to be affected. The (E1) LNHA/ED conducted a review of employee records to ensure existing employees were registered in the BCC system and drug screening includes the Marijuana/Cannabis screening.</p> <p>3) The root cause revealed that employees entered BCC did not allow to process due to closing out while entering. BCC notified (E1) ED/LNHA to reprint the forms which allows the next steps. An Onboarding Checklist (Attachment A) has been developed for the community to ensure prospective employees</p>	<p>9/12/2025</p>

Provider's Signature Daniel Williams

Title Enah N. Dreda

Date 8/12/25



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STATE SURVEY REPORT

Page 5 of 14

NAME OF FACILITY: AL - Ingleside Assisted Living, LLC

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	<ul style="list-style-type: none">- E10 (DA), hired on 10/16/23;- E16 (DA), hired on 7/10/25; and- E17 (AA), hired on 6/24/25. <p>7/21/25 10:55 AM – During an interview, E1 stated that she never contacted anyone at the DHCQ BCC to follow up on the incomplete background checks of the 11 employees.</p> <p>7/21/25 12:55 PM – During an interview with E1, surveyor requested to see evidence of background checks and mandatory drug screenings for the independent contractors (IC) who are working in the assisted living, including IC1 (Physician), IC2 (NP), IC3 (NP), IC4 (PT), IC5 (ST) and IC6 (Hair Stylist). E1 provided evidence of IC4's criminal background check. E1 lacked evidence that 5 out of 6 IC's had background checks and 6 out of 6 had mandatory drug screenings. In addition, these individuals were not listed as working in the assisted facility in the BCC Master List.</p> <p>7/22/25 2:29 PM – During an interview with HC2 (Ingleside Homes Operations Manager), surveyors reviewed the 25 (PASA) aides, who worked in the assisted living from November 2024 through June 2025, to determine if they had background checks, mandatory drug screenings and training as required. The review revealed the following:</p> <ul style="list-style-type: none">- three (3) had no criminal background checks completed: HCA4, HCA12 and HCA18; and- ten (10) had drug screenings missing the marijuana/cannabis testing: HCA13, HCA14, HCA17, HCA18, HCA19, HCA20, HCA21, HCA22, HCA23 and HCA24; and	<p>are entered into the BCC and drug screens completed prior to determining their suitability for employment.</p> <p>4) The (E1) LNHA/ED and/or designee will audit BCC 3 times per week x 1 week until 100% success, then 1x a week until 100% success, finally one month later until 100% compliance.</p>	

Provider's Signature Deirdre Williams

Title Executive Director Date 8/12/25



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STATE SURVEY REPORT

Page 6 of 14

NAME OF FACILITY: AL - Ingleside Assisted Living, LLC

DATE SURVEY COMPLETED: July 23, 2025

SECTION	STATEMENT OF DEFICIENCIES SPECIFIC DEFICIENCIES	ADMINISTRATOR'S PLAN FOR CORRECTION OF DEFICIENCIES WITH ANTICIPATED DATES TO BE CORRECTED	Completion Date
	<p>- twenty-five (25) had no evidence of as- sisted living required training.</p> <p>The facility failed to ensure that require- ments of all State laws and regulations were met by:</p> <ul style="list-style-type: none">-allowing facility staff to work without crim- inal background checks, required drug screenings and ensuring the BCC Master List included all staff;-allowing independent contractors to work in the facility without evidence of criminal background checks, mandatory drug screening and ensuring they were placed on the BCC Master List to reflect they were working in the facility; and-allowing 25 (PASA) aides to work in the as- sisted living facility from November 2024 through June 2025 without meeting re- quirements for criminal background checks, mandatory drug screening, assisted living training and that the BCC Master List was updated to reflect that they were working in the facility. <p>7/23/25 9:55 AM – Findings were reviewed during an exit conference with E1 and HC1 (President, Ingleside Homes, Inc.).</p>		
3225.16.14	Assisted living facility resident assistants shall, at a minimum:		
3225.16.14.2	Participate in a facility-specific orientation program that covers the following topics:		
3225.16.14.2.4	Basic first aid and the Heimlich Maneuver;		
3225.16.14.2.5	Job responsibilities;		
3225.16.14.2.6	The health and psychosocial needs of the population being served;		

Provider's Signature [Signature]

Title Executive Director

Date 8/12/25



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STATE SURVEY REPORT

Page 7 of 14

NAME OF FACILITY: AL - Ingleside Assisted Living, LLC

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3225.16.14.2.7	The resident assessment process; and		
3225.16.14.2.9	16 Del.C. Ch. 11, pertaining to residents' rights; reporting of abuse, neglect, mistreatment, and financial exploitation; and the Ombudsman Program;		
3225.16.14.2.10	Hospice services.		
S/S = E	<p>These requirements were not met as evidenced by:</p> <p>Based on interview and review of other documentation provided to the surveyor, it was determined that the facility failed to ensure that the twenty-five (HCA1, HCA2, HCA3, HCA4, HCA5, HCA6, HCA7, HCA8, HCA9, HCA10, HCA11, HCA12, HCA13, HCA14, HCA15, HCA16, HCA17, HCA18, HCA19, HCA20, HCA21, HCA22, HCA23, HCA24 and HCA25) PASA employees who provided care to the residents in the assisted living, completed the state required training program. Findings include:</p> <p>7/18/25 11:15 AM – During an interview, E30 (RA) stated that there were days when the facility pulled employees from the other building (PASA employees employed by a sister company) to work in the assisted living as Resident Aids.</p> <p>7/18/25 4:00 PM – E1 (LNHA/ED) presented to the surveyor the facility's schedule sheets from November 2024 through June 2025. E1 further stated, "... The facility pulled employees from the other building to accompany our AL (assisted living) residents to doctor appointments or to provide direct patient care to the residents on the 2nd and 3rd floors."</p>	<p>3225.16.14</p> <ol style="list-style-type: none">1) The Facility at this time will not be using the 25 Home Health Aides employed by PASA HCA licensed provider for not meeting the state requirement training for Assisted Living effective as of July 23, 2025.2) All PASA HCA had the potential to being affected. (HC2) Ingleside Homes Operations Manager has discontinued the services to Ingleside Assisted Living.3) (HC1) President, Ingleside Homes, Inc was not aware PASA HCA not allowed to be used in Ingleside Assisted Living due not meeting the required training to include Basic First Aid and Heimlich Maneuver, Job Responsibilities, to meet the health and psychosocial needs of the population being served, resident rights and Hospice service.4) Facility has discontinued the use of PASA HCA effective immediately.	<p>9/12/2025</p>

Provider's Signature [Signature]

Title Executive Director Date 8/12/25



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STATE SURVEY REPORT

Page 8 of 14

NAME OF FACILITY: AL - Ingleside Assisted Living, LLC

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	<p>7/21/25 9:00 AM - A review of the facility's schedule sheets from November 2024 through June 2025 revealed that the twenty – five (25) PASA employees worked in the assisted living and provided care to the residents as Resident Assistants working on the 2nd floor, 3rd floor and on some days took the residents to their doctors' appointments.</p> <p>7/21/25 9:32 AM – In an interview, HC1 (President, Ingleside Homes, Inc.) stated that the company holds multiple licenses to operate facilities including a license for PASA. HC1 further added that the company's PASA employees were trained and also were competent in assisting the residents with ADLs or activities of daily living (tasks needed for daily living, e.g. dressing, hygiene, eating, toileting, bathing). However, HC1 stated that he was not sure if the staff had completed all the training topics required when working in the assisted living.</p> <p>7/22/25 – A review of the 25 PASA employees' training records lacked evidence that the following topics were completed:</p> <ul style="list-style-type: none">- Basic first aid and the Heimlich Maneuver (abdominal thrust, a first aid procedure used to dislodge an object blocking a person's airway);- Job responsibilities;- The health and psychosocial needs of the population being served;- The resident assessment process;- 16 Del.C. Ch. 11, pertaining to residents' rights; reporting of abuse, neglect, mistreatment, and financial exploitation and the Ombudsman Program; and- Hospice services.		

Provider's Signature Wanda Williams

Title Executive Director

Date 8/13/25



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STATE SURVEY REPORT

Page 9 of 14

NAME OF FACILITY: AL - Ingleside Assisted Living, LLC

DATE SURVEY COMPLETED: July 23, 2025

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16 Del.C. Health and Safety Regulatory Provisions Con- cerning Public Health Chapter 11 Long Term Care Facilities and Services Subchapter IV Criminal Back- ground Checks; Mandatory Drug Screening; Long-Term Care Facilities; Nurs- ing Home Com- pliance with Ti- tle XIX of the Social Security Act. § 1141 Criminal Background Checks S/S = E	<p>7/22/25 1:33 PM – In an interview, E1 con- firmed that the facility did not conduct a fa- cility – specific training program for the 25 PASA employees who worked in the as- sisted living.</p> <p>7/22/25 5:00 PM – Findings were reviewed with E1 and HC1.</p> <p>(b) Definitions. – (1) "Applicant" means any of the follow- ing: a. A person seeking employment in a facil- ity. c. A self-employed person or a person em- ployed by an agency for work in a facility. (c) An employer may not employ an appli- cant for work in a facility before obtaining a criminal history. The criminal history of any person not employed directly by the facility must be provided to the facility upon the person's commencement of work. (d) The requirements of subsection (c) of this section may be suspended for 60 days if the employer wishes to employ the ap- plicant on a conditional basis. (d)(1) Before an employer may offer con- ditional employment, the employer must receive verification that the applicant has been fingerprinted by the SBI for purposes of the criminal history. (h) An applicant may not be employed in a facility, other than conditionally under subsection (d) of this section, until the ap- plicant's employer has secured the appli- cant's criminal history.</p> <p>This requirement was not met as evi- denced by:</p>		

Provider's Signature [Signature] Title Executive Director Date 8/12/25



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STATE SURVEY REPORT

Page 10 of 14

NAME OF FACILITY: AL - Ingleside Assisted Living, LLC

DATE SURVEY COMPLETED: July 23, 2025

SECTION	STATEMENT OF DEFICIENCIES SPECIFIC DEFICIENCIES	ADMINISTRATOR'S PLAN FOR CORRECTION OF DEFICIENCIES WITH ANTICIPATED DATES TO BE CORRECTED	Completion Date
	<p>Based on interview and review of facility and other documentation as indicated, it was determined that for 18 out of 27 staff and ICs reviewed for criminal background checks, the facility failed to obtain each individual's criminal history. Findings include:</p> <p>7/18/25 3:00 PM – Review of the following staff personnel records and the DHCQ BCC with E1 (LNHA/ED) revealed that the following 13 staff lacked evidence of a criminal background check prior to working in the facility:</p> <ul style="list-style-type: none">-E1 (LNHA/ED), hired 1/3/22;-E2 (DON), hired 2/14/22;-E4 (AD), hired 7/25/23;-E5 (Receptionist), hired 1/20/23;-E6 (Receptionist), hired 7/18/24;-E7 (Receptionist), hired 9/16/24;-E8 (DA), hired 4/1/25;-E9 (RA), hired 1/24/24;-E10 (DA), hired 11/25/24;-E11 (DA), hired 10/16/23;-E12 (Receptionist), hired 9/17/24;-E14 (LPN), hired 1/25/24; and-E15 (RN), hired 2/27/22. <p>7/21/25 12:55 PM – During an interview with E1, surveyor requested to see evidence of background checks and mandatory drug screenings for the independent contractors (IC) who are working in the assisted living, including IC1 (Physician), IC2 (NP), IC3 (NP), IC4 (PT), IC5 (ST) and IC6 (Hair Stylist). E1 only provided evidence of IC4's criminal background check. E1 lacked evidence that 5 out of 6 IC's had background checks:</p> <ul style="list-style-type: none">-IC1 (Physician), unknown hire date;-IC2 (NP), unknown hire date;-IC3 (NP), unknown hire date;-IC5 (ST), hired May 2017; and	<p>1141 Criminal Back Checks</p> <ol style="list-style-type: none">1) (E1) LNHA/ED reviewed the 13 staff lacked evidence of criminal back check in BCC and was able to process. Independent Contractors who work for a company, the company will update contract to include their responsibility of background check and drugs screens. The company will need to provide proof of fingerprints results for their staff. Independent Contractors who work for themselves will have Criminal Background checks processed by the facility.2) All Staff and Independent Contractors had the potential to be affected. Independent Contractors have been notified to test for Criminal Background checks. IC1 (Physician), IC2 (NP), IC3 (NP) will have fingerprints completed by September 2025. IC4 and IC5 were completed. IC6 currently in process to complete.3) The root cause revealed Independent Contractors have worked in the facility for over 10 years. (E1) LNHA/ED and/or designee will continue to audit criminal background checks for all Independent Contractors. (Attachment A)4) The (E1) LNHA/ED and designee will audit BCC 3 times per week x 1 week until 100% success, then 1x a week	<p>9/12/2025</p>

Provider's Signature David Williams

Title Executive Director

Date 8/12/25



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STATE SURVEY REPORT

Page 11 of 14

NAME OF FACILITY: AL - Ingleside Assisted Living, LLC

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SECTION	STATEMENT OF DEFICIENCIES SPECIFIC DEFICIENCIES	ADMINISTRATOR'S PLAN FOR CORRECTION OF DEFICIENCIES WITH ANTICIPATED DATES TO BE CORRECTED	Completion Date
<p>§ 1142 Manda- tory drug screening.</p> <p>S/S = E</p>	<p>-IC6 (Hair Stylist), hired April 2015.</p> <p>7/23/25 9:55 AM – Findings were reviewed during the exit conference with E1 and HC1 (President, Ingleside Homes, Inc.).</p> <p>(a) An employer may not employ an applicant without first obtaining the results of that applicant's mandatory drug screening.</p> <p>(c) The Department shall promulgate regulations, regarding the pre-employment testing of all applicants, for use of all of the following illegal drugs:</p> <ol style="list-style-type: none"> (1) Marijuana/cannabis. (2) Cocaine. (3) Opiates. (4) Phencyclidine ("PCP"). (5) Amphetamines. (6) Any other illegal drug specified by the Department under regulations promulgated under this section. <p>(e)The employer must provide confirmation of the drug screen in the manner prescribed by the Department's regulations.</p> <p>This requirement was not met as evidenced by:</p> <p>Based on interview and review of facility documentation as indicated, it was determined that for 10 out of 27 staff and ICs, the facility failed to ensure the mandatory drug screening included marijuana/cannabis testing. Findings include:</p> <p>Review of the following individuals that worked in the facility revealed their pre-employment drug test lacked marijuana/cannabis testing:</p> <p>-E8 (RA) drug test dated 3/24/25;</p>	<p>for a week until 100% success, finally one month later until 100% compliance.</p> <p>1142 Mandatory Drug Screening:</p> <ol style="list-style-type: none"> 1) The Marijuana/Cannabis testing was initiated immediately to be added to the panel. The staff members that were hired for Ingleside Assisted Living were resent to redo drug screen with the Marijuana/cannabis panel. 2) All Staff and Independent Contractors had the potential to be affected. Independent Contractors have been notified to test for drug screen. IC1 (Physician), IC2 (NP), IC3 (NP) will have drug screen completed by September 2025. IC4 and IC5 were completed. IC6 currently in process to complete. 3) The root cause revealed Independent Contractors have worked in the facility for over 10 years. (E1) LNHA/ED and/or designee will continue to audit mandatory drug screening for all Independent Contractors. (Attachment A) 4) The (E1) LNHA/ED and/or designee will audit drug screening 3 days per week x 1 week until 100% success, then 1x a week for one week until 100% success, finally one month later until 100% compliance. 	<p>9/12/2025</p>

Provider's Signature Dana Williams

Title Executive Director

Date 8/12/25



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STATE SURVEY REPORT

Page 12 of 14

NAME OF FACILITY: AL - Ingleside Assisted Living, LLC

DATE SURVEY COMPLETED: July 23, 2025

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	<p>-E10 (RA) drug test dated 11/19/24; -E16 (RA) drug test dated 6/16/25; and -E17 (RA) drug test dated 6/10/25.</p> <p>7/21/25 12:55 PM – During an interview with E1, surveyor requested to see evidence of background checks and mandatory drug screenings for the independent contractors (IC) who are working in the assisted living.</p> <p>Review of 6 out of 6 independent contractors (ICs) working in the facility lacked evidence of the mandatory drug screening prior to working in the facility. These individuals included:</p> <p>-IC1 (Physician), unknown hire date; -IC2 (NP), unknown hire date; -IC3 (NP), unknown hire date; -IC4 (PT), hired October 2014; -IC5 (ST), hired May 2017; and -IC6 (Hair Stylist), hired April 2015.</p> <p>7/23/25 9:55 AM – Findings were reviewed with E1 (LNHA/ED) and HC1 (President, Ingleside Homes, Inc.).</p>		

Provider's Signature

Debra Williams

Title

Executive Director

Date

8/12/25



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STATE SURVEY REPORT

Page 13 of 14

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SECTION	STATEMENT OF DEFICIENCIES SPECIFIC DEFICIENCIES	ADMINISTRATOR'S PLAN FOR CORRECTION OF DEFICIENCIES WITH ANTICIPATED DATES TO BE CORRECTED	Completion Date

Provider's Signature Wesley Williams Title Executive Director Date 8/12/25



**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

Page 14 of 14

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