



ALABAMA DEPARTMENT OF PUBLIC HEALTH

- RICK HARRIS,
- DIRECTOR,
- BUREAU OF HEALTH PROVIDER STANDARDS
- 2007 INCIDENT REPORTS
- 2007 SURVEYS
- WHAT YOU NEED TO KNOW ABOUT YOUR POC
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INCIDENTS REPORTED FROM
MAY 28 – SEPTEMBER 18, 2007

FALLS	403
ELOPEMENTS	16
ALLEGED ABUSE/NEGLECT/ MISAPPROPRIATION OF PROPERTY	24
FIRE ALARM MALFUNCTIONS	8
SPRINKLER SYSTEM MALFUNCTIONS	5
DOOR MALFUNCTIONS	3

2007 SURVEYS

JANUARY 8-AUGUST 20, 2007

NUMBER OF SURVEYS	50
RED SURVEYS	14
YELLOW SURVEYS	28
GREEN SURVEYS	8



SURVEY COMPLIANCE ISSUES

- From January – August, 2007, three assisted living facilities and two specialty care assisted living facilities have had their licenses downgraded to probational and entered into consent agreements with the Department.
- As of September 19, 2007, one ALF is facing enforcement action.



WHAT YOU NEED TO KNOW ABOUT YOUR PLAN OF CORRECTION

- For each deficiency cited, the plan of correction must contain the following four elements:
 - 1. POC must specify the corrective action the facility must take.
 - 2. POC must explain the steps the facility will take to identify other residents or concerns not identified by survey team.
 - 3. POC must describe measures the facility has put into place or the systemic changes made



WHAT YOU NEED TO KNOW ABOUT YOUR PLAN OF CORRECTION

- Each deficiency in the statement of deficiencies must be separately addressed.
- For each deficiency cited, the plan of correction must contain the following four elements:



WHAT YOU NEED TO KNOW ABOUT YOUR PLAN OF CORRECTION (cont.)

- 1. Your plan of correction must specify the corrective action that you will take in response to each resident or example.



WHAT YOU NEED TO KNOW ABOUT YOUR PLAN OF CORRECTION (cont.)

2. The plan of correction must explain the steps your facility will take to identify other residents or concerns not identified by the survey team, who may have problems similar to those of the residents or concerns listed in each example. Use specific timetables and identification of responsible facility staff.



WHAT YOU NEED TO KNOW ABOUT YOUR PLAN OF CORRECTION (cont.)

- 3. The plan of correction must describe the measures you have put into place or the systemic changes you have made, or both, to ensure the same deficiency will not recur in your facility. The following are some measures or changes that may satisfy this element of a plan of correction: training (both in-service and off site); formal information sharing with other facilities; use of consultants; resident input; ombudsman input; physical environment enhancements; expansion of staff numbers; improvement of staff qualifications; or staff termination.



WHAT YOU NEED TO KNOW ABOUT YOUR PLAN OF CORRECTION (cont.)

- 4. The plan of correction must explain how you will monitor your proposed corrective actions to ensure that they actually are implemented, that the corrective actions adequately address the identified problems, and that the corrective actions will continue to be effective. This element of the plan of correction must also identify positions of staff members you have assigned to accomplish the monitoring. The following are some monitoring activities that may satisfy this element of a plan of correction: oversight by the administrator or other supervisory personnel; customer surveys; ombudsman feedback; and interviews with residents or families or both.



WHAT YOU NEED TO KNOW ABOUT YOUR PLAN OF CORRECTION (cont.)

- Your plan of correction will be evaluated by the surveyor(s) that visited your facility. They will determine whether your plan of correction includes all the required elements discussed above and whether it realistically addresses the problems identified in your statement of deficiencies.



WHAT YOU NEED TO KNOW ABOUT YOUR PLAN OF CORRECTION (cont.)

- If your plan of correction is unacceptable, you will be promptly notified. You will be told the reasons it is not acceptable. You must immediately submit a new plan of correction with revisions that address all objections to your original plan. Failure to immediately submit a revised plan of correction will result in formal disapproval of your plan of correction and possible adverse action against your license.



WHAT YOU NEED TO KNOW ABOUT YOUR PLAN OF CORRECTION (cont.)

- If your plan of correction is acceptable, you may be subject to an unannounced follow-up visit to determine whether you have actually corrected the problems identified in your statement of deficiencies.

CLARIFICATION OF FLU POLICY

- The expectation is that every resident and employee will receive annual flu vaccines. Facilities must offer influenza vaccinations to residents every year.
- Facilities must offer, encourage and counsel employees to be vaccinated. The expectation is that staff will be vaccinated.
- If a resident declines, the offer and refusal must be documented and available for surveyors.
- If an employee declines the influenza vaccine, the employee must be counseled as to the safety and effectiveness of the vaccine and to the grave risk to residents presented by influenza. Such refusal must be documented by a written acknowledgment by the employee of the refusal and that the employee has been counseled. Future refusals are subject to annual counseling and documentation.

- **IDENTICAL REQUIREMENTS ARE APPLIED TO OUR FIELD STAFF**

- If the vaccination is medically contraindicated for a staff member, a signed statement by the physician must be documented in the file. Staff to whom this applies need not be counseled.



CLARIFICATION OF FLU POLICY, (cont.)

PNEUMONOCOCCAL VACCINATIONS

Offer residents the influenza vaccination annually.

For pneumococcal polysaccharide: one time revaccination with pneumococcal polysaccharide vaccine after five years for persons with certain health conditions and for persons who were younger than 65 years of age, and it has been five or more years since the time of the primary vaccination.



PERSONAL CARE ITEMS

- To the extent possible, residents in a congregate environment have the right to maintain their personal care items. Each facility should assess its resident population for residents with dementia who may have a history of wandering, rummaging, and pica behaviors. In addition, the facility should also determine which individual personal care items a resident may wish to keep. The facility should undertake a risk assessment of such items to determine what, if any harm would occur, if the items were accidentally ingested, sprayed in eyes, inhaled or incorrectly applied to skin. If a resident is alert and oriented and wishes to keep personal items in his or her room, the facility may consider providing a locked cabinet or drawer for the resident's use.



OTHER ISSUES

- **NEGOTIATED RISK AGREEMENTS**
- **FULL-TIME ADMINISTRATOR**
- **UNLICENSED HEALTH CARE FACILITIES**
- **MEETING WITH ALF ASSOCIATION AND REPRESENTATIVES**
- **NEW MEDICAL DIRECTOR FOR HEALTH PROVIDER STANDARDS**