

STATE OF CONNECTICUT

DEPARTMENT OF PUBLIC HEALTH



Deidre S. Gifford, MD, MPH
Acting Commissioner

Ned Lamont
Governor
Susan Bysiewicz
Lt. Governor

Healthcare Quality And Safety Branch

September 28, 2020

Diana McSherry, Supervisor of Assisted Living Services Agency
BAL Woodbridge
21 Bradley Road
Woodbridge, CT 06525

awetmore@benchmarkquality.com

Dear Ms. McSherry:

Unannounced visits were made to BAL Woodbridge on February 5 and August 24, 2020 by a representative of the Facility Licensing and Investigations Section of the Department of Public Health for the purpose of conducting multiple investigations.

Attached are the violations of the Regulations of Connecticut State Agencies and/or General Statutes of Connecticut which were noted during the course of the visits. The state violations cannot be edited by the provider in any way.

In accordance with Connecticut General Statutes, section 19a-496, upon a finding of noncompliance with such statutes or regulations, the Department shall issue a written notice of noncompliance to the institution. Not later than ten days after such institution receives a notice of noncompliance, the institution shall submit a plan of correction to the Department in response to the items of noncompliance identified in such notice.

The plan of correction is to be submitted to the Department by October 8, 2020.

The plan of correction shall include:

- (1) The measures that the institution intends to implement or systemic changes that the institution intends to make to prevent a recurrence of each identified issue of noncompliance;
- (2) the date each such corrective measure or change by the institution is effective;
- (3) the institution's plan to monitor its quality assessment and performance improvement functions to ensure that the corrective measure or systemic change is sustained; and
- (4) the title of the institution's staff member that is responsible for ensuring the institution's compliance with its plan of correction.

The plan of correction shall be deemed to be the institution's representation of compliance with the identified state statutes or regulations identified in the department's notice of noncompliance. Any institution that fails to submit a plan of correction to Loan.Nguyen@ct.gov may be subject to disciplinary action. Please do not send another copy via US mail.



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DATES OF VISIT: February 5, 2020 and August 24, 2020

THE FOLLOWING VIOLATION(S) OF THE REGULATIONS OF CONNECTICUT
STATE AGENCIES AND/OR CONNECTICUT GENERAL STATUTES
WERE IDENTIFIED

You may wish to dispute the violations and you may be provided with the opportunity to be heard. If the violations are not responded to by October 8, 2020 or if a request for a meeting is not made by the stipulated date, the violations shall be deemed admitted.

If there are any questions, please do not hesitate to contact this office at Loan.Nguyen@ct.gov.

Respectfully,

A handwritten signature in black ink that reads "Loan D. Nguyen". The signature is written in a cursive, flowing style.

Loan Nguyen MSN, RN, C
Supervising Nurse Consultant
Facility Licensing and Investigations Section

CT # 27046, 26895

DATES OF VISIT: February 5, 2020 and August 24, 2020

THE FOLLOWING VIOLATION(S) OF THE REGULATIONS OF CONNECTICUT
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The following is a violation of the Regulations of Connecticut State Agencies Section D19-13-D105 (g) Supervisor of assisted living services (2) (A) and/or (B) and/or (h) Nursing Services provided by an assisted living services agency (3) (C).

1. Based on review of the clinical record and interview with facility staff, for one of five clients (Client # 3) in the survey sample, the Assisted Living Services Agency (ALSA) Licensed Practical Nurse (LPN) failed to report a change in the client's condition to the ALSA Registered Nurse. The findings include:
 - a. Client # 3 was admitted to the Memory Care program on 7/30/19 with diagnoses that included Alzheimer's dementia and hypertension.
The ALSA documentation indicated that on 10/07/19 Client # 3 was admitted to the hospital with complaints of burning upon urination and bilateral upper extremity pain. Client # 3 was discharged back to the Memory Care facility on 10/10/19 with diagnoses of urinary tract infection and metabolic encephalopathy. The hospital discharge orders (the Inter-Agency Patient Referral Report/W-10 form) included the new medication Bactrim DS one tablet two times a day for 12 days.
LPN # 11 documented on 10/23/19 at 10:05 AM that the Harbor Care Director reported loose stool and blood on Client # 3's bed pad.
LPN #11 observed a small amount of loose brown stool in the toilet and a small to moderate amount of dark blood with some clots on Client # 3's bed pad. LPN # 11 notified the client's family and the Advanced Practice Registered Nurse (APRN) at the physician's office.
Interview and review of the ALSA documentation with the Supervisor of Assisted Living Services Agency (SALSA) on 8/24/2020 failed to indicate that LPN # 11 notified the ALSA Registered Nurse of the change in Client # 3's condition in order for the ALSA Registered Nurse to assess the client and update the plan of care.
The ALSA policy directed the Supervisor of Assisted Living Services Agency (SALSA) or the RN Designee to complete an assessment following a client's changes in condition.

The following is violation of the regulations of Connecticut State Agencies Section 19-13-D105 (e) General requirements for an assisted living services agency (1) and/or (g) Supervisor of assisted living services (2) (A) and/or (B) and/or (h) Nursing services provided by an assisted living services agency (3) (C).

2. Based on review of the clinical record and interview with facility staff, for one of five clients (Client # 1) in the survey sample, the Assisted living services Agency (ALSA) Licensed Practical Nurse (LPN) failed to report the client's change in condition to the ALSA Registered Nurse, and the ALSA failed to appoint a qualifying Nursing Supervisor in accordance with Connecticut State laws. The findings include:
 - a. Client #1 was admitted to the Memory Care program on 1/14/19 with diagnoses that included cognitive deficits, muscle weakness, osteoarthritis and a history of falls.
In an interview on 2/04/2020 Licensed Practical Nurse (LPN) # 1 indicated that on Monday,

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8/12/19, Client # 1 was very lethargic, had a poor appetite and complained of pain with movement. LPN #1 indicated that the client was in bed for the weekend and declined to take medications.

Interview and review of the LPN documentation with the Supervisor of Assisted Living Services Agency (SALSA) on 2/5/2020 failed to indicate that the LPN notified the ALSA registered nurse (RN), the family or the physician of the patient's changes in condition;

- b. Interview with ALSA Aide #1 on 2/04/2020 indicated that on the following day 8/13/19, Client #1 complained of a headache and backache, and the aides working the previous shifts reported that Client # 1 intake was poor for several days. ALSA Aide #1 also verbalized that Client # 1 had not been able to ambulate to the bathroom even with assistance from the aides, and that ALSA Aide # 1 had reported the changes in condition to LPN # 1.

Interview with ALSA Aide #2 on 2/04/2020 indicated that on 8/13/19 Client # 1 complained of entire body ache, could not get out of bed, and ALSA Aide #2 reported the client's changes in condition to LPN #1 who checked the client's vital signs. ALSA Aide #2 informed the next-of-kin of the changes in condition later that morning during the family visit.

Interview with ALSA Aide #3 on 2/04/2020 indicated that on the morning of 8/13/19 in the morning Client # 1 was bent over in severe pain, could not get out of bed and the aide notified LPN # 1.

In an interview on 2/04/2020 LPN # 1 indicated that on the morning of 8/13/19 after receiving report from the aides, LPN # 1 checked the client's vital signs, found them within normal limits and did not notify the ALSA registered nurse, the physician or the family.

Interview and review of the LPN documentation with the SALSA on 2/5/2020 failed to identify reporting by the LPN to the ALSA Registered Nurse (RN) of the client's symptoms of pain, inability to walk, and inability to take medications;

- c. On 8/13/19 at 6:55 PM, LPN #3 documented that the client was lethargic with a low grade temperature of 99.6 degrees Fahrenheit, and LPN # 3 notified the physician.

The physician ordered a urinalysis but the client was unable to get out of bed for a urine sample. The next-of-kin was notified and requested to transfer the client to the Emergency Department.

Interview and review of LPN #3's nursing note dated 8/13/19 with the SALSA on 2/05/2020 failed to indicate that the LPN notified the ALSA Registered Nurse of the client's change in condition;

Interview with the SALSA on 2/05/2020 and review of the ALSA policies on LPN duties indicated that LPN #3's title was "Care Nurse Supervisor."

The Care Nurse Supervisor's responsibilities described by the ALSA policies included the assessment and management of the residents such as the "completion of a thorough assessment of potential residents, the development of a service plan (in coordination with the Resident Care Director/RCD) and functioning as the RCD in the absence of the RCD."

The qualification for the role of the Care Nurse Supervisor included licensing as a Registered Nurse or Licensed Practical Nurse, "as required by state regulations."

The Connecticut General Statutes, Chapter 378, Section 20-87a (c) defined the practice of

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nursing by a licensed practical nurse as the performing of selected tasks and sharing the responsibility under the direction of a registered nurse or advanced practice registered nurse and within the framework of supportive and restorative care, health counseling and teaching. Interview with the SALSA on 2/05/2020 failed to indicate that an LPN qualified in Connecticut for the role of Care Nurse Supervisor as the LPN in Connecticut functioned under the direction of a Registered Nurse, could not function independently without a Registered Nurse, could not replace a Registered Nurse's absence, could not conduct assessments, and could not supervise the care of the residents.

Coachman Square

at Woodbridge

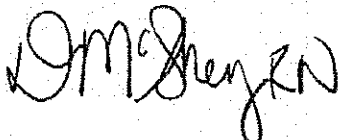
A Benchmark Senior Living Community

October 6, 2020

Dear Loan Nguyen,

Please find attached the Plan of Correction for BAL Woodbridge resulting from the unannounced visits on February 5th, 2020 and August 24th, 2020. Also attached, you will find a draft of the Licensed Practical Nurse updated job description. Should you require any additional information, or have any questions or concerns, please do not hesitate to contact Diana McSherry, Resident Care Director dmcsherry@benchmarkquality.com or Anne Wetmore, Regional Director of Resident Care awetmore@benchmarkquality.com.

Respectfully,



Diana McSherry, RN BSN
Resident Care Director

*pol accepted
10/14/2020
MB*

State of Connecticut Department of Public Health Plan of Correction
Community
Coachman Square at Woodbridge
September 28, 2020

The filing of this Plan of Correction does not constitute any admission regarding the alleged violations. The plan of correction is filed in compliance with applicable law and is evidence of the agency's continued commitment to quality care

Alleged Violation 1	Section D19-13-D105 (g) Supervision of assisted living services (2)(A) and and/or (B) and/or (h) Nursing Services provided by an assisted living services agency (3)(C). • Based on review of the clinical record and interview with facility staff, for one of the five clients(Client #3) in the survey sample, the Assisted Living Services Agency (ALSA) Licensed Practical Nurse(LPN) failed to report a change in the clients condition to the ALSA Registered Nurse. • Interview and review of the ALSA documentation with the Supervisor of Assisted Living Services Agency(SALSA) on 8/24/20 failed to indicate that LPN # 11, notified the ALSA Registered Nurse to the change in Client 3 #'s condition in order for the ALSA Registered Nurse to assess the client and update the plan of care.
Measures implemented to prevent the Recurrence of the identified issue:	Client #3 no longer resides at the Community • Policy F-100-80(Resident Assessment Process/Service Plan) will be in-serviced to resident care nurses. • Policy F-200-00 (Scope of Nursing Services) Provided by Benchmark Assisted Living Service Agency will be in-serviced to resident care nurses • A complete audit of all residents in Mind and Memory Care will be completed to assure all resident changes in condition have been reported to the SALSA, Designated Registered Nurse; • Daily stand-up rounds will be conducted to review resident's status with associates and review for any resident changes in status. • Re-Inservice associates on the communication log, and to be utilized to communicate changes to nursing staff. • Re-Inservice all RN staff to read and sign the communication log. • Review proper documentation to LPN's to include all notifications of responsible party, health care provider as well as the SALSA/RN
Date Corrective Measures or change will be Effective	October 12, 2020

*pol accepted
10/14/2020
/20*

Communities Plan to monitor its quality assessment and performance improvement to ensure that the corrective measure or systemic change is sustained	• A random audit of 10 % of resident records/progress notes will be completed monthly for two months, then quarterly for 3 quarters that all changes in condition have been reported to the SALSA, RN. • Audits will be reviewed at the 120-day QA meetings
Person Responsible for ensuring compliance with the Plan of Correction	SALSA or Designated RN

*proposed
10/14/2020
JES*

Alleged Violation 2 a and b	Section 19-13 –D105 (e) General Requirements for an assisted living services agency (1) and/or (g) Supervisor of assisted living services (2) (A) and/or (B) and/or (h)Nursing services provided by an assisted living services agency (3) (C) - Based on review of the clinical record and interview with the facility staff, for one of the five clients(Client #1) in the survey sample, the Assisted Living Services Agency(ALSA) Licensed Practical Nurse (LPN) failed to report the clients change in condition to the ALSA Registered Nurse, and the ALSA failed to appoint a qualifying Nursing Supervisor in accordance with the Connecticut State Laws. - Interview and review of the LPN #3 nursing note on 8/13/20 with the SALSA on 2/5/20 failed to indicate that the LPN notified the ALSA Registered Nurse of the clients change in condition.
Measures implemented to prevent the Recurrence of the identified issue	Client #1 no longer resides in the community. - Policy F-100-80(Resident Assessment Process/Service Plan) will be in-serviced to resident care nurses. - Policy F-200-00 (Scope of Nursing Services) Provided by Benchmark Assisted Living Service Agency will be in-serviced to resident care nurses - A complete audit of all residents in Mind and Memory Care will be completed to assure all resident changes in condition have been reported to the SALSA, Designated Registered Nurse; - Daily stand-up rounds will be conducted to review resident's status with associates and review for any resident changes in status. - Re-Inservice associates the on the communication log and to be utilized to communicate changes to nursing staff. - Re-Inservice all RN staff to read and sign the communication log. - Review proper documentation to LPN's to include all notifications of responsible party, health care provider as well as the SALSA/RN
Date Measures will be Effective	October 12, 2020
Communities Plan to monitor its quality assessment and performance improvement to ensure that the corrective measure or systemic change is sustained	- A random audit of 10 % of resident records/progress notes will be completed monthly for two months, then quarterly for 3 quarters that all changes in condition have been reported to the SALSA, RN.; - Audits will be reviewed at the 120-day QA meetings

POC accepted 10/14/2020 LBS

Person Responsible for ensuring compliance with the Plan of Correction	SALSA or Designated RN
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Alleged Violation 2b	Connecticut General Statutes, Chapter 378, Section 20-87a(c)(c) defined the practice of nursing by the licensed practical nurse as the performing of selected tasks and sharing the responsibility under the direction of a registered nurse or advanced practice registered nurse and within the framework of supportive and restorative care, health counseling and teaching. The Care Nurse Supervisor's responsibilities described in the ALSA policies included the assessment and management of the residents such as the "completions of a thorough assessment of potential residents, the development of the service plan (in coordination with the Resident Care Director/ RCD) and functioning as the RCD in the absence of the RCD. The qualifications of the role of the Care Nurse Supervisor included licensing as a Registered Nurse or Licensed Practical Nurse, "as required by state regulations."
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Measures implemented to prevent the Recurrence of the identified issue:	- Draft of Licensed practical nurse job description (attachment A) - The title of "Care Nurse Supervisor" was changed to Licensed Practical Nurse. - Terminology such as "assessment", "supervisor" was removed from the job description. - New terminology was put in place to include observation, evaluation, monitor and reporting to the Registered nurse. - The Licensed Practical Nurse provides basic and routine care, selected tasks for residents
Date Corrective Measures or change will be Effective	October 12, 2020
Communities Plan to monitor its quality assessment and performance improvement to ensure that the corrective measure or systemic change is sustained	Revision of the Care Nurse supervisor job description.

*POC accepted
10/14/2020
ms*

Person Responsible for ensuring compliance with the Plan of Correction	SALSA or Designated RN
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