

## DEPARTMENT OF DISABILITIES, AGING AND INDEPENDENT LIVING

Division of Licensing and Protection HC 2 South, 280 State Drive Waterbury, VT 05671-2060

http://www.dail.vermont.gov

Survey and Certification Voice/TTY (802) 241-0480

Survey and Certification Fax (802) 241-0343 Survey and Certification Reporting Line: (888) 700-5330

To Report Adult Abuse: (800) 564-1612

March 8, 2023

Ms. Suzanne Anair, Administrator Center For Living & Rehabilitation 160 Hospital Drive Bennington, VT 05201-2279

Dear Ms. Anair:

Enclosed is a copy of your acceptable plans of correction for the survey conducted on **February 13**, **2023.** Please post this document in a prominent place in your facility.

We may follow-up to verify that substantial compliance has been achieved and maintained. If we find that your facility has failed to achieve or maintain substantial compliance, remedies may be imposed.

Sincerely.

Pamela M. Cota, RN

Lamela MCotaRN

Licensing Chief

## DEPARTMENT OF HEALTH AND HUMAN SERVICES CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 02/23/2023 FORM APPROVED

OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES		(X1) PROVIDER/SUPPLIER/CLIA	(X2) MULTIPLE CONSTRUCTION		(V2) DATE CUDVEY	
AND PLAN OF CORRECTION		IDENTIFICATION NUMBER:	A. BUILDING		(X3) DATE SURVEY COMPLETED	
					С	
		475029	D WING		1	/13/2023
NAME OF E	PROVIDER OR SUPPLIER	4/5029	B. WING	STREET ADDRESS, CITY, STATE, ZIP CODE	021	13/2023
				160 HOSPITAL DRIVE		
CENTER	FOR LIVING & REHABI	LITATION		BENNINGTON, VT 05201		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)		PROVIDER'S PLAN OF CORRECTION PREFIX (EACH CORRECTIVE ACTION SHOULD TAG CROSS-REFERENCED TO THE APPROPRIATE OF CORRECTIVE ACTION SHOULD CROSS-REFERENCED TO THE APPROPRIATE OF CORRECTION SHOULD DEFICIENCY)		BE	(X5) COMPLETION DATE
F 000			F 0	00		
	INITIAL COMMENTS					
	INITIAL COMMENTS					
	was completed by the Protection on 2/13/20 violations identified a which require a plan Right to Receive/Den CFR(s): 483.10(f)(4)( §483.10(f)(4) The resultive visitors of his or her choosing, subject deny visitation when that does not impose resident.  (ii) The facility maccess to a resident to other relatives of the resident's right to den any time;  (iii) The facility maccess to a resident to with the consent of the reasonable clinical and resident's right to den any time;  (iv) The facility maccess to a resident to that provides health, as services to the resideright to deny or withdrefully must help rocedures regarding residents, including the clinically necessary of limitation or safety resuch limitations may assert the services with limitations and limitations may assert the services with limitations with limitations may assert the services with limitations may as a service with limitations with linitations with limitations with limitations with limitations with	y Visitors ii)-(v) sident has a right to receive thoosing at the time of his or a to the resident's right to applicable, and in a manner on the rights of another sust provide immediate by immediate family and resident, subject to the ay or withdraw consent at sust provide immediate by others who are visiting to resident, subject to a safety restrictions and the ay or withdraw consent at lity must provide reasonable by any entity or individual social, legal, or other and ave written policies and a the visitation rights of	F 50	Right to Receive/Deny Visitors  What corrective action will be accomplist those residents found to have been affected the deficient practice?  The resident affected has discharged fracility.  How will you identify other residents has potential to be affected by the same depractice and what corrective action will taken?  All residents have the potential to be affected what measures will be put into place or systemic changes will be made to ensure the deficient practice does not recur?  The following policy was reviewed and use indicated: "Coronavirus (COVID-19) Visitation CLR".  Copies of the updated policy have been and provided to residents and their POA Education was provided to all staff regavisitation policy and procedures.	rom the ving the ficient be fected. what are that updated hosted A's.	March 7, 2023
		n rights and the reasons for				





Administration

3/6/2023

TITI F

(X6) DATEAny deficiency statement ending with an asterisk (\*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

FORM CMS-2567(02-99) Previous Versions Obsolete

Event ID: UZN911

Facility ID: 475029

If continuation sheet Page 1 of 5

## DEPARTMENT OF HEALTH AND HUMAN SERVICES CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 02/23/2023 FORM APPROVED OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULT A. BUILDII	IPLE CONSTRUCTION  NG		E SURVEY		
					С			
		475029	B. WING		02	13/2023		
NAME OF PROVIDER OR SUPPLIER  CENTER FOR LIVING & REHABILITATION			STREET ADDRESS, CITY, STATE, ZIP CODE  160 HOSPITAL DRIVE  BENNINGTON, VT 05201					
(X4) ID	SUMMARY STA	TEMENT OF DEFICIENCIES	ID	PROVIDER'S PLAN OF CORRECTIO	N .	(X5)		
PREFIX TAG	ÉFIX (EACH DEFICIENCY MUST BE PRECEDED BY FULL		PREFIX TAG	(EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)		COMPLETION DATE		
F 563			F 56	63				
	Continued From pag	e 1		How will the corrective actions be mor				
	This REQUIREMENT is not met as evidenced by:  Based on observations, family and staff interview, and record review the facility failed to			ensure the deficient practice will not recommend what quality assurance program will be into place?				
	ensure residents' rights were maintained by not allowing unrestricted visitation based on resident choices.			For the next four weeks, the DNS and designee will conduct weekly random satisfaction surveys with patients/resident	dents	March 7, 2023		
	During interview on 2/13/2023 at 11:35AM with Resident #1's spouse s/he stated that the facility had barred all families from entering the halls and resident rooms. There were new signs up saying that they could not visit in the resident rooms, and they had to visit in the dining room. There are no			practices. After four weeks, random satisfaction surveys will be conducted for three months and then randomly the Results of the interviews will be reported facility Safety-Quality Committee.	ereafter.			
	call bells available in the dining room and it was difficult to get a hold of staff.			The dates corrective action will be cor	npleted.			
	At the reception area	at the entrance to the facility						
	a sign was noted that stated "No in room visits until further notice. Visits in common areas only."			Tag F 563 POC accepted on 3/6	/23 by			
	of Nursing (DON) on were no active or prescovID-19 in the build about the policy of visit that the residents and asked to visit in the costated that this is being residents don't want withey have rights too." considered cohorting visitors in their rooms rights could be maintained they had not.  A facility policy titled:	Administrator and Director 2/13/2023 at 4:15 PM there sumptive Cases of Flu or ding currently. When asked sitation, they both confirmed a family members are being sommon areas. The DON and done "because some visitors in their rooms, and When asked if they had residents who don't want a together so all residents ained the DON stated no,		S. Freeman/P. Cota				
	Visitation CLR [Cente Rehabilitation]."create	rs for Living and ed on 10/19/2020 and last						



PRINTED: 02/23/2023 FORM APPROVED

OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES		CV41 PROVIDEDIGUES IEDICUS	(X2) MUL	LTIPI	LE CONSTRUCTION	(X3) DATE SURVEY		
AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	A. BUILDING		COMPLETED			
AND FEAR OF CONNECTION						C		
						l.	_	
			B. WING			02/	13/2023	
NAME OF I	PROVIDER OR SUPPLIER				STREET ADDRESS, CITY, STATE, ZIP CODE			
CENTER	FOR LIVING & REHABI	LITATION			160 HOSPITAL DRIVE BENNINGTON, VT 05201			
(X4) ID	SUMMARY STA	TEMENT OF DEFICIENCIES	ID	-	PROVIDER'S PLAN OF CORRECTION	1	(X5)	
PREFIX TAG	(EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)			IX	(EACH CORRECTIVE ACTION SHOULD CROSS-REFERENCED TO THE APPROPED DEFICIENCY)	ENCED TO THE APPROPRIATE DATE		
F 563	Continued From page	e 2	F 563					
		B was reviewed with the						
	l .	onfirmed that the policy did			1			
	not reflect the current							
	A revised Memo from	n Centers for Medicare and						
	Medicaid titled "Nursi	1						
		ED)" Ref: QSO-20-39-NH,						
		per 17, 2020 and revised on			1			
		a resident's roommate is not			1			
		recommended COVID-19						
	vaccine doses, or imr	munocompromised						
	(regardless of vaccin	ation status), visits should						
	not be conducted in the	he resident's room, if						
	possible. For situation	ns where there is a						
		ealth status of the resident						
		room, facilities should						
	attempt to enable in-r							
	adhering to the core p							
	prevention." and "Dur							
		visitor movement in the						
		visitors should not walk						
	should go directly to t	s of the facility. Rather, they						
		area. Facilities may contact						
	•	area. Facilities may contact porities for guidance or						
		ructure their visitation to						
		OVID-19 transmission." The						
		neir decision regarding						
		receive in rooms visits on						
		ation by not allowing any in						
	room visits for all Res							
	On 2/13/2023 at 4:35	PM during interview with a						
		esident who resides on						
	-	y member stated that s/he is						
		ne resident's room to visit						
	•	visit their parent in public						
		ing room. S/he did state that						
	it was okay with her/h							
	someone may wish to							
	10							



PRINTED: 02/23/2023 FORM APPROVED OMB NO. 0938-0391

A BUILDING  475029  A BUILDING  CONTER FOR LIVING & REHABILITATION  CALID  SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST are PRECEDED BY FULL TAG  FERSULATIONY OR LSC IDENTIFYING INFORMATION)  FERSULATIONY OR LSC IDENTIFYING INFORMATION)  FOR SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST are PRECEDED BY FULL TAG  F. 5.72  SS-B  Notice of Rights and Rules CFF(R)s.' 483.10(g) (1) The resident has the right to be informed of his or her rights and of all rules and regulations governing resident conduct and responsibilities of the rights and all rules and regulations governing resident conduct and responsibilities of the rights and all rules and regulations governing resident conduct and responsibilities on the rights and all rules and regulations governing resident conduct and responsibilities of the rights and all rules and regulations governing resident conduct and responsibilities of the rights and all rules and regulations governing resident conduct and responsibilities of the rights and all rules and regulations governing resident conduct and responsibilities of the rights and all rules and reputations of the rights and information rules are evidenced by:  March 7, 2023  AD SUMMARY STATEMENT OF DEFICIENCIES (EACH CORRECTION, SHOULD BE SECRIFICATION, VIT OSCIT  PREFIX TAG  F. 5.72  Notice of Resident Rights What corrective action will be accomplished for those residents was client rights information for Resident #2 and Resident #3 have been affected by the deficient practice?  Resident #1 has discharged from the facility.  Admission packets that include the resident's rights information for Resident #2 and Resident's rights information for Resident #2 and Resident's rights information for Resident feeted by the same deficient practice and what corrective action will be taken?  All newly admitted patients/residents have the potential to be affected by the same deficient practice and what corrective action will be taken?  All newly admitted patients/residents have the potential to be affected	STATEMENT OF DEFICIENCIES		(X1) PROVIDER/SUPPLIER/CUA	(X2) MULTIPLE C		E CONSTRUCTION	(X3) DATE SURVEY	
NAME OF PROWIDER OR SUPPLIER  CENTER FOR LIVING & REHABILITATION  (X4) ID PREFIX TAG  SUMMARY STATEMENT OF DEFICIENCIES (#CACH DEFICIENCY MUST ARE PRECEDED BY FULL TAG  F. 572 SS=B  Notice of Rights and Rules CFR(s)- 483.10(g) Information and Communication. \$483.10(g) Information and Unity and responsibilities during his or her stay in the facility.  483.10(g) Information and I rules and responsibilities of her rights and of all rules and regulations governing resident prior to or upon admission and during the resident's stay. (i) The facility must also provide the resident with the State-developed notice of Medicaid rights and responsibilities and obligations, if any.  (iii) Receipt of such information, and any amendments to it, must be acknowledged in writing; This REQUIREMENT is not met as evidenced by: Based on interview and record review the facility failed do ensure that a newly admitted residents were provided information orally regarding Resident rights and responsibilities. The facility also failed to ensure that a newly admitted residents were provided information orally regarding Residents fifths and responsibilities. The facility also failed to ensure that a chowledgedment of receipt of the information orally regarding Residents fifths and responsibilities. The facility also failed to ensure that acknowledged ment of receipt of the information was in writing; This REQUIREMENT is not met as evidenced by: Based on interview and record review the facility also failed to ensure that acknowledgedment of receipt of the information orally regarding Residents fifths and responsibilities. The facility also failed to ensure that acknowledged ment of receipt of the information really regarding Resident fifths and responsi								
CENTER FOR LIVING & REHABILITATION  (A4) ID SUMMARY STATEMENT OF DEFICIENCIES (EACH DEPICIENCY MUST BE PRECEDED BY FULL TAGY (REGULATORY OR LISC IDENTIFYING INFORMATION)  F. 572 SS=B  Notice of Rights and Rules CFR(s): 483.10(g)(1) The resident has the right to be informed of his or her rights and of all rules and regulations governing resident conduct and responsibilities during the stay in the facility and in writing in a language that the resident understands of his or her rights and all rules and regulations governing resident conduct and responsibilities furning the stay in the facility.  The facility must inform the resident both orally and in writing in a language that the resident understands of his or her rights and all rules and regulations governing resident conduct and responsibilities furning the stay in the facility.  This RECUIREMENT is not met as evidenced by:  Based on interview and record review the facility failed to ensure that a newly admitted residents were provided information orally regarding. Resident rights and responsibilities. The facility related to ensure that a newly admitted residents were provided information anally regarding. Resident rights and responsibilities. The facility also failed to ensure that a newly admitted residents were provided information anally regarding. Resident rights and responsibilities. The facility also failed to ensure that a newly admitted residents were provided information anally regarding. Resident rights and responsibilities. The facility also failed to ensure that a newly admitted residents were provided information anally regarding. Resident rights and rights during the responsibilities with responsible particles. The facility also failed to ensure that a newly admitted residents were provided in formation and presponsibilities. The facility reported them with the State developed from the facility also failed to ensure that a newly admitted residents were provided information and presponsibilities. The facility also failed to ensure that a newly						С		
STREET ADDRESS, CITY, STATE, ZIP CODE  SIMMARY STATEMENT OF DEFICIENCIES  (RACH DEPICENCY MUST BE PRECEDED BY FULL TREGULATORY OR LEC IDENTIFYING INFORMATION)  F. 572  SS=B  Notice of Rights and Rules CFR(s): 483.10(g)(1)(16)  \$483.10(g) (Information and Communication. \$483.10(g) (Information and Information and Inform	475029		B. WING					
CENTRE FOR LINING & REHABILITATION   SUMMARY STATEMENT OF DEFICIENCIES   TAG	NAME OF F	PROVIDER OR SUPPLIER			S	TREET ADDRESS, CITY, STATE, ZIP CODE		
PREFIX TAG  TAG CROSS-REFERENCED TO THE APPROPRIATE  ECOULATORY OR LSC IDENTIFYING INFORMATION)  F 572  F 572  SS=6  Notice of Rights and Rules CFR(s): 483.10(g)(1)(16)  §483.10(g)(1) The resident has the right to be informed of his or her rights and of all rules and regulations governing resident conduct and responsibilities during his or her stay in the facility.  §483.10(g)(16) The facility must provide a notice of rights and services to the resident prior to or upon admission and during the resident's stay. (I) The facility must inform the resident both orally and in writing in a language that the resident understands of his or her rights and all rules and regulations governing resident conduct and responsibilities during the sate in the facility. (II) The facility must laso provide the resident with the State-developed notice of Medical drights and obligations, if any. (III) Receipt of such information, and any amendments to it, must be acknowledged in writing. This REGUIREMENT is not met as evidenced by: Based on interview and record review the facility failed to ensure that a newly admitted residents were provided information orally regarding Resident rights and responsibilities. The facility also failed to ensure that acknowledgement of receipt of the information was in writing for 3 of 3 residents in the sample (Residents #1, #2, and #3). Findings include:  Per record review Residents #1, #2, and #3) Findings include:  Per record review Residents #1, #2, and #3) Findings include:  Per record review Residents #1, #2, and #3) Findings include:  Per record review Residents #1, #2, and #3) Findings include:  Per record review Residents #1, #2, and #3) Findings include:  Per record review Residents #1, #2, and #3) Findings include:  Per record review Residents #1, #2, and #3) Findings include:  Per record review Residents #1, #2, and #3) Findings include:  Per record review Residents #1, #2, and #3) Findings include:  Per record review Residents #1, #2, and #3) Findings include:  Per record review Residents	CENTER	FOR LIVING & REHABI	LITATION					
F 572 SS=B Notice of Rights and Rules CFR(s): 483.10(g) (1) (16)  \$483.10(g) (1) The resident has the right to be informed of his or her rights and of all rules and regulations governing resident conduct and responsibilities during his or her stay in the facility.  \$483.10(g) (16) The facility must provide a notice of rights and aduring the resident found to have been completed. How will you identify other residents face and what corrective action will be accomplished for those residents found to have been affected by the deficient practice?  Resident #1 has discharged from the facility.  Admission packets that include the residents fights information for Resident #2 and Resident #3 have been completed. How will you identify other residents having the potential to be affected by the same deficient practice and what corrective action will be taken?  All newly admitted patients/residents have the potential to be affected.  An audit of the admission paperwork for all patient/residents was conducted. Incomplete admission packets have been provided to responsibilities during the stay in the facility must also provide the resident with the State-developed notice of Medicald rights and obligations, if any, (iii) Receipt of such information, and any amendments to it, must be acknowledged in writing;  This REQUIREMENT is not met as evidenced by;  Based on interview and record review the facility also failed to ensure that a newly admitted residents were provided information was in writing for 3 of 3 residents in the sample (Residents #1, #2, and #3). Findings include:  Per record review Residents #1, #2, and #3's medical record had no documented evidence that the facility provided them with written or oral notification of their rights and the rules and						I .		
Notice of Rights and Rules CFR(s): 483.10(g)(1)(16)  \$483.10(g)(1) The resident has the right to be informed of his or her rights and of all rules and regulations governing resident conduct and responsibilities during his or her stay in the facility and in writing in a language that the resident understands of his or her rights and all rules and regulations governing resident conduct and responsibilities during the resident prior to or upon admission and during the resident prior to or upon admission and during the resident prior to or upon admission and during the resident to those resident prior to or upon admission and during the resident understands of his or her rights and all rules and regulations governing resident conduct and responsibilities during the stay in the facility. With the State-developed notice of Medicaid rights and obligations, if any.  (iii) Receipt of such information, and any amendments to it, must be acknowledged in writing; This REQUIREMENT is not met as evidenced by:  Based on interview and record review the facility falled to ensure that a newly admitted residents were provided information orally regarding Resident rights and responsibilities. The facility also failed to ensure that a newly admitted residents were provided information orally regarding Resident rights and responsibilities. The facility also failed to ensure that a newly admitted residents were provided information orally regarding Resident rights and responsibilities. The facility also failed to ensure that a cknowledgement of receipt of the information was in writing for 3 of 3 residents in the sample (Residents #1, #2, and #3's medical record had no documented evidence that the facility provided the rights and the rules and provided to all patients/residents and/or their PoA's as indicated.  Per record review Residents #1, #2, and #3's medical record had no documented evidence that the facility provided to mit writing residents and/or their PoA's as indicated.	TAG			TAG CROSS-REFERENCED TO THE APPROPRIATE				
Notice of Rights and Rules CFR(s): 483.10(g)(1/16)  §483.10(g)(1) The resident has the right to be informed of his or her rights and of all rules and regulations governing resident conduct and responsibilities during his or her sident stay. (I) The facility must inform the resident prior to or upon admission and during the resident stay. (I) The facility must inform the resident stay. (I) The facility must inform the resident understands of his or her rights and all rules and regulations governing resident conduct and responsibilities during the stay in the facility. (II) The facility must also provide the resident with the State-developed notice of Medicaid rights and obligations, if any. (III) Receipt of such information, and any amendments to it, must be acknowledged in writing.  This REQUIREMENT is not met as evidenced by:  Based on interview and record review the facility falled to ensure that a newly admitted residents were provided information orally regarding Resident rights and responsibilities. The facility also falled to ensure that a cknowledgement of receipt of the information oralls in writing;  Per record review Residents #1, #2, and #3's medical record had no documented evidence that the facility provided the mist writing or oral notification of their rights and the rules and redicated. Education was provided to all patients/residents and/or their POA's as indicated.								
CFR(s): 483.10(g)(1) The resident has the right to be informed of his or her rights and of all rules and responsibilities during his or her stay in the facility.  §483.10(g)(1) The resident conduct and responsibilities during his or her stay in the facility.  §483.10(g)(16) The facility must provide a notice of rights and services to the resident prior to or upon admission and during the resident stay. (i) The facility must inform the resident to norally and in writing in a language that the resident understands of his or her rights and all rules and regulations governing resident conduct and responsibilities during the stay in the facility. (ii) The facility must laso provide the resident with the State-developed notice of Medicaid rights and obligations, if any. (iii) Receipt of such information, and any amendments to it, must be acknowledged in writing;  This REQUIREMENT is not met as evidenced by:  Based on interview and record review the facility also failed to ensure that a newly admitted residents were provided information orally regarding Resident rights and responsibilities. The facility also failed to ensure that acknowledgement of receipt of the information was in writing for 3 of 3 residents in the sample (Residents #1, #2, and #3)'s medical record had no documented evidence that the facility provided them with written or or all other receipts of the information or all residents writing the information realized residents with the facility provided them with written or or all other provided to all staff regarding the facility provided them with written or or all patients/residents and or "Meet and Greet" conducted within 72 hours of admission.	SS=B							
CFR(s): 483.10(g)(1) Information and Communication. §483.10(g)(1) The resident has the right to be informed of his or her rights and of all rules and regulations governing resident conduct and responsibilities during his or her stay in the facility.  §483.10(g)(16) The facility must provide a notice of rights and services to the resident prior to or upon admission and during the resident stay. (i) The facility must inform the resident both orally and in writing in a language that the resident understands of his or her rights and all rules and regulations governing resident conduct and responsibilities during the stay in the facility. (ii) The facility must also provide the resident with the State-developed notice of Medicaid rights and obligations, if any. (iii) Receipt of such information, and any amendments to it, must be acknowledgement of residents in the sample (Residents #1, #2, and #3). Findings include:  Per record review Residents #1, #2, and #3)s medical record had no documented evidence that the facility provided them with written or or all officiation of the irrights and the rules and		Notice of Rights and	Rules				ected by	
\$483.10(g) (1) The resident has the right to be informed of his or her rights and of all rules and regulations governing resident conduct and responsibilities during the state the resident's state developed notice of rights and all rules and regulations governing resident conduct and responsibilities during the state that the resident stay. (I) The facility must inform the resident both orally and in writing in a language that the resident understands of his or her rights and all rules and regulations governing resident conduct and responsibilities during the stay in the facility. (II) The facility must also provide the resident with the State-developed notice of Medicaid rights and obligations, if any.  (III) Receipt of such information, and any amendments to it, must be acknowledgeed in writing;  This REQUIREMENT is not met as evidenced by;  Based on interview and record review the facility failed to ensure that a newly admitted residents were provided information orally regarding Resident rights and responsibilities. The facility also failed to ensure that a convolved generator of receipt of the information was in writing for 3 of 3 residents in the sample (Residents #1, #2, and #3's medical record had no documented evidence that the facility provided them with written or oral notification of the irrights and the rules and						the deficient practice?		
informed of his or her rights and of all rules and regulations governing resident conduct and responsibilities during his or her stay in the facility.  §483.10(g)(16) The facility must provide a notice of rights and services to the resident prior to or upon admission and during the residents stay. (i) The facility must inform the resident both orally and in writing in a language that the resident understands of his or her rights and all rules and regulations governing resident conduct and responsibilities during the stay in the facility. (ii) The facility must also provide the resident with the State-developed notice of Medicaid rights and obligations, if any.  (iii) Receipt of such information, and any amendments to it, must be acknowledged in writing;  This REQUIREMENT is not met as evidenced by:  Based on interview and record review the facility failed to ensure that a newly admitted residents were provided information orally regarding Resident in facility also failed to ensure that acknowledgement of receipt of the information was in writing for 3 of 3 residents in the sample (Residents #1, #2, and #3's medical record had no documented evidence that the facility provided them with written or oral notification of their rights and the rules and  All newly admitted patients/residents have the potential to be affected by the same deficient practice and what corrective action will be taken?  All newly admitted patients/residents have the potential to be affected.  An audit of the admission paperwork for all patient/residents was conducted. Incomplete admission packets have been provided to responsible parties.  What measures will be put into place or what systemic changes will be made to ensure that the deficient practice does not recur?  The following policy was reviewed and updated as indicated: "Residents Rights — CLR", "Admission Agreement".  The admission process and for "Meet and Greets" conducted within 72 hours of admission.  Copies of the updated policy have been provided to all patients/residents and/o		, ,				Resident #1 has discharged from the fa	cility.	
rights information for Resident #2 and Resident not regulations governing resident conduct and responsibilities during his or her stay in the facility.  §483.10(g)(16) The facility must provide a notice of rights and services to the resident prior to or upon admission and during the resident's stay. (i) The facility must inform the resident both orally and in writing in a language that the resident understands of his or her rights and all rules and regulations governing resident conduct and responsibilities during the stay in the facility in the State-developed notice of Medicaid rights and obligations, if any.  (iii) Receipt of such information, and any amendments to it, must be acknowledged in writing;  This REQUIREMENT is not met as evidenced by:  Based on interview and record review the facility failed to ensure that a newly admitted residents were provided information orally regarding Resident in fish and responsibilities. The facility also failed to ensure that acknowledgement of receipt of the information was in writing for 3 or 3 residents in the sample (Residents #1, #2, and #3's medical record had no documented evidence that the facility provided them with written or oral notification of their rights and the rules and						Admission packets that include the resi	dente	
regulations governing resident conduct and responsibilities during his or her stay in the facility.  §483.10(g)(16) The facility must provide a notice of rights and services to the resident prior to or upon admission and during the resident's stay. (i) The facility must inform the resident both orally and in writing in a language that the resident understands of his or her rights and all rules and regulations governing resident conduct and responsibilities during the stay in the facility. (ii) The facility must also provide the resident with the State-developed notice of Medicaid rights and obligations, if any.  (iii) Receipt of such information, and any amendments to it, must be acknowledged in writing;  This REQUIREMENT is not met as evidenced by:  Based on interview and record review the facility failed to ensure that a newly admitted residents were provided information orally regarding Resident rights and responsibilities. The facility also failed to ensure that acknowledgement of receipt of the information was in writing for 3 of 3 residents in the sample (Residents #1, #2, and #3's medical record had no documented evidence that the facility provided them with written or oral notification of their rights and the rules and		informed of his or he	r rights and of all rules and					Manah 7
responsibilities during his or her stay in the facility.  §483.10(g)(16) The facility must provide a notice of rights and services to the resident prior to or upon admission and during the resident's stay. (i)  The facility must inform the resident both orally and in writing in a language that the resident understands of his or her rights and all rules and regulations governing resident conduct and responsibilities during the stay in the facility. (ii) The facility must also provide the resident with the State-developed notice of Medicaid rights and obligations, if any.  (iii) Receipt of such information, and any amendments to it, must be acknowledged in writing;  This REQUIREMENT is not met as evidenced by:  Based on interview and record review the facility failed to ensure that a newly admitted residents were provided information orally regarding Resident rights and responsibilities. The facility also failed to ensure that acknowledgement of receipt of the information was in writing for 3 of 3 residents in the sample (Residents #1, #2, and #3). Findings include:  Per record review Residents #1, #2, and #3's medical record had no documented evidence that the facility provided them with written or oral notification of their rights and the rules and							Coldelli	,
§483.10(g)(16) The facility must provide a notice of rights and services to the resident prior to or upon admission and during the resident's stay. (i)  The facility must inform the resident both orally and in writing in a language that the resident understands of his or her rights and all rules and regulations governing resident conduct and responsibilities during the stay in the facility. (ii)  The facility must also provide the resident with the State-developed notice of Medicaid rights and obligations, if any.  (iii) Receipt of such information, and any amendments to it, must be acknowledged in writing;  This REQUIREMENT is not met as evidenced by:  Based on interview and record review the facility failed to ensure that a newly admitted residents were provided information orally regarding Resident rights and responsibilities. The facility also failed to ensure that acknowledgement of receipt of the information was in writing for 3 of 3 residents in the sample (Residents #1, #2, and #3). Findings include:  Per record review Residents #1, #2, and #3's medical record had no documented evidence that the facility provided them with written or oral notification of their rights and the rules and			g his or her stay in the			line mane meen completion.		2023
§483.10(g)(16) The facility must provide a notice of rights and services to the resident prior to or upon admission and during the resident's stay. (i)  The facility must inform the resident both orally and in writing in a language that the resident understands of his or her rights and all rules and regulations governing resident conduct and responsibilities during the stay in the facility. (ii)  The facility must also provide the resident with the State-developed notice of Medicaid rights and obligations, if any.  (iii) Receipt of such information, and any amendments to it, must be acknowledged in writing;  This REQUIREMENT is not met as evidenced by:  Based on interview and record review the facility failed to ensure that a newly admitted residents were provided information orally regarding  Resident rights and responsibilities. The facility also failed to ensure that acknowledgement of receipt of the information was in writing for 3 of 3 residents in the sample (Residents #1, #2, and #3)s medical record had no documented evidence that the facility provided them with written or oral notification of their rights and the rules and		facility.				How will you identify other residents ha	ving the	
of rights and services to the resident prior to or upon admission and during the resident's stay. (i)  The facility must inform the resident both orally and in writing in a language that the resident understands of his or her rights and all rules and regulations governing resident conduct and responsibilities during the stay in the facility. (ii) The facility must also provide the resident with the State-developed notice of Medicaid rights and obligations, if any.  (iii) Receipt of such information, and any amendments to it, must be acknowledged in writing; This REQUIREMENT is not met as evidenced by: Based on interview and record review the facility failed to ensure that a newly admitted residents was conducted. Incomplete admission paperwork for all patient/residents was conducted. Incomplete admission packets have been provided to responsible parties.  What measures will be put into place or what systemic changes will be made to ensure that the deficient practice does not recur?  The following policy was reviewed and updated as indicated: "Residents' Rights – CLR", "Admission Agreement".  "Admission Agreement".  The admission process and for "Meet and Greets" were reviewed and updated. All new admissions will receive a copy of the Resident Rights during their "Meet and Greet" conducted within 72 hours of admission.  Copies of the updated policy have been provided to all staff regarding PoA's as indicated.  Copies of the updated policy have been provided to all staff regarding		0.400.404.74407=====				potential to be affected by the same de	ficient	
upon admission and during the resident's stay. (i) The facility must inform the resident both orally and in writing in a language that the resident understands of his or her rights and all rules and responsibilities during the stay in the facility. (ii) The facility must also provide the resident with the State-developed notice of Medicaid rights and obligations, if any.  (iii) Receipt of such information, and any amendments to it, must be acknowledged in writing; This REQUIREMENT is not met as evidenced by: Based on interview and record review the facility failed to ensure that a newly admitted residents were provided information orally regarding Resident rights and responsibilities. The facility also failed to ensure that acknowledgement of receipt of the information was in writing for 3 of 3 residents in the sample (Residents #1, #2, and #3). Findings include:  Per record review Residents #1, #2, and #3's medical record had no documented evidence that the facility provided them with written or oral notification of their rights and the rules and						practice and what corrective action will	be	
The facility must inform the resident both orally and in writing in a language that the resident understands of his or her rights and all rules and regulations governing resident conduct and responsibilities during the stay in the facility. (ii)  The facility must also provide the resident with the State-developed notice of Medicaid rights and obligations, if any.  (iii) Receipt of such information, and any amendments to it, must be acknowledged in writing;  This REQUIREMENT is not met as evidenced by:  Based on interview and record review the facility failed to ensure that a newly admitted residents were provided information orally regarding Resident rights and responsibilities. The facility also failed to ensure that acknowledgement of receipt of the information was in writing for 3 of 3 residents in the sample (Residents #1, #2, and #3). Findings include:  Per record review Residents #1, #2, and #3's medical record had no documented evidence that the facility provided them with written or oral notification of their rights and the rules and						taken?		
and in writing in a language that the resident understands of his or her rights and all rules and regulations governing resident conduct and responsibilities during the stay in the facility. (ii) The facility must also provide the resident with the State-developed notice of Medicaid rights and obligations, if any. (iii) Receipt of such information, and any amendments to it, must be acknowledged in writing; This REQUIREMENT is not met as evidenced by:  Based on interview and record review the facility failed to ensure that a newly admitted residents were provided information orally regarding Resident rights and responsibilities. The facility also failed to ensure that acknowledgement of receipt of the information was in writing for 3 of 3 residents in the sample (Residents #1, #2, and #3). Findings include:  Per record review Residents #1, #2, and #3's medical record had no documented evidence that the facility provided them with written or oral notification of their rights and the rules and		I 1						
understands of his or her rights and all rules and regulations governing resident conduct and responsibilities during the stay in the facility. (ii) The facility must also provide the resident with the State-developed notice of Medicaid rights and obligations, if any. (iii) Receipt of such information, and any amendments to it, must be acknowledged in writing; This REQUIREMENT is not met as evidenced by:  Based on interview and record review the facility failed to ensure that a newly admitted residents were provided information orally regarding Resident rights and responsibilities. The facility also failed to ensure that acknowledgement of receipt of the information was in writing for 3 of 3 residents in the sample (Residents #1, #2, and #3). Findings include:  Per record review Residents #1, #2, and #3's medical record had no documented evidence that the facility provided them with written or oral notification of their rights and the rules and							ave the	
regulations governing resident conduct and responsibilities during the stay in the facility. (ii) The facility must also provide the resident with the State-developed notice of Medicaid rights and obligations, if any.  (iii) Receipt of such information, and any amendments to it, must be acknowledged in writing; This REQUIREMENT is not met as evidenced by: Based on interview and record review the facility failed to ensure that a newly admitted residents were provided information orally regarding Resident rights and responsibilities. The facility also failed to ensure that acknowledgement of receipt of the information was in writing for 3 of 3 residents in the sample (Residents #1, #2, and #3). Findings include:  Per record review Residents #1, #2, and #3's medical record had no documented evidence that the facility provided them with written or oral notification of their rights and the rules and						potential to be affected.		
responsibilities during the stay in the facility. (ii) The facility must also provide the resident with the State-developed notice of Medicaid rights and obligations, if any.  (iii) Receipt of such information, and any amendments to it, must be acknowledged in writing; This REQUIREMENT is not met as evidenced by: Based on interview and record review the facility failed to ensure that a newly admitted residents were provided information orally regarding Resident rights and responsibilities. The facility also failed to ensure that tacknowledgement of receipt of the information was in writing for 3 of 3 residents in the sample (Residents #1, #2, and #3). Findings include:  Per record review Residents #1, #2, and #3's medical record had no documented evidence that the facility provided them with written or oral notification of their rights and the rules and		· ·				An avalit of the admission non-availe to		
The facility must also provide the resident with the State-developed notice of Medicaid rights and obligations, if any.  (iii) Receipt of such information, and any amendments to it, must be acknowledged in writing; This REQUIREMENT is not met as evidenced by: Based on interview and record review the facility failed to ensure that a newly admitted residents were provided information orally regarding Resident rights and responsibilities. The facility also failed to ensure that acknowledgement of receipt of the information was in writing for 3 of 3 residents in the sample (Residents #1, #2, and #3). Findings include:  Per record review Residents #1, #2, and #3's medical record had no documented evidence that the facility provided them with written or oral notification of their rights and the rules and								
the State-developed notice of Medicaid rights and obligations, if any.  (iii) Receipt of such information, and any amendments to it, must be acknowledged in writing;  This REQUIREMENT is not met as evidenced by: Based on interview and record review the facility failed to ensure that a newly admitted residents were provided information orally regarding Resident rights and responsibilities. The facility also failed to ensure that acknowledgement of receipt of the information was in writing for 3 of 3 residents in the sample (Residents #1, #2, and #3). Findings include:  Per record review Residents #1, #2, and #3's medical record had no documented evidence that the facility provided them with written or oral notification of their rights and the rules and						I'		
and obligations, if any.  (iii) Receipt of such information, and any amendments to it, must be acknowledged in writing; This REQUIREMENT is not met as evidenced by: Based on interview and record review the facility failed to ensure that a newly admitted residents were provided information orally regarding Resident rights and responsibilities. The facility also failed to ensure that acknowledgement of receipt of the information was in writing for 3 of 3 residents in the sample (Residents #1, #2, and #3). Findings include:  Per record review Residents #1, #2, and #3's medical record had no documented evidence that the facility provided them with written or oral notification of their rights and the rules and  March 7, 2023  What measures will be put into place or what systemic changes will be made to ensure that the deficient practice does not recur?  The following policy was reviewed and updated as indicated: "Residents' Rights — CLR", "Admission Agreement".  The admission process and for "Meet and Greets" were reviewed and updated. All new admissions will receive a copy of the Resident Rights during their "Meet and Greet" conducted within 72 hours of admission.  Copies of the updated policy have been provided to all patients/residents and/or their POA's as indicated.  Education was provided to all staff regarding		· ·					10	
(iii) Receipt of such information, and any amendments to it, must be acknowledged in writing;  This REQUIREMENT is not met as evidenced by: Based on interview and record review the facility failed to ensure that a newly admitted residents were provided information orally regarding Resident rights and responsibilities. The facility also failed to ensure that acknowledgement of receipt of the information was in writing for 3 of 3 residents in the sample (Residents #1, #2, and #3). Findings include:  Per record review Residents #1, #2, and #3's medical record had no documented evidence that the facility provided them with written or oral notification of their rights and the rules and  What measures will be put into place or what systemic changes will be made to ensure that systemic changes will be made to ensure that systemic changes will be made to ensure that the deficient practice does not recur?  The following policy was reviewed and updated as indicated: "Residents' Rights — CLR", "Admission Agreement".  The admission process and for "Meet and Greets" were reviewed and updated. All new admissions will receive a copy of the Resident Rights during their "Meet and Greet" conducted within 72 hours of admission.  Copies of the updated policy have been provided to all patients/residents and/or their POA's as indicated.  Education was provided to all staff regarding		and obligations, if any.				Гоороновио ранасо,		
writing; This REQUIREMENT is not met as evidenced by: Based on interview and record review the facility failed to ensure that a newly admitted residents were provided information orally regarding Resident rights and responsibilities. The facility also failed to ensure that acknowledgement of receipt of the information was in writing for 3 of 3 residents in the sample (Residents #1, #2, and #3). Findings include:  Per record review Residents #1, #2, and #3's medical record had no documented evidence that the facility provided them with written or oral notification of their rights and the rules and						What measures will be put into place or	what	2023
This REQUIREMENT is not met as evidenced by: Based on interview and record review the facility failed to ensure that a newly admitted residents were provided information orally regarding Resident rights and responsibilities. The facility also failed to ensure that acknowledgement of receipt of the information was in writing for 3 of 3 residents in the sample (Residents #1, #2, and #3). Findings include:  Per record review Residents #1, #2, and #3's medical record had no documented evidence that the facility provided them with written or oral notification of their rights and the rules and  The following policy was reviewed and updated as indicated: "Residents' Rights — CLR", "Admission Agreement".  The admission process and for "Meet and Greets" were reviewed and updated. All new admissions will receive a copy of the Resident Rights during their "Meet and Greet" conducted within 72 hours of admission.  Copies of the updated policy have been provided to all patients/residents and/or their POA's as indicated.  Education was provided to all staff regarding		amendments to it, must be acknowledged in				systemic changes will be made to ensu	re that	
by: Based on interview and record review the facility failed to ensure that a newly admitted residents were provided information orally regarding Resident rights and responsibilities. The facility also failed to ensure that acknowledgement of receipt of the information was in writing for 3 of 3 residents in the sample (Residents #1, #2, and #3). Findings include:  Per record review Residents #1, #2, and #3's medical record had no documented evidence that the facility provided them with written or oral notification of their rights and the rules and  The following policy was reviewed and updated as indicated: "Residents' Rights — CLR", "Admission Agreement".  The admission process and for "Meet and Greets" were reviewed and updated. All new admissions will receive a copy of the Resident Rights during their "Meet and Greet" conducted within 72 hours of admission.  Copies of the updated policy have been provided to all patients/residents and/or their POA's as indicated.  Education was provided to all staff regarding		writing;				the deficient practice does not recur?		
Based on interview and record review the facility failed to ensure that a newly admitted residents were provided information orally regarding Resident rights and responsibilities. The facility also failed to ensure that acknowledgement of receipt of the information was in writing for 3 of 3 residents in the sample (Residents #1, #2, and #3). Findings include:  Per record review Residents #1, #2, and #3's medical record had no documented evidence that the facility provided them with written or oral notification of their rights and the rules and  The admission Agreement".  "Admission Agreement".  The admission process and for "Meet and Greets" were reviewed and updated. All new admissions will receive a copy of the Resident Rights during their "Meet and Greet" conducted within 72 hours of admission.  Copies of the updated policy have been provided to all patients/residents and/or their POA's as indicated.  Education was provided to all staff regarding		This REQUIREMENT	is not met as evidenced					
Based on interview and record review the facility failed to ensure that a newly admitted residents were provided information orally regarding Resident rights and responsibilities. The facility also failed to ensure that acknowledgement of receipt of the information was in writing for 3 of 3 residents in the sample (Residents #1, #2, and #3). Findings include:  Per record review Residents #1, #2, and #3's medical record had no documented evidence that the facility provided them with written or oral notification of their rights and the rules and  Based on interview the facility as indicated: "Residents' Rights — CLR", "Admission Agreement".  The admission process and for "Meet and Greets" were reviewed and updated. All new admissions will receive a copy of the Resident Rights during their "Meet and Greet" conducted within 72 hours of admission.  Copies of the updated policy have been provided to all patients/residents and/or their POA's as indicated.  Education was provided to all staff regarding		-				The following policy was reviewed and u	pdated	
failed to ensure that a newly admitted residents were provided information orally regarding Resident rights and responsibilities. The facility also failed to ensure that acknowledgement of receipt of the information was in writing for 3 of 3 residents in the sample (Residents #1, #2, and #3). Findings include:  Per record review Residents #1, #2, and #3's medical record had no documented evidence that the facility provided them with written or oral notification of their rights and the rules and  "Admission Agreement".  The admission process and for "Meet and Greets" were reviewed and updated. All new admissions will receive a copy of the Resident Rights during their "Meet and Greet" conducted within 72 hours of admission.  Copies of the updated policy have been provided to all patients/residents and/or their POA's as indicated. Education was provided to all staff regarding								
Resident rights and responsibilities. The facility also failed to ensure that acknowledgement of receipt of the information was in writing for 3 of 3 residents in the sample (Residents #1, #2, and #3). Findings include:  Per record review Residents #1, #2, and #3's medical record had no documented evidence that the facility provided them with written or oral notification of their rights and the rules and  The admission process and for "Meet and Greets" were reviewed and updated. All new admissions will receive a copy of the Resident Rights during their "Meet and Greets" of the updated and updated.  Copies of the updated policy have been provided to all patients/residents and/or their POA's as indicated.  Education was provided to all staff regarding			·					
also failed to ensure that acknowledgement of receipt of the information was in writing for 3 of 3 residents in the sample (Residents #1, #2, and #3). Findings include:  Per record review Residents #1, #2, and #3's medical record had no documented evidence that the facility provided them with written or oral notification of their rights and the rules and  Greets" were reviewed and updated. All new admissions will receive a copy of the Resident Rights during their "Meet and Greet" conducted within 72 hours of admission.  Copies of the updated policy have been provided to all patients/residents and/or their POA's as indicated.  Education was provided to all staff regarding								
receipt of the information was in writing for 3 of 3 residents in the sample (Residents #1, #2, and #3). Findings include:  Per record review Residents #1, #2, and #3's medical record had no documented evidence that the facility provided them with written or oral notification of their rights and the rules and  admissions will receive a copy of the Resident Rights during their "Meet and Greet" conducted within 72 hours of admission.  Copies of the updated policy have been provided to all patients/residents and/or their POA's as indicated.  Education was provided to all staff regarding		_	•					
residents in the sample (Residents #1, #2, and #3). Findings include:  Per record review Residents #1, #2, and #3's medical record had no documented evidence that the facility provided them with written or oral notification of their rights and the rules and  Rights during their "Meet and Greet" conducted within 72 hours of admission.  Copies of the updated policy have been provided to all patients/residents and/or their POA's as indicated.  Education was provided to all staff regarding			•					
#3). Findings include:  Per record review Residents #1, #2, and #3's medical record had no documented evidence that the facility provided them with written or oral notification of their rights and the rules and  within 72 hours of admission.  Copies of the updated policy have been provided to all patients/residents and/or their POA's as indicated.  Education was provided to all staff regarding		•	•					
Per record review Residents #1, #2, and #3's medical record had no documented evidence that the facility provided them with written or oral notification of their rights and the rules and  Copies of the updated policy have been provided to all patients/residents and/or their POA's as indicated. Education was provided to all staff regarding						, ,	naucted	
medical record had no documented evidence that the facility provided them with written or oral notification of their rights and the rules and provided to all patients/residents and/or their POA's as indicated.  Education was provided to all staff regarding		#3). Findings include	•			within 72 hours of admission.		
medical record had no documented evidence that the facility provided them with written or oral notification of their rights and the rules and provided to all patients/residents and/or their POA's as indicated.  Education was provided to all staff regarding		Per record review Re	sidents #1, #2, and #3's			Copies of the undated policy have been	,	
the facility provided them with written or oral POA's as indicated.  notification of their rights and the rules and Education was provided to all staff regarding								
notification of their rights and the rules and Education was provided to all staff regarding						l, .	3.0.1	
						I	rdina	
							•	

PRINTED: 02/23/2023 FORM APPROVED OMB NO. 0938-0391

			(X2) MULTIPL	E CONSTRUCTION		
STATEMENT OF DEFICIENCIES (X1) PROVIDER/SUPPLIER/CLI AND PLAN OF CORRECTION IDENTIFICATION NUMBER:		A. BUILDING			(X3) DATE SURVEY COMPLETED	
AND PLAN OF CORRECTION   IDENTIFICATION NUMBER:		DENTIFICATION NOMBER.	A. BUILDING			
					'	С
		475029	B. WING		02/	13/2023
NAME OF I	PROVIDER OR SUPPLIER			STREET ADDRESS, CITY, STATE, ZIP CODE		
CENTER FOR LIVING & REHABILITATION				160 HOSPITAL DRIVE BENNINGTON, VT 05201		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)		ID PREFIX TAG	PREFIX (EACH CORRECTIVE ACTION SHOULD BE		(X5) COMPLETION DATE
F 572	Continued From page	e 4	F 572	F 572 How will the corrective actions be monitored to		
	responsibilities during	g his or her stay in the		ensure the deficient practice will not re	cur, ie,	
	facility.	g c c , a	what quality assurance program will b place?		put into	
	On 2/13/23 at 11:15 A	AM during interview with				
		e, s/he stated that s/he did				
	not recall receiving a	ny information regarding		For the next four weeks, the Administrate	or and/or	March 7,
	finances or residents'	rights and responsibilities at		designee will conduct weekly au	0000	
	the time of her/his sp	ouse's admission.		completion of admission packets and the		
				will conduct weekly audits of the Me	et and	
		Admission Agreement Policy		Greets paperwork.		
		ving and Rehabilitation)				
	section IV. Policy Stat					
Admissions coordinator / designee will review and obtain signatures for admission packet and				After four weeks, random audits		
admission documents with resident/patient and			conducted monthly for three months a randomly thereafter. Results of the int			
	family within a timely manner of admission to			will be reported to the facility Safety		
	CLR."			Committee.		
	2/13/2023 at 1:30 PM Services stated that it	Director of Ancillary ector of Nursing (DON) on the Director of Ancillary is their responsibility to ent or responsible party		The dates corrective action will be comp	eted.	
	receives an Admissio of the information tha	n Packetthat addresses all tils required to be provided.		March 7, 2023		
	packet with the requir resident and/or family and return. Sometime sometimes it is not. S not provide oral expla	y member to review, sign,		Tag F 572 POC accepted on 3/6/2 S. Freeman/P. Cota	23 by	

