STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	ALR01454	A. BUILDING: _____ B. WING _____	C 03/21/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
PACIFICA SENIOR LIVING VICTORIA COURT	55 OAKLAWN AVENUE CRANSTON, RI 02920

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
S 003	Initial Comments An unannounced complaint/incident investigation survey and a follow-up survey were conducted at this residence. A deficiency was identified.	S 003	RECEIVED MAY 16 2024 FACILITIES REGULATION	
S 405	Residency Requirements 2.4.17.B Reporting Requirements 2.4.17 (B) Reporting Requirements B. Accidents, incidents, and medication errors resulting in out-of-residence emergency medical services resulting in a hospital admission of any resident shall be reported to the Center for Health Facilities Regulation in writing, via facsimile or electronic transmission to doh.ofr@health.ri.gov by the end of the next working day. A copy of each report shall be retained by the residence for review during subsequent inspections by the Department. This Requirement is not met as evidenced by: Based on record review and staff interview, it has been determined the residence had continued non-compliance in reporting accidents and incidents resulting in out-of-residence emergency medical services and a hospital admission of any resident in writing to the Center for Health Facilities Regulation, by the end of the next working day for 2 of 10 residents with incidents, Resident ID #s 8 and 13. Findings are as follows: 1. Record review revealed Resident ID #8 had an incident on 1/20/2024 at 12:00 PM, which resulted in a hospital admission on 1/20/2024 due to agitation.	S 405	S 405 Residency Requirements 2.4.17.B Reporting Requirements 2.4.17 (B) Reporting Requirements Resident ID #8 and Resident ID#13's incident reports were not sent to the Center for Health Facilities Regulation in writing by the end of the next working day as stated but rather they were both sent the day after. All residents had potential to be affected by this deficient practice. To ensure that this deficient practice does not recur, The Executive Director and Resident Care Director have been re-inserviced on the RIDOH Residency Requirements pertaining to section 2.4.17 (B) Reporting Requirements as well as re-inserviced on the company's policy and procedures pertaining to Internal Incident Report and State Incident Report. The Business Office Manager has also been trained on the RIDOH Residency Requirements pertaining to Reporting Requirements to ensure timely compliance. (Please see attached) ...Continue to page 2...	4/9/2024

Facilities Regulation
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE — TITLE — (X6) DATE

Executive Director 5/14/2024

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
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S 405	Continued From page 1 This resident's incident was reported to the Center for Health Facilities Regulation in writing on 1/23/2024. 2. Record review revealed Resident ID #13 had a fall on 3/1/2024 at 2:25 PM, which resulted in a hospital admission on 3/1/2024 due to a left hip fracture. This resident's incident was reported to the Center for Health Facilities Regulation in writing on 3/5/2024. During a surveyor interview on 3/21/2024 at 2:20 PM with the Executive Director, she acknowledged the incidents were not reported on the next working day, as required.	S 405	Continued from page 1... The Resident Care Director must discuss all reportable incidences by the next morning during the morning manager's "standup" meeting to include the Executive Director. In addition, all reportable incidences must be submitted, in writing, to the regional director of operations and the company's clinical corporate team within the next morning for continued compliance. Going forward, reporting of all accidents and incidents resulting in out-of-residence emergency medical services which resulted in a hospital admission of any resident will be reported to the Center for Health Care Facilities Regulation in writing by the end of the next business day.	4/9/2024 4/9/2024