STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	ALR01513	A. BUILDING: _____ B. WING _____	C 09/07/2023

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
WINGATE RESIDENCES ON THE EAST SIDE	ONE BUTLER AVENUE PROVIDENCE, RI 02906

(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 was conducted at this residence. Deficiencies were identified.	S 003	S 365 RECEIVED OCT 06 2023 FACILITIES REGULATION	10/6/2023
S 365	Residency Requirements 2.4.16.D Resident Assessment/Service Plans 2.4.16 (d) Resident Assessments and Service Plans D. The assessment shall be reviewed and at intervals not to exceed twelve (12) months and each time a resident's condition changes significantly. This Requirement is not met as evidenced by: Based on record review and staff interview, it has been determined the residence failed to review the comprehensive assessment at intervals not to exceed (12) months and each time a resident's condition changes significantly for 3 of 8 sample residents reviewed, Resident ID #s 1, 2, and 3. Findings are as follows: 1. Record review revealed Resident ID #1 moved into the residence in July of 2021 with a diagnosis of heart disease. Record review revealed the last comprehensive assessment was completed on 8/4/2021. Further record review failed to reveal evidence the assessment was reviewed at intervals not to exceed 12 months, as required. 2. Record review revealed Resident ID #2 moved into the residence in May of 2017 with a diagnosis	S 365	Resident ID # 1 A Comprehensive Assessment was completed on 9/28/23. Resident assessed as independent with ADLS and capable of Self-Administering Medications. Resident ID # 2- A Comprehensive Assessment was completed on 9/25/23. Resident assessed as Independent with ADLS and capable of Self-Administering Medications. Resident ID # 3 Resident returned to community on 9/21/23. A Change in Condition Assessment was completed on 9/21/23. Resident assessed as needing Min A with Bathing/ Dressing with PDA she has secured and capable of Self Administering Medications. 10/3/23 • All resident Comprehensive or Change in Condition Assessments are completed as current. • All residents residing in licensed apts will continue to be re-assessed at intervals not to exceed twelve (12) months and each time a resident's condition changes significantly.	

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S 365	Continued From page 1 of vertigo. Record review revealed the last comprehensive assessment was completed on 8/13/2022. Further record review failed to reveal evidence the assessment was reviewed at intervals not to exceed 12 months, as required. 3. Record review revealed Resident ID #3 moved into the residence in September of 2020 with a diagnosis of anxiety. Record review revealed the last comprehensive assessment was completed on 8/23/2022. Further record review failed to reveal evidence the assessment was reviewed at intervals not to exceed 12 months, as required. During a surveyor interview on 9/7/2023 at 3:56 PM with the Director of Wellness, she was unable to provide evidence that a comprehensive assessment had been completed at intervals not to exceed 12 months for the above mentioned residents, as required.	S 365	• Assessment audits will be conducted each month for 90 days. The findings will be reviewed with the Executive Director at the end of the month with any recommendations to be implemented. Audit tracking tool with findings to be discussed at Quarterly QA meetings. • Wellness Director will be responsible for monitoring compliance. 10/13/23	10/6/2023
S 375	Residency Requirements 2.4.16.F Resident Assessment/Service Plans 2.4.16 (F) Nurse Review 1. Nurse review is necessary for all levels of licensure. a. A registered nurse shall visit the residence at least once every thirty (30) days except as provided in § 2.4.16(F)(1)(b) of this Part and shall complete a review to include the following:	S 375	S 375 2.4.16 Resident Assessments and Service Plan	

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S 375	Continued From page 2 (1) Monitor the medication regimen for all residents; (2) Review any new physician orders and evaluate the health status of all residents by identifying symptoms of illness and/or changes in mental/physical health status; (3) Evaluate the appropriateness of placement for each resident; (4) Make any necessary recommendations to the administrator; (5) Follow up on previous recommendations; (6) Provide a signed, written report in the residence documenting: (AA) Date and time of assessment; (BB) Recommendations for follow-up; (CC) Progress on previous recommendations; (DD) Verification that the medication listed by the pharmacist on the mediset, blister pack or medication container is current with physician orders (M-1 level only); (EE) Physical assessment identifying symptoms of illness and/or changes in mental or physical health status and appropriateness of placement;	S 375	Resident ID # 1 A 90 Day Review was completed on 9/28/23. Resident reviewed as Independent with ADLS and capable of Self Administering Medications. Resident ID # 2- A 90 Day Review was completed on 9/25/23. Resident reviewed as Independent with ADLS and capable of Self Administering Medications. Resident ID # 3 Resident returned to community on 9/21/23. A 90 day review was completed on 9/21/23 resulting in a Change in Condition Assessment being completed on 9/21/23. Resident needing Min A with Bathing/ Dressing and capable of Self Administering Medications. Resident ID # 4 A 90 Day Review was completed on9/28/23. Resident reviewed as Independent with ADLS and capable of Self Administering Medications. Resident # 5 Moved out of community to home on 9/13/2023. • All resident Nurse Reviews will be completed up to date by Oct 31. • A 90 Day Nurse Review will be completed on all residents residing in licensed apts. • All residents residing in licensed apts will continue to be reviewed every 90 days • Nurse Review audits will be conducted each month for 90 days. The findings	

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S 375	Continued From page 3 (FF) Such reports shall be on file at the residence. (7) Complete the quarterly evaluation of the residence's registered medication aide(s) administration of medication. (Approved Department form is available for downloading online). b. In those residences that have one or more licensed registered nurses (i.e., at least one full-time equivalent equal to thirty-five (35) hours) on- site, the nurse review shall be completed at least once every ninety (90) days. This Requirement is not met as evidenced by: Based on record review and staff interview, it has been determined the residence failed to complete nurse reviews every 90 days as required for 5 of 8 sample residents, Resident ID #s 1, 2, 3, 4, and 5. Findings are as follows: 1. Record review revealed Resident ID #1 moved into the residence in July of 2021 with a diagnosis of heart disease. Record review revealed the resident's last 90-day nurse review was completed on 3/22/2023. 2. Record review revealed Resident ID #2 moved into the residence in May of 2017 with a diagnosis of vertigo. Record review revealed the resident's last 90-day nurse review was completed on 3/12/2023.	S 375	will be reviewed with the Executive Director at the end of the month with any recommendations to be implemented. • Audit Tracking Tool with findings will be filed with Monthly and Quarterly Meeting minutes. • Wellness Director or designee will be responsible for monitoring compliance.	

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S 375	Continued From page 4 3. Record review revealed Resident ID #3 moved into the residence in September of 2020 with a diagnosis of anxiety. Record review revealed the resident's last 90-day nurse review was completed on 3/22/2023. 4. Record review revealed Resident ID #4 moved into the residence in June of 2022 with a diagnosis of hypertension. Record review revealed the resident's last 90-day nurse review was completed on 3/23/2023. 5. Record review revealed Resident ID #5 moved into the residence in April of 2023 with a diagnosis of aphasia. The record failed to reveal a completed 90-day nurse review. During a surveyor interview on 9/7/2023 at 3:56 PM with the Director of Wellness, she was unable to provide evidence that 90-day nurse reviews had been completed for the above mentioned residents, as required.	S 375		