



**DELAWARE HEALTH AND SOCIAL SERVICES**

Division of Health Care Quality  
Office of Long-Term Care Residents Protection

DHSS - DHCQ  
263 Chapman Road, Ste 200, Cambridge Bldg.  
Newark, Delaware 19702  
(302) 421-7400

**STATE SURVEY REPORT**

**NAME OF FACILITY:** Oak Bridge Terrace at Manor House

**DATE SURVEY COMPLETED:** May 24, 2023

SECTION	STATEMENT OF DEFICIENCIES SPECIFIC DEFICIENCIES	ADMINISTRATOR'S PLAN FOR CORRECTION OF DEFICIENCIES	COMPLETION DATE
<p>3225.0</p> <p>3225.10.0</p> <p>3225.10.10</p>	<p>An unannounced Annual and Complaint Survey was conducted at this facility from May 22, 2023 through May 24, 2023. The deficiencies contained in this report are based on record review, interview and review of other facility documentation. The facility census on the first day of the survey was 35 (thirty-five). The survey sample totaled eight (8) residents.</p> <p>Abbreviations/definitions used in this state report are as follows:  ADM – Administrator;  Contract - an agreement between parties, creating mutual obligations that are enforceable by law;  ED - Executive Director;  DAL – Director of Assisted Living;  Dementia - the loss of cognitive functioning – thinking, remembering, and reasoning – to such an extent that it interferes with a person's daily life and activities;  Service Agreement - allows both parties involved (the resident and the assisted living facility) to understand the types of care and services the assisted living provides. These include: lodging, board, housekeeping, personal care, and supervision services.</p> <p><b>Regulations for Assisted Living Facilities</b></p> <p><b>Contracts</b></p> <p><b>No contract shall be signed before a full assessment of the resident has been completed and a service agreement has been executed. If a deposit is required prior to move-in, the deposit shall be fully refundable if the parties cannot agree on the services and fees upon completion of the assessment.</b></p> <p>This requirement was not met as evidenced by:</p>		

Provider's Signature

Title

*N/A*

Date

*6/12/23*



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<p>3225.11.0</p> <p>3225.11.3</p>	<p>Based on record review, interview and review of other facility documentation, it was determined that for three (R5, R6 and R8) out of eight sampled residents, the facility obtained a signed contract prior to the service agreement being executed. Findings include:</p> <p>1. 5/2/22 – R5 was admitted to the facility. The service agreement was completed on 5/2/22. The contract was signed on 4/8/22.</p> <p>2. 4/22/23 – R6 was admitted to the facility. The service agreement was completed on 4/25/23. The contract was signed on 4/7/23.</p> <p>3. 9/7/22 - R8 was admitted to the facility. The service agreement was completed on 9/7/22. The contract was signed on 9/6/22.</p> <p>5/24/23 – Per interview at approximately 1:20 PM with E1 (ED) and E2 (ADM), E2 confirmed the contracts were signed prior to the service agreement being executed.</p> <p>5/24/23 - Findings were reviewed with E1 (ED), E2 (ADM) and E3 (DAL) at the exit conference, beginning at approximately 1:30 PM.</p> <p><b>Resident Assessment</b></p> <p><b>Within 30 days prior to admission, a prospective resident shall have a medical evaluation completed by a physician.</b></p> <p>This requirement was not met as evidenced by:</p> <p>Based on record review, interview and review of other facility documentation, it was determined that for two (R5 and R8) out of eight sampled residents, the facility</p>	<p>A. R5, R6, and R8 contracts were reviewed and unable to correct at this time.</p> <p>B. The Director of Assisted Living will review prior contracts for proper completion.</p> <p>C. Facility obtained a signed contract prior to assessments being completed. The Nursing Home Administrator provided education to the Director of Assisted Living and the Support Plan Coordinator on regulation for completion of service agreement, full-assessment, and contract.</p> <p>D. The Nursing Home Administrator will conduct monthly audits of all new residents, for three months or until 100% compliance, to ensure full compliance with this requirement. Results of these audits will be presented at our QAPI Committee Meeting.</p>	<p>6/8/2023</p>

Provider's Signature

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	<p>failed to provide evidence that the Physician's medical evaluations were completed within 30 days prior to admission. Findings include:</p> <p>1. 5/2/22 – R5 was admitted with a diagnosis of high blood pressure. The medical evaluation was completed by the Physician on 3/4/22, more than thirty days prior to admission.</p> <p>2. 9/7/22 – R8 was admitted with a diagnosis of dementia. The medical evaluation was completed by the Physician on 7/29/22, more than thirty days prior to admission.</p> <p>5/24/23 – Per interview at approximately 1:20 PM with E1 (ED) and E2 (ADM), E2 confirmed the Physician's medical evaluations were done beyond 30 days prior to admission.</p> <p>5/24/23 - Findings were reviewed with E1 (ED), E2 (ADM) and E3 (DAL) at the exit conference, beginning at approximately 1:30 PM.</p>	<p>A. R5 and R8 assessments were reviewed and unable to be corrected at this time.</p> <p>B. The Director of Assisted Living reviewed prior assessments for proper completion.</p> <p>C. Resident's medical evaluation was done outside of the 30-day prior to admission regulation. The Nursing Home Administrator provided education to the Director of Assisted Living and Support Plan Coordinator on this requirement.</p> <p>D. The Nursing Home Administrator will conduct monthly audits, for three months or until 100% compliance, of all new residents to ensure full compliance with this requirement. Results of these audits will be submitted to the QAPI Committee.</p>	<p>6/8/2023</p>

Provider's Signature 

Title NHA

Date 6/12/23