A paper follow up was conducted from 6/17/20 through 6/19/20 and the deficiencies identified during the 1/31/20 recertification were found to be corrected as of 4/15/20. The facility remains out of compliance due to outstanding deficiencies discovered during a complaint investigation/infection control investigation dated 5/21/20 with event ID GROF11.

Any 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.