

April 30, 2020

Ms. Amy Hogan

Nursing Facility Policy Administrator

Bureau of Long-Term Services and Support

The Ohio Department of Medicaid

50 Town Street, Suite 400

Columbus, Ohio 43215

Dear Ms. Hogan:

Attached please find the quarterly report for CMP Grant Contract #20-014, ODM #G-2021-04-0289, SNF Clinic, for the period January 1, 2020 through March 31, 2020.

Please review the attached information and contact me directly with any questions or input regarding this information. We look forward to working with you and other members of your team as we move forward with this project.

Respectfully Submitted



Benjamin Meeker, Esq.
Managing Member
Long-Term Care Consultants, LLC.

Quarterly Report January 1, 2020 through March 31, 2020
SNF Clinic
Performance Requirements Progress Report

1. During the second quarter of participation all five original facilities have been onboarded.
2. More importantly, with the onset of the COVID-19 virus over the past few months, Long Term Care Consultants has taken the lead in providing clinicians within Long Term Care facilities information regarding best clinical practices relative to controlling the potential dissemination of the virus and protecting others within the facility and facility staff. Effective February 26th our team began the process of focusing on the COVID-19 pandemic and developed a special information tab within SNFclinic focusing specifically on the Covid-19 crisis. Information included within this learning module includes:
 - a. "What Older Adults Need to know About the Corona Virus, Covid-19 (CDC)
 - b. Covid-19 Corona Video and Lesson Plan
 - c. Corona Virus Preparedness Checklist for Nursing Homes and Other Long-Term Care Settings
 - d. Covid-19 Corona Virus Tools for Long -Term Care Facilities (15 compliance items for use in Long Term Care facilities)
 - e. Hand Washing Test
 - f. Covid-19 test

The fact that SNFclinic is a web-based training and compliance tool allowed our team to quickly react to this unforeseen emergency and provided front line clinical staff with critical and timely information and competency testing for this natural disaster in a timely manner.

3. Long Term Care Consultants began tracking the expected outcomes included within our proposal. These Outcomes included the following measurable results which we will continue to monitor throughout the period covered by the grant:

- a. Increase in Resident Satisfaction and Person-Centered Care through Staff Training (given the outbreak of the COVID-19 crisis during this quarter, we continue to work with facilities in gathering this information)
- b. A reduction in survey deficiencies
- c. Improvement in the scope and severity of survey tags
- d. Improvement in Compliance

Attachment A included with this correspondence, provides information regarding 14 MDS and Claims based data points monitored by CMS for purposes of determining the quality indicators used in the five-star rating system. The Data Points that we will continue to monitor throughout the grant period include the following:

- Percentage of high risk long-stay residents with pressure ulcers
- Percentage of long-stay residents experiencing one or more falls with major injury
- Percentage of long-stay residents who received an antipsychotic medication
- Percentage of long-stay residents whose ability to move independently worsened
- Percentage of long-stay residents whose need for help with daily activities has increased
- Percentage of long-stay residents with a catheter inserted and left in their bladder
- Percentage of long-stay residents with a urinary tract infection
- Percentage of short-stay residents who made improvements in function
- Percentage of short-stay residents who newly received an antipsychotic medication
- Percentage of SNF residents with pressure ulcers that are new or worsened
- Percentage of short-stay residents who were hospitalized after a nursing home admission
- Percentage of short-stay residents who had an outpatient emergency department visit
- Number of hospitalizations per 1000 long-stay resident days
- Number of outpatient emergency department visits per 1000 long-stay resident days

Attachment B included with this correspondence, provides an overview of each facility's survey results presenting information from prior surveys as well as providing information on the scope and severity of the survey findings. During the first quarter of 2020, we established "Baseline Periods" which will be used moving forward to evaluate the effectiveness of the program. It should be noted that three of the five participating facilities have improved survey results both in scope and severity since the introduction of the software into the facility.

4. Long-Term Care Consultants, LLC continues to add information and resources to the software database during the months of January, February and March of 2020. As outlined above, most

of our efforts during the first quarter of 2020 was related to disseminating information relative to the Covid-19 pandemic. However, we continued to expand the database related to the "In-Services", "Assessments" and the "What IF" modules. Our clinical consultant continues to prepare and review information which can expand and improve both the knowledge and skills set of facility personnel to better serve the resident population.

Long-Term Care Consultants, LLC.
 Summary of Quality Indicators
 For the Quarter Ended March 31, 2020

Canton Christian Home
 2550 CLEVELAND AVENUE NW
 CANTON, Ohio 44709

←----- Prior To Grant Program -----→

Measure Code	Measure Description	Resident type	Q1 Measure Score	Q2 Measure Score	Q3 Measure Score	Q4 Measure Score	Four Quarter Average Score	Baseline		Used in Quality Measure	Measure Period	
								State of Ohio Average	National Average			
MDS Data Points:												
453	Percentage of high risk long-stay residents with pressure ulcers	Long Stay	3.9216	3.9216	9.8039	10.3448	7.1090	6.8000	7.3000	TRUE	2018Q4-2019Q3	
410	Percentage of long-stay residents experiencing one or more falls with major injury	Long Stay	6.6667	5.2632	5.0000	8.1967	6.3025	3.5000	3.4000	TRUE	2018Q4-2019Q3	
419	Percentage of long-stay residents who received an antipsychotic medication	Long Stay	10.1695	10.9091	10.3448	10.3448	10.4348	14.2000	14.4000	TRUE	2018Q4-2019Q3	
451	Percentage of long-stay residents whose ability to move independently worsened	Long Stay	10.7803	19.8246	17.9388	26.0525	18.4574	18.3000	17.5000	TRUE	2018Q4-2019Q3	
401	Percentage of long-stay residents whose need for help with daily activities has increased	Long Stay	10.7143	13.4615	14.2857	16.3265	13.6150	15.2000	14.5000	TRUE	2018Q4-2019Q3	
406	Percentage of long-stay residents with a catheter inserted and left in their bladder	Long Stay	5.1630	3.6360	4.8256	5.2884	4.7423	1.5000	1.9000	TRUE	2018Q4-2019Q3	
407	Percentage of long-stay residents with a urinary tract infection	Long Stay	0.0000	1.7544	3.3333	1.6393	1.6807	2.1000	2.7000	TRUE	2018Q4-2019Q3	
471	Percentage of short-stay residents who made improvements in function	Short Stay	69.4034	68.2635	74.5018	78.5823	72.4775	66.8000	67.6000	TRUE	2018Q4-2019Q3	
434	Percentage of short-stay residents who newly received an antipsychotic medication	Short Stay	0.0000	0.0000	0.0000	0.0000	0.0000	2.0000	1.8000	TRUE	2018Q4-2019Q3	
476	Percentage of SNF residents with pressure ulcers that are new or worsened	Short Stay					1.2962	1.4000	1.5000	TRUE	2018Q4-2019Q3	
Claims Data Points												
			<u>Observed Score</u>									
521	Percentage of short-stay residents who were hospitalized after a nursing home admission	Short Stay		16.4384				22.5000	22.3000	TRUE	July 1, 2018 - June 30, 2019	
522	Percentage of short-stay residents who had an outpatient emergency department visit	Short Stay		12.3288				10.8000	10.7000	TRUE	July 1, 2018 - June 30, 2019	
551	Number of hospitalizations per 1000 long-stay resident days	Long Stay		1.7680				1.5300	1.7200	TRUE	July 1, 2018 - June 30, 2019	
552	Number of outpatient emergency department visits per 1000 long-stay resident days	Long Stay		1.7680				0.9000	0.9500	TRUE	July 1, 2018 - June 30, 2019	

NOTES:

MDS Data Point Measures:

Long Stay Measures:

- Measure 453- Lower Percentages are better
- Measure 410- Lower Percentages are better
- Measure 419- Lower Percentages are better
- Measure 451- Lower Percentages are better
- Measure 401 - Lower Percentages are better
- Measure 406- Lower Percentages are better
- Measure 407- Lower Percentages are better

Short-Stay Measures: Short Stay Residents are residents who stayed in a nursing home for 100 days or less

- Measure 471- Higher Percentages are better
- Measure 434- Lower Percentages are better
- Measure 476- Lower Percentages are better

Claims Data Points:

- Measure 521- Lower Percentages are better
- Measure 522- Lower Percentages are better
- Measure 551 - Lower Numbers are better
- Measure 552- Lower Numbers are better

Long-Term Care Consultants, LLC.
 Summary of Quality Indicators
 For the Quarter Ended March 31, 2020

CRESTMONT NORTH NURSING HOME
 13330 DETROIT AVE
 Lakewood, Ohio 44107

← Prior To Grant Program →

Measure Code	Measure Description	Resident type	Baseline					Used in Quality Measure	State of Ohio Average	National Average	Measure Period
			Q1 Measure Score	Q2 Measure Score	Q3 Measure Score	Q4 Measure Score	Four Quarter Average Score				
MDS Data Points:											
453	Percentage of high risk long-stay residents with pressure ulcers	Long Stay	17.8571	6.8966	12.0000	13.6364	12.5000	TRUE	6.8000	7.3000	2018Q4-2019Q3
410	Percentage of long-stay residents experiencing one or more falls with major injury	Long Stay	5.5556	3.8462	2.0000	0.0000	2.9268	TRUE	3.5000	3.4000	2018Q4-2019Q3
419	Percentage of long-stay residents who received an antipsychotic medication	Long Stay	24.3243	23.5294	26.4706	18.7500	23.3577	TRUE	14.2000	14.4000	2018Q4-2019Q3
451	Percentage of long-stay residents whose ability to move independently worsened	Long Stay	10.6516	27.4714	16.0173	15.6311	17.7744	TRUE	18.3000	17.5000	2018Q4-2019Q3
401	Percentage of long-stay residents whose need for help with daily activities has increased	Long Stay	17.7778	18.6047	14.2857	2.4390	13.4503	TRUE	15.2000	14.5000	2018Q4-2019Q3
406	Percentage of long-stay residents with a catheter inserted and left in their bladder	Long Stay	6.3267	4.2913	2.2155	0.0000	3.3622	TRUE	1.5000	1.9000	2018Q4-2019Q3
407	Percentage of long-stay residents with a urinary tract infection	Long Stay	0.0000	0.0000	0.0000	0.0000	0.0000	TRUE	2.1000	2.7000	2018Q4-2019Q3
471	Percentage of short-stay residents who made improvements in function	Short Stay						TRUE	66.8000	67.6000	2018Q4-2019Q3
434	Percentage of short-stay residents who newly received an antipsychotic medication	Short Stay					8.0000	TRUE	2.0000	1.8000	2018Q4-2019Q3
476	Percentage of SNF residents with pressure ulcers that are new or worsened	Short Stay						TRUE	1.4000	1.5000	2018Q4-2019Q3
Claims Data Points											
			<u>Observed Score</u>								
521	Percentage of short-stay residents who were rehospitalized after a nursing home admission	Short Stay	0.0000					TRUE	22.5000	22.3000	July 1, 2018 - June 30, 2019
522	Percentage of short-stay residents who had an outpatient emergency department visit	Short Stay	0.0000					TRUE	10.8000	10.7000	July 1, 2018 - June 30, 2019
551	Number of hospitalizations per 1000 long-stay resident days	Long Stay	0.0000					TRUE	1.5300	1.7200	July 1, 2018 - June 30, 2019
552	Number of outpatient emergency department visits per 1000 long-stay resident days	Long Stay	0.0000					TRUE	0.9000	0.9500	July 1, 2018 - June 30, 2019

NOTES:

MDS Data Point Measures:

Long Stay Measures:

- Measure 453- Lower Percentages are better
- Measure 410- Lower Percentages are better
- Measure 419- Lower Percentages are better
- Measure 451- Lower Percentages are better
- Measure 401 - Lower Percentages are better
- Measure 406- Lower Percentages are better
- Measure 407- Lower Percentages are better

Short- Stay Measures: Short Stay Residents are residents who stayed in a nursing home for 100 days or less

- Measure 471- Higher Percentages are better
- Measure 434- Lower Percentages are better
- Measure 476- Lower Percentages are better

Claims Data Points:

- Measure 521- Lower Percentages are better
- Measure 522- Lower Percentages are better
- Measure 551 - Lower Numbers are better
- Measure 552- Lower Numbers are better

Long- Term Care Consultants, LLC.
 Summary of Quality Indicators
 For the Quarter Ended March 31, 2020

CRYSTAL CARE OF COAL GROVE
 813 1/2 MARION PINE
 Coal Grove, Ohio 45638

←→ Prior To Grant Program ←→

Baseline

Measure Code	Measure Description	Resident type	Q1 Measure Score	Q2 Measure Score	Q3 Measure Score	Q4 Measure Score	Four Quarter Average Score	Used in Quality	State of Ohio Average	National Average	Measure Period
								Measure Five Star Rating			
MDS Data Points:											
453	Percentage of high risk long-stay residents with pressure ulcers	Long Stay	8.3333	17.5000	17.5000	8.8235	13.7681	TRUE	6.8000	7.3000	2018Q4-2019Q3
410	Percentage of long-stay residents experiencing one or more falls with major injury	Long Stay	8.1081	4.1667	4.1667	4.5455	5.0847	TRUE	3.5000	3.4000	2018Q4-2019Q3
419	Percentage of long-stay residents who received an antipsychotic medication	Long Stay	38.7097	35.8974	29.7297	34.3750	34.5324	TRUE	14.2000	14.4000	2018Q4-2019Q3
451	Percentage of long-stay residents whose ability to move independently worsened	Long Stay	10.7122	11.0570	13.1681	11.2699	11.5464	TRUE	18.3000	17.5000	2018Q4-2019Q3
401	Percentage of long-stay residents whose need for help with daily activities has increased	Long Stay	15.3846	26.4706	14.2857	11.1111	16.7939	TRUE	15.2000	14.5000	2018Q4-2019Q3
406	Percentage of long-stay residents with a catheter inserted and left in their bladder	Long Stay	0.0000	3.1283	1.4975	0.0000	1.2715	TRUE	1.5000	1.9000	2018Q4-2019Q3
407	Percentage of long-stay residents with a urinary tract infection	Long Stay	2.9412	0.0000	2.1277	0.0000	1.1628	TRUE	2.1000	2.7000	2018Q4-2019Q3
471	Percentage of short-stay residents who made improvements in function	Short Stay						TRUE	66.8000	67.6000	2018Q4-2019Q3
434	Percentage of short-stay residents who newly received an antipsychotic medication	Short Stay	4.5455				1.6949	TRUE	2.0000	1.8000	2018Q4-2019Q3
476	Percentage of SNF residents with pressure ulcers that are new or worsened	Short Stay					8.1851	TRUE	1.4000	1.5000	2018Q4-2019Q3
Claims Data Points											
			<u>Observed Score</u>								
521	Percentage of short-stay residents who were rehospitalized after a nursing home admission	Short Stay	38.6364					TRUE	22.5000	22.3000	July 1, 2018 - June 30, 2019
522	Percentage of short-stay residents who had an outpatient emergency department visit	Short Stay	20.4545					TRUE	10.8000	10.7000	July 1, 2018 - June 30, 2019
551	Number of hospitalizations per 1000 long-stay resident days	Long Stay	5.0149					TRUE	1.5300	1.7200	July 1, 2018 - June 30, 2019
552	Number of outpatient emergency department visits per 1000 long-stay resident days	Long Stay	5.2283					TRUE	0.9000	0.9500	July 1, 2018 - June 30, 2019

NOTES:

MDS Data Point Measures:

Long Stay Measures:

- Measure 453- Lower Percentages are better
- Measure 410- Lower Percentages are better
- Measure 419- Lower Percentages are better
- Measure 451- Lower Percentages are better
- Measure 401 - Lower Percentages are better
- Measure 406- Lower Percentages are better
- Measure 407- Lower Percentages are better

Short- Stay Measures: Short Stay Residents are residents who stayed in a nursing home for 100 days or less

- Measure 471- Higher Percentages are better
- Measure 434- Lower Percentages are better
- Measure 476- Lower Percentages are better

Claims Data Points:

- Measure 521- Lower Percentages are better
- Measure 522- Lower Percentages are better
- Measure 551 - Lower Numbers are better
- Measure 552- Lower Numbers are better

Long- Term Care Consultants, LLC.
 Summary of Quality Indicators
 For the Quarter Ended March 31, 2020

STOW GLEN HEALTH CARE CENTER
 4285 KENT RD
 Stow, Ohio 44224

←→ Prior To Grant Program ←→

Measure Code	Measure Description	Resident type	Baseline				Q4 Measure Score	Four Quarter Average Score	Used in Quality Measure Five Star Rating	State of Ohio Average	National Average	Measure Period
			Q1 Measure Score	Q2 Measure Score	Q3 Measure Score	Q4 Measure Score						
MDS Data Points:												
453	Percentage of high risk long-stay residents with pressure ulcers	Long Stay	0.0000	9.0909	2.1739	2.1739	3.2787	TRUE	6.8000	7.3000	2018Q4-2019Q3	
410	Percentage of long-stay residents experiencing one or more falls with major injury	Long Stay	1.5152	3.2787	3.2787	3.1746	2.7888	TRUE	3.5000	3.4000	2018Q4-2019Q3	
419	Percentage of long-stay residents who received an antipsychotic medication	Long Stay	9.5238	12.2807	8.9286	8.9286	9.9138	TRUE	14.2000	14.4000	2018Q4-2019Q3	
451	Percentage of long-stay residents whose ability to move independently worsened	Long Stay	19.9458	17.1593	16.8098	12.9956	16.5816	TRUE	18.3000	17.5000	2018Q4-2019Q3	
401	Percentage of long-stay residents whose need for help with daily activities has increased	Long Stay	18.6047	19.0476	6.9767	11.1111	13.8728	TRUE	15.2000	14.5000	2018Q4-2019Q3	
406	Percentage of long-stay residents with a catheter inserted and left in their bladder	Long Stay	1.8758	0.0000	0.0000	1.5830	0.9032	TRUE	1.5000	1.9000	2018Q4-2019Q3	
407	Percentage of long-stay residents with a urinary tract infection	Long Stay	1.5152	3.3333	1.6667	1.5873	2.0080	TRUE	2.1000	2.7000	2018Q4-2019Q3	
471	Percentage of short-stay residents who made improvements in function	Short Stay				79.2154	80.6671	TRUE	66.8000	67.6000	2018Q4-2019Q3	
434	Percentage of short-stay residents who newly received an antipsychotic medication	Short Stay	4.5455	0.0000	0.0000	0.0000	1.1236	TRUE	2.0000	1.8000	2018Q4-2019Q3	
476	Percentage of SNF residents with pressure ulcers that are new or worsened	Short Stay					0.0000	TRUE	1.4000	1.5000	2018Q4-2019Q3	
Claims Data Points												
			<u>Observed Score</u>									
521	Percentage of short-stay residents who were rehospitalized after a nursing home admission	Short Stay				14.8148			22.5000	22.3000	July 1, 2018 - June 30, 2019	
522	Percentage of shortstay residents who had an outpatient emergency department visit	Short Stay				11.1111			10.8000	10.7000	July 1, 2018 - June 30, 2019	
551	Number of hospitalizations per 1000 long-stay resident days	Long Stay				1.9433			1.5300	1.7200	July 1, 2018 - June 30, 2019	
552	Number of outpatient emergency department visits per 1000 long-stay resident days	Long Stay				0.7773			0.9000	0.9500	July 1, 2018 - June 30, 2019	

NOTES:

MDS Data Point Measures:

Long Stay Measures:

- Measure 453- Lower Percentages are better
- Measure 410- Lower Percentages are better
- Measure 419- Lower Percentages are better
- Measure 451- Lower Percentages are better
- Measure 401 - Lower Percentages are better
- Measure 406- Lower Percentages are better
- Measure 407- Lower Percentages are better

Short- Stay Measures: Short Stay Residents are residents who stayed in a nursing home for 100 days or less

- Measure 471- Higher Percentages are better
- Measure 434- Lower Percentages are better
- Measure 476- Lower Percentages are better

Claims Data Points:

- Measure 521- Lower Percentages are better
- Measure 522- Lower Percentages are better
- Measure 551 - Lower Numbers are better
- Measure 552- Lower Numbers are better

Long- Term Care Consultants, LLC.
 Summary of Quality Indicators
 For the Quarter Ended March 31, 2020

← Prior To Grant Program →

WESTPARK NEUROLOGY AND REHABILITATION CENTER
 4401 W 150TH STREET
 Cleveland, Ohio 44135

Measure Code	Measure Description	Resident type	Baseline					Used in Quality Measure Five Star Rating	State of Ohio Average	National Average	Measure Period
			Q1 Measure Score	Q2 Measure Score	Q3 Measure Score	Q4 Measure Score	Four Quarter Average Score				
MDS Data Points:											
453	Percentage of high risk long-stay residents with pressure ulcers	Long Stay	16.0714	16.9811	19.6429	18.3674	17.7570	TRUE	6.8000	7.3000	2018Q4-2019Q3
410	Percentage of long-stay residents experiencing one or more falls with major injury	Long Stay	0.8621	1.8868	1.8868	2.0619	1.6471	TRUE	3.5000	3.4000	2018Q4-2019Q3
419	Percentage of long-stay residents who received an antipsychotic medication	Long Stay	37.3134	36.6667	35.0000	29.4118	34.8739	TRUE	14.2000	14.4000	2018Q4-2019Q3
451	Percentage of long-stay residents whose ability to move independently worsened	Long Stay	26.4592	15.4425	10.1012	25.8618	19.4778	TRUE	18.3000	17.5000	2018Q4-2019Q3
401	Percentage of longstay residents whose need for help with daily activities has increased	Long Stay	10.1010	9.1954	11.2360	17.9487	11.8980	TRUE	15.2000	14.5000	2018Q4-2019Q3
406	Percentage of long-stay residents with a catheter inserted and left in their bladder	Long Stay	1.7978	2.4201	2.8074	1.9749	2.2459	TRUE	1.5000	1.9000	2018Q4-2019Q3
407	Percentage of long-stay residents with a urinary tract infection	Long Stay	6.0345	2.8571	5.6604	6.2500	5.2009	TRUE	2.1000	2.7000	2018Q4-2019Q3
471	Percentage of short-stay residents who made improvements in function	Short Stay				73.7348	80.5224	TRUE	66.8000	67.6000	2018Q4-2019Q3
434	Percentage of short-stay residents who newly received an antipsychotic medication	Short Stay		14.2857	11.5385	3.2258	7.2165	TRUE	2.0000	1.8000	2018Q4-2019Q3
476	Percentage of SNF residents with pressure ulcers that are new or worsened	Short Stay					0.0000	TRUE	1.4000	1.5000	2018Q4-2019Q3
Claims Data Points											
			<u>Observed Score</u>								
521	Percentage of short-stay residents who were rehospitalized after a nursing home admission	Short Stay		21.2766				TRUE	22.5000	22.3000	July 1, 2018 - June 30, 2019
522	Percentage of short-stay residents who had an outpatient emergency department visit	Short Stay		6.3830				TRUE	10.8000	10.7000	July 1, 2018 - June 30, 2019
551	Number of hospitalizations per 1000 long-stay resident days	Long Stay		3.0218				TRUE	1.5300	1.7200	July 1, 2018 - June 30, 2019
552	Number of outpatient emergency department visits per 1000 long-stay resident days	Long Stay		1.6116				TRUE	0.9000	0.9500	July 1, 2018 - June 30, 2019

NOTES:

Long Stay Measures:

Long Stay Measures:

- Measure 453- Lower Percentages are better
- Measure 410- Lower Percentages are better
- Measure 419- Lower Percentages are better
- Measure 451- Lower Percentages are better
- Measure 401 - Lower Percentages are better
- Measure 406- Lower Percentages are better
- Measure 407- Lower Percentages are better

Short- Stay Measures: Short Stay Residents are residents who stayed in a nursing home for 100 days or less

- Measure 471- Higher Percentages are better
- Measure 434- Lower Percentages are better
- Measure 476- Lower Percentages are better

Claims Data Points:

- Measure 521- Lower Percentages are better
- Measure 522- Lower Percentages are better
- Measure 551 - Lower Numbers are better
- Measure 552- Lower Numbers are better

Long- Term Care Consultants, LLC.
 Summary of Survey Deficiencies
 For the Quarter Ended March 31, 2020

	← Prior To Grant Program →		← Baseline →	Most Recent
	Survey Date 07/21/2016	Survey Date 10/12/2017	Survey Date 12/19/2018	Survey Date 02/20/2020
Canton Christian Home 2550 CLEVELAND AVENUE NW CANTON, Ohio 44709				

Health Deficiencies

Count of Freedom from Abuse and Neglect and Exploitation Deficiencies	2	0	3	0
Count of Quality of Life and Care Deficiencies	0	1	2	0
Count of Resident Assessment and Care Planning Deficiencies	0	0	1	0
Count of Nursing and Physician Services Deficiencies	0	0	0	0
Count of Resident Rights Deficiencies	1	1	2	0
Count of Nutrition and Dietary Deficiencies	1	1	1	0
Count of Pharmacy Service Deficiencies	1	0	1	1
Count of Environmental Deficiencies	0	1	0	0
Count of Administration Deficiencies	0	0	2	0
Total Number of Health Deficiencies	5	4	12	1

Scope and Severity:

Level of Deficiencies:

B				
C				
D			6	1
E			2	
F			1	
G				
H				
I				
J				
K			3	
L				
			12	1

Long- Term Care Consultants, LLC.
 Summary of Survey Deficiencies
 For the Quarter Ended March 31, 2020

	Prior To Grant Program		
		Baseline	Most Recent
	Survey Date 05/09/2018	Survey Date 06/24/2019	Survey Date 11/21/2019
CRYSTAL CARE OF COAL GROVE 813 1/2 MARION PIKE Coal Grove, Ohio 45638			

Health Deficiencies

Count of Freedom from Abuse and Neglect and Exploitation Deficiencies	0	4	0
Count of Quality of Life and Care Deficiencies	8	12	5
Count of Resident Assessment and Care Planning Deficiencies	5	6	3
Count of Nursing and Physician Services Deficiencies	2	1	0
Count of Resident Rights Deficiencies	4	6	1
Count of Nutrition and Dietary Deficiencies	4	6	3
Count of Pharmacy Service Deficiencies	2	7	3
Count of Environmental Deficiencies	4	7	0
Count of Administration Deficiencies	0	3	0
Total Number of Health Deficiencies	29	52	15

Scope and Severity:

Level of Deficiencies:

B			
C			
D			12
E			
F		52	3
G			
H			
I			
J			
K			
L			
		52	15

Long- Term Care Consultants, LLC.
 Summary of Survey Deficiencies
 For the Quarter Ended March 31, 2020

STOW GLEN HEALTH CARE CENTER 4285 KENT RD Stow, Ohio 44224	Prior To Grant Program		Baseline
	Survey Date 10/20/2016	Survey Date 01/18/2018	Survey Date 02/22/2019

Health Deficiencies

Count of Freedom from Abuse and Neglect and Exploitation Deficiencies	2	3	0
Count of Quality of Life and Care Deficiencies	2	6	0
Count of Resident Assessment and Care Planning Deficiencies	0	3	0
Count of Nursing and Physician Services Deficiencies	1	1	0
Count of Resident Rights Deficiencies	0	3	1
Count of Nutrition and Dietary Deficiencies	1	3	1
Count of Pharmacy Service Deficiencies	1	2	1
Count of Environmental Deficiencies	2	2	0
Count of Administration Deficiencies	0	2	0
Total Number of Health Deficiencies	9	25	3

Scope and Severity:

Level of Deficiencies:

B
C
D
E
F
G
H
I
J
K
L

3

3

Long- Term Care Consultants, LLC.
 Summary of Survey Deficiencies
 For the Quarter Ended March 31, 2020

WESTPARK NEUROLOGY AND REHABILITATION CENTER 4401 W 150TH STREET Cleveland, Ohio 44135	Prior To Grant		
		Baseline	
	Survey Date 08/24/2017	Survey Date 10/03/2018	Survey Date 11/07/2019
Health Deficiencies			
Count of Freedom from Abuse and Neglect and Exploitation Deficiencies	0	1	0
Count of Quality of Life and Care Deficiencies	1	2	0
Count of Resident Assessment and Care Planning Deficiencies	0	2	1
Count of Nursing and Physician Services Deficiencies	0	0	0
Count of Resident Rights Deficiencies	0	2	1
Count of Nutrition and Dietary Deficiencies	0	1	0
Count of Pharmacy Service Deficiencies	0	1	0
Count of Environmental Deficiencies	1	2	1
Count of Administration Deficiencies	0	0	0
Total Number of Health Deficiencies	2	11	3

Scope and Severity:

Level of Deficiencies:

B		
C		
D	7	2
E	2	1
F	2	
G		
H		
I		
J		
K		
L		
	11	3