Agency for Health Care Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	AL11967749	A. BUILDING: _____ B. WING _____	12/14/2020

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
ANGEL CARE ASSISTED LIVING FACILITY	4301 31ST ST SOUTH SAINT PETERSBURG, FL 33712

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A 000	Initial Comments A complaint investigation (Complaint Numbers 2020007920, 2020009393 and 2020009719) was conducted at Angel Care Assisted Living Facility on [redacted]. Deficiencies were identified at the time of survey.	A 000		
A 030 SS=G	59A-36.007(6) FAC; 429.28( ) FS 429.27 Resident Care - Rights & Facility Procedures 59A-36.007 (6) RESIDENT RIGHTS AND FACILITY PROCEDURES. (a) A copy of the Resident Bill of Rights as described in section 429.28, F.S., or a summary provided by the Long-Term Care Ombudsman Program must be posted in full view in a freely accessible resident area, and included in the admission package provided pursuant to rule 59A-36.006, F.A.C. (b) In accordance with section 429.28, F.S., the facility must have a written grievance procedure for receiving and responding to resident complaints and a written procedure to allow residents to recommend changes to facility policies and procedures. The facility must be able to demonstrate that such procedure is implemented upon receipt of a complaint. (c) The telephone number for lodging complaints against a facility or facility staff must be posted in full view in a common area accessible to all residents. The telephone numbers are: the Long-Term Care Ombudsman Program, 1(888)831-0404; , Rights Florida, 1(800)342-0823; the Agency Consumer Hotline 1(888)419-3456, and the statewide toll-free telephone number of the Florida Hotline, 1(800)96- or 1(800)962-2873. The telephone numbers must be posted in close proximity to a telephone accessible by residents	A 030		

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A 030	Continued From page 1	A 030		

and the text must be a minimum of 14-point font.
(d) The facility must have a written statement of its house rules and procedures that must be included in the admission package provided pursuant to rule 59A-36.006, F.A.C. The rules and procedures must at a minimum address the facility's policies regarding:
1. Resident responsibilities;
2. [illegible] and tobacco use;
3. Medication storage;
4. Resident elopement;
5. Reporting resident , neglect, and [illegible];
6. Administrative and housekeeping schedules and requirements;
7. control, sanitation, and universal precautions; and,
8. The requirements for coordinating the delivery of services to residents by third party providers.
(e) Residents may not be required to perform any work in the facility without compensation. Residents may be required to clean their own sleeping areas or apartments if the facility rules or the facility contract includes such a requirement. If a resident is employed by the facility, the resident must be compensated in compliance with state and federal wage laws.
(f) The facility must provide residents with convenient access to a telephone to facilitate the resident's right to unrestricted and private communication, pursuant to section 429.28(1)(d), F.S. The facility must allow unidentified telephone calls to residents. For facilities with a licensed capacity of 17 or more residents in which residents do not have private telephones, there must be, at a minimum, a readily accessible telephone on each floor of each building where residents reside.
(g) In addition to the requirements of section

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A 030	Continued From page 2 429.41(1)(k), F.S., the use of physical . . . . . by a facility on a resident must be reviewed by the resident's physician annually. Any device, including half-bed rails, which the resident chooses to use and can remove or avoid without assistance, is not considered a physical . 429.28 Resident bill of rights.- (1) No resident of a facility shall be deprived of any civil or legal rights, benefits, or privileges guaranteed by law, the Constitution of the State of Florida, or the Constitution of the United States as a resident of a facility. Every resident of a facility shall have the right to: (a) Live in a safe and decent living environment, free from and neglect. (b) Be treated with consideration and respect and with due recognition of personal dignity, individuality, and the need for privacy. (c) Retain and use his or her own clothes and other personal property in his or her immediate living quarters, so as to maintain individuality and personal dignity, except when the facility can demonstrate that such would be unsafe, impractical, or an infringement upon the rights of other residents. (d) Unrestricted private communication, including receiving and sending unopened correspondence, access to a telephone, and visiting with any person of his or her choice, at any time between the hours of 9 a.m. and 9 p.m. at a minimum. Upon request, the facility shall make provisions to extend visiting hours for caregivers and out-of-town guests, and in other similar situations. (e) Freedom to participate in and benefit from community services and activities and to pursue the highest possible level of independence, autonomy, and interaction within the community.	A 030		

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A 030	Continued From page 3 (f) Manage his or her financial affairs unless the resident or, if applicable, the resident's representative, designee, surrogate, guardian, or attorney in fact authorizes the administrator of the facility to provide safekeeping for funds as provided in s. 429.27. (g) Share a room with his or her spouse if both are residents of the facility. (h) Reasonable opportunity for regular exercise several times a week and to be outdoors at regular and frequent intervals except when prevented by inclement weather. (i) Exercise civil and religious liberties, including the right to independent personal decisions. No religious beliefs or practices, nor any attendance at religious services, shall be imposed upon any resident. (j) Assistance with obtaining access to adequate and appropriate health care. For purposes of this paragraph, the term "adequate and appropriate health care" means the management of medications, assistance in making , , for health care services, the provision of or arrangement of transportation to health care . . . . . , and the performance of health care services in accordance with s. 429.255 which are consistent with established and recognized standards within the community. (k) At least 45 days' notice of relocation or termination of residency from the facility unless, for medical reasons, the resident is certified by a physician to require an emergency relocation to a facility providing a more skilled level of care or the resident engages in a pattern of conduct that is harmful or offensive to other residents. In the case of a resident who has been adjudicated mentally . . . . . . , the guardian shall be given at least 45 days' notice of a nonemergency relocation or residency termination. Reasons for	A 030		

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A 030	Continued From page 4 relocation must be set forth in writing and provided to the resident or the resident's legal representative. The notice must state that the resident may contact the State Long-Term Care Ombudsman Program for assistance with relocation and must include the statewide toll-free telephone number of the program. In order for a facility to terminate the residency of an individual without notice as provided herein, the facility shall show good cause in a court of competent jurisdiction. (l) Present grievances and recommend changes in policies, procedures, and services to the staff of the facility, governing officials, or any other person without , interference, coercion, discrimination, or reprisal. Each facility shall establish a grievance procedure to facilitate the residents' exercise of this right. This right includes access to ombudsman volunteers and advocates and the right to be a member of, to be active in, and to associate with advocacy or special interest groups. (2) The administrator of a facility shall ensure that a written notice of the rights, , and prohibitions set forth in this part is posted in a prominent place in each facility and read or explained to residents who cannot read. The notice must include the statewide toll-free telephone number and e-mail address of the State Long-Term Care Ombudsman Program and the telephone number of the local ombudsman council, the Elder Hotline operated by the Department of Children and Families, and, if applicable, Rights Florida, where complaints may be lodged. The notice must state that a complaint made to the Office of State Long-Term Care Ombudsman or a local long-term care ombudsman council, the names and identities of the residents involved in the	A 030		

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A 030	Continued From page 5 complaint, and the identity of complainants are kept confidential pursuant to s. 400.0077 and that retaliatory action cannot be taken against a resident for presenting grievances or for exercising any other resident right. The facility must ensure a resident's access to a telephone to call the State Long-Term Care Ombudsman Program or local ombudsman council, the Elder . . . . Hotline operated by the Department of Children and Families, and , Rights Florida. 429.27 Property and personal affairs of residents.- (1)(a) A resident shall be given the option of using his or her own belongings, as space permits; choosing his or her roommate; and, whenever possible, unless the resident is adjudicated . . . , . . . or . . . , ... under state law, managing his or her own affairs. (b) The admission of a resident to a facility and his or her presence therein shall not confer on the facility or its owner, administrator, employees, or representatives any authority to manage, use, or dispose of any property of the resident; nor shall such admission or presence confer on any of such persons any authority or responsibility for the personal affairs of the resident, except that which may be necessary for the safe management of the facility or for the safety of the resident. This Statute or Rule is not met as evidenced by: Based on record review and interview, the facility failed to provide a decent and safe environment that ensured adequate supervision, access to timely health care and knowledge of the general whereabouts for three (Resident #1, #2 and #3) of three sampled.	A 030		

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A 030	Continued From page 6 Findings included: During an interview with Staff C, conducted on at 10:4am, she stated that if she found a resident on the floor, she would pick them up and then call for help. Interview with Staff A, conducted on 1:41pm she stated the following: Resident #1 was lying on the grass outside by the patio, I asked her if she could move, she stated yes. Another caregiver and I put our arms under her armpits and on 1,2 3, we stood her up. She walked over to the patio with the other caregiver. She pulled away from the caregiver and on the cement patio. I asked her if she was hurting anywhere and she said her , hurt her. I sat her up and with the other caregiver, we got her up and into the wheelchair. We took her to her room and put her in her bed. We left the room and when we came , she was on the floor beside her bed. I went and got the supervisor/med tech and we both looked at her, picked her up and put her in the wheelchair. Record review conducted on of the assisted living facility adverse incident form filed on , . the corrective action summary (corrective or Proactive actions Taken) stated: Both Caregivers; Staff A and Staff B were re-educated on precautions and prevention. Both Caregivers must re-take ADL and Resident Behavior training course and Prevention training course and present a certificate of completion. Record review on revealed Staff A (Date	A 030		

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A 030	Continued From page 7 of Hire . . . . .) and Staff B (End Date), did not receive re-education on precautions and prevention or activities of daily living (ADL) and resident behavior training course and . . Prevention training. During an interview with the Administrator on at 12:13pm, she stated she did not have documentation for Staff A and Staff B's retraining stated in the corrective action summary. In an interview with the Administrator conducted on . . at 12:35pm, she stated that the facility does not have a protocol or a policy on assisting a resident that has . . . . In an interview conducted on at 3:03pm, she stated that the facility used the . . management policy to go by when a resident has a . She stated that the staff were not trained on this policy. Review of the facility's management policy, not dated, conducted on . . . . states: 1. Do not move the resident and ensure them that help is on their way. 2. Ensure the resident is comfortable as much as possible. 3. Ask if they feel , . , and where the , . is located. A review of the Adverse Incident Report for Resident #2 was conducted on . The incident, an elopement, occurred on . . . . Resident #2 was last seen at the facility by staff at 8:45 am on . . . . . Resident #2 had not returned to the facility by the end of day shift. This information was passed on to the next shift. He did not return during the evening or the night	A 030		

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A 030	Continued From page 8 shift. On at 9:00 am, law enforcement was contacted, and a missing person was reported. The resident left with his walker and no other personal belongings. On , Resident #2 was found by law enforcement and returned to the facility. Review of the facility's Resident Elopement Response Policy, not dated, conducted on revealed that 2 hours after a resident has not been accounted for, a resident shall be considered as having possibly eloped and the following procedure will be initiated: If the resident has not been found within 30 minutes, the Manager on duty will call 911, local law enforcement, and notify the resident's family. An interview with the Administrator was conducted on at 11:54 am about Resident #2's elopement and the police not being notified 2 hours after a resident has not been accounted for at the facility. She stated that the she was not notified by the staff that Resident #2 had not come . She states that the police should have been called by the end of the day that the resident did not return. The facility's elopement policy was not followed. The police were called the next day, 24 hours after the elopement. In an interview with Staff D, conducted on at 11:07 am, she stated that the facility had an elopement sometime in , or . The resident left the facility and staff noticed he was gone and started to search for him. He was only gone 30 to 60 minutes. When we were calling the police, the police walked in with Resident #3. An attempted review of the adverse incident	A 030		

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A 030	Continued From page 9 report was conducted on for Resident #3's elopement. No documentation was provided. Record review of the facility's Resident Elopement Response Policy conducted on it states that the administrator will complete the initial adverse incident report using Agency for Health Care Administration web site, within 1 business day after the occurrence. During an interview with the Administrator conducted on at 11:54am when asked if an elopement had occurred at the facility after she stated no to the question. When given the name of Resident #3 she remembered the incident. She stated that an adverse incident had not been done on this elopement and she was not sure why. Class II	A 030		