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
	AL11965374	A. BUILDING: _____ B. WING _____	11/09/2021

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
THE OPALS AT NAPLES	1155 ENCORE WAY NAPLES, FL 34110

(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
A 000	Initial Comments An unannounced complaint survey for complaint #2021009414, #20210012409, #2021014763 and #2021014869 was conducted from through at The Opals at Naples, an assisted living facility in Naples, Florida. Complaint #2021014763 was substantiated. Complaints #2021009414, #20210012409, and #2021014869 were unsubstantiated. The following is a description of the deficiency. .	A 000		
A 032	59A-36.007(7) FAC Resident Care - Elopement Standards 59A-36.007 (7) ELOPEMENT STANDARDS. (a) Residents Assessed at Risk for Elopement. All residents assessed at risk for elopement or with any history of elopement must be identified so staff can be alerted to their needs for support and supervision. All residents must be assessed for risk of elopement by a health care provider or a mental health care provider within 30 calendar days of being admitted to a facility. If the resident has had a health assessment performed prior to admission pursuant to paragraph 59A-36.006(2)(a), F.A.C., this requirement is satisfied. A resident placed in a facility on a temporary emergency basis by the Department of Children and Families pursuant to Section 415.105 or 415.1051, F.S., is exempt from this requirement for up to 30 days. 1. As part of its resident elopement response policies and procedures, the facility must make, at a minimum, a daily effort to determine that at risk residents have identification on their persons that includes their name and the facility's name,	A 032		

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A 032	Continued From page 1 address, and telephone number. Staff trained pursuant to paragraph 59A-36.011(10)(a) or (c), F.A.C., must be generally aware of the location of all residents assessed at high risk for elopement at all times. 2. The facility must have a photo identification of at risk residents on file that is accessible to all facility staff and law enforcement as necessary. The facility's file must contain the resident's photo identification upon admission or upon being assessed at risk for elopement subsequent to admission. The photo identification may be provided by the facility, the resident, or the resident's representative. (b) Facility Resident Elopement Response Policies and Procedures. The facility must develop detailed written policies and procedures for responding to a resident elopement. At a minimum, the policies and procedures must provide for: 1. An immediate search of the facility and premises, 2. The identification of staff responsible for implementing each part of the elopement response policies and procedures, including specific duties and responsibilities, 3. The identification of staff responsible for contacting law enforcement, the resident's family, guardian, health care surrogate, and case manager if the resident is not located pursuant to subparagraph (8)(b)1.; and, 4. The continued care of all residents within the facility in the event of an elopement. (c) Facility Resident Elopement Drills. The facility must conduct and document resident elopement drills pursuant to Section 429.41(1)(k), F.S. This Statute or Rule is not met as evidenced by: Based on observation, records review, and	A 032		

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A 032	Continued From page 2 interviews, the facility failed to properly supervise residents, and maintain identification on their person when they were identified as an elopement risk for 3 (Residents #5, #6 and #7) of 3 residents who eloped from the facility. The findings included: 1. A review of the facility's adverse incident reports showed Residents #5 and #6 eloped from the facility on . . . and Resident #7 eloped from the facility on . . . Each of these resident where found by neighbors on different streets away from the facility. Record review of Resident #5's health assessment dated . . . showed he was identified as an elopement risk. Record review of Resident #6's health assessment dated identified her as an elopement risk. Record review of Resident #7's health assessment dated . . . identified her as an elopement risk. Observation on at 9:30 a.m., showed Resident #7 in her bedroom in Cottage 2. She was not wearing any type of identification on her person. An interview was conducted with Resident #7 at that time. She said she has never worn any type of identification since she has been at this facility. Interview on at 9:30 a.m., medication tech Staff A said the residents do not wear any type of identification on them, including Resident #7. She only has pictures of them. Observation on at 9:40 a.m., showed Residents #5 and #6 sitting in the dining room	A 032		

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A 032	Continued From page 3 together in Cottage 1. They were not wearing any type of identification on their person. Interviews were conducted with both of these two residents at this time. They both said they do not wear any identification on themselves. Interview on at 9:40 a.m., direct care Staff B said they only have pictures of the residents and they don't wear any type of identification on them, including Residents #5 and #6. Interview on at 9:50 a.m., the administrator said all the residents who are identified as elopement risk wears an ID bracelet with their name and phone number of the community. These three residents (#5, #6 and #7) are very high functioning and were able to tear them off. They have not tried other alternatives for identifications. 2. A review of the facility's "Elopement and Missing Resident Plan" and "The Opal at North Naples Elopement Procedure" did not include in these two documents, resident who are identified as elopement risk will have identification on their person with their name, address, phone number and facility where they live. Class III	A 032		