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
	AL11965480	A. BUILDING: _____ B. WING _____	12/21/2021

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
SPRING HILLS HUNTER'S CREEK	3800 TOWN CENTER BLVD. ORLANDO, FL 32837

(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 Investigation #2021016737 was conducted from [redacted] to 21, 2021. Spring Hills at Hunters Creek Assisted Living Facility had deficiencies at the time of the visit.	A 000		
A 025 SS=D	429.26(7) FS; 59A-36.007(1) FAC Resident Care - Supervision 429.26 (7) The facility shall notify a licensed physician when a resident exhibits signs of [redacted] or [redacted] or has a change of condition in order to rule out the presence of an underlying physiological condition that may be contributing to such [redacted] or [redacted]. The notification must occur within 30 days after the acknowledgment of such signs by facility staff. If an underlying condition is determined to exist, the facility must notify the resident's representative or designee of the need for health care services and must assist in making [redacted] for the necessary care and services to treat the condition. If the resident does not have a representative or designee or if the resident's representative or designee cannot be located or is unresponsive, the facility shall arrange with the appropriate health care provider for the necessary care and services to treat the condition. 59A-36.007 Resident Care Standards. An assisted living facility must provide care and services appropriate to the needs of residents accepted for admission to the facility. (1) SUPERVISION. Facilities must offer personal supervision as appropriate for each resident, including the following: (a) Monitoring of the quantity and quality of	A 025		

AHCA Form 3020-0001

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE | (X6) DATE

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A 025	Continued From page 1 resident diets in accordance with Rule 59A-36.012, F.A.C. (b) Daily observation by designated staff of the activities of the resident while on the premises, and awareness of the general health, safety, and physical and emotional well-being of the resident. (c) Maintaining a general awareness of the resident's whereabouts. The resident may travel independently in the community. (d) Contacting the resident's health care provider and other appropriate party such as the resident's family, guardian, health care surrogate, or case manager if the resident exhibits a significant change. (e) Contacting the resident's family, guardian, health care surrogate, or case manager if the resident is discharged or moves out. (f) Maintaining a written record, updated as needed, of any significant changes, any illnesses that resulted in medical attention, changes in the method of medication administration, or other changes that resulted in the provision of additional services. This Statute or Rule is not met as evidenced by: Based on record review and interviews, the facility failed to provide notification and follow up to family and primary care physician (PCP) for 1 of 4 residents (#1) who was refusing to take medication and have vital signs taken. Findings: Resident #1's progress notes documented the following: . . . . . - the resident threatened to kill a staff member; no notification to family and primary care physician (PCP) and follow up was documented.	A 025		

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A 025	Continued From page 2 . . . . . - resident refused medication; no notification to family and PCP and follow up was documented. - resident refused vital sign checks and medication; no notification to family and PCP and follow up was documented. . . . . . - resident refused medication and vital sign checks; no notification to family and PCP and follow up was documented. - resident refused medication and vital sign checks; no notification to family and PCP and follow up was documented. . . . . . - resident refused medication and vital sign checks; no notification to family and PCP and follow up was documented. - resident refused medication and vital sign checks- no notification to family and PCP and follow up was documented. On at 1:30 PM, the Assistant Administrator stated the progress notes for resident #1 did not include notification to the family and primary care physician regarding the resident refusing to take medication and having vital signs monitored. The Assistant Administrator stated the progress notes for resident #1 did not include follow up action to help support resident #1. Class III	A 025		
A 030 SS=G	59A-36.007(5) FAC; 429.28( ) FS 429.27 Resident Care - Rights & Facility Procedures 59A-36.007 (5) 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	A 030		

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A 030	Continued From page 3 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; [redacted], Rights Florida, 1(800)342-0823; the Agency Consumer Hotline 1(888)419-3456, and the statewide toll-free telephone number of the Florida [redacted] Hotline, 1(800)96-[redacted] or 1(800)962-2873. The telephone numbers must be posted in close proximity to a telephone accessible by residents 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. [redacted] and tobacco use; 3. Medication storage; 4. Resident elopement; 5. Reporting resident [redacted], neglect, and [redacted]; 6. Administrative and housekeeping schedules	A 030		

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A 030	Continued From page 4 and requirements; 7. control, sanitation, and standard precautions; 8. The requirements for coordinating the delivery of services to residents by third party providers; 9. Assistive devices; and 10. Physical . . . . (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. 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.	A 030		

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A 030	Continued From page 5 (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. (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	A 030		

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A 030	Continued From page 6	A 030		

paragraph, the term "adequate and appropriate health care" means the management of medications, assistance in making [illegible] for health care services, the provision of or arrangement of transportation to health care [illegible], 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 [illegible], the guardian shall be given at least 45 days' notice of a nonemergency relocation or residency termination. Reasons for 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 [illegible], 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

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A 030	Continued From page 7 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 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,	A 030		

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A 030	Continued From page 8 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 interviews and record reviews, the facility threatened the immediate safety of the resident community (81 residents) by failing to take the necessary steps to prevent resident to resident . . . . . Findings: Review of a report sent to the Agency for Health Care Administration by the facility reflected that on . . . . . , resident #1 and resident #2 became involved in a physical altercation in the dining room. The physical altercation resulted in local law enforcement being called to investigate and resident #2 being transported to a local medical facility for . Review of the local law enforcement reports on . . . . . , filed by law enforcement on , reflected that law enforcement was called to the facility at 7:33 AM on . . . . . to investigate an incident of resident-to-resident . . . . It documented a physical altercation between resident #1 and resident #2. It	A 030		

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A 030	Continued From page 9	A 030		

documented that resident #2 did not want to press charges. It documented that resident #2 was transported to a local emergency department for treatment.

On at 10:20 AM, the facility licensed practical nurse (LPN) stated resident #1 had become verbally aggressive with a female resident and resident #2 attempted to defend the female resident. The LPN stated that resident #2 while trying to hit resident #1, striking his . Resident #2 was transported to the local emergency department for care.

On at 11:30 AM, the Assistant Administrator stated that resident #1 had a habit of being verbally aggressive with female residents. It was stated the facility gave resident #1 a 45-day notice of discharge because of the incident. The Assistant Administrator did not share concerns related to any other incidents involving resident #1.

On at 1:45 PM, staff G, a caregiver, on at about 7:15 AM stated she was assisting a resident to enter the dining room. Staff G stated she saw resident #1 and resident #2 fighting but she could not let go of the resident she was assisting to stop the fight. She stated the dining room manager was nearby but had a tray of food she was serving to resident's; she could not set the tray down in time to stop the fight.

On at 2:05 PM, in an interview with staff H, a caregiver stated she was at the other end of the dining room but saw resident #1 and resident #2 fighting. She said resident #2 when he tried to punch resident #1. She said the dining room manager was serving meals and could not break up the fight.

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A 030	Continued From page 10 On at 9:55 AM, the Assistant Administrator stated that a second incident occurred on7/2/2021 between resident #1 and resident #2 in the dining room but it was verbal. It was stated the "safety plan", put into place, included staff keeping the residents apart and changing the dining schedule for both residents. Resident #1's file documented a resident-to-staff incident in which resident #1 threatened to kill a staff member. The facility completed an updated "Health Care Plan" on which showed resident #1 was agitated, , , aggressive, and had , judgement. The "Health Care Plan" did not have documentation on input from resident #1's family or primary care physician. On at 1:05 PM, resident #2 stated that the incident was the third incident of between him and resident #1. Resident #2 stated that on , resident #1 was trying to push down a female resident down and he was trying to stop him. Resident #2 stated he had two other incidents, but they were verbal, yelling at each other. Resident #2 stated he was not aware of a safety plan or any changes in his dining schedule. On at 1:30 PM, the Assistant Administrator stated the facility did have three documented incidents of resident-to-resident between resident #1 and resident #2. She stated the facility did not have an explanation for the safety plan not being put into place. The Assistant Administrator stated the new "Health Care Plan" did not have input from either the family or the primary care physician.	A 030		

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A 030	Continued From page 11 Class II	A 030		