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
	AL11968951	A. BUILDING: _____ B. WING _____	07/14/2022

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
ARTIS SENIOR LIVING OF BOCA RATON LLC	5910 N FEDERAL HWY BOCA RATON, FL 33487

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A 000	Initial Comments An unannounced Limited Nursing Service (LNS) Monitoring survey was conducted on . . . . . at Artis Senior Living of Boca Raton LLC. The facility had a deficiency identified at the time of the survey.	A 000		
AN278	59A-36.022(3) FAC; 429.07(3)(c)2, FS LNS - Records 59A-36.022 (3) RECORDS. (a) A record of all residents receiving limited nursing services and the type of services provided must be maintained at the facility. (b) Nursing progress notes must be maintained for each resident who receives limited nursing services from facility staff. (c) A nursing assessment conducted at least monthly must be maintained on each resident who receives a limited nursing service. 429.07 (3)(c)2, FS A facility that is licensed to provide limited nursing services shall maintain a written progress report on each person who receives such nursing services from the facility's staff. The report must describe the type, amount, duration, scope, and outcome of services that are rendered and the general status of the resident's health... This Statute or Rule is not met as evidenced by: Based on observation, record review, interview and review of policy and procedures, it was determined that the facility failed to properly and consistently document physician ordered care treatments being performed, as prescribed for 1 of 2 residents observed for Limited Nursing Services (LNS), Resident #1.	AN278		

AHCA Form 3020-0001
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE | (X6) DATE

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AN278	Continued From page 1 The findings included: Review of the facility policy and procedure for Documentation Report provided by the Director of Health & Wellness (DHW) updated documented, Policy: The (DHW)/ ...is to monitor all open . . . . for signs and symptoms of healing or . . and to monitor for effectiveness of treatment. All . . . . . will be monitored until healed and (DHW)/ ...will utilize necessary outside resources to aid in the care of ....Procedure: 1. The Coordinator of Health & Wellness (CHW) to be made aware of any open areas and immediate basic first aid to be applied until assessed by the Registered Nurse (or Home Health Nurse/Hospice Nurse where applicable). 2. (DHW)/ .../ ... to assess for appearance and proper treatment ...3. Proper documentation of the shall include: Specific location of the . . . . , number, size and measurement of the area ...Stage of the (when applicable/where permissible by state) ...Interventions in place to enhance healing of the . . . . or prevention of further . . . . (turning and repositioning schedule ...Any changes in resident's condition or response to treatment, progress, deterioration or the development of new . . . . . 4. (DHW)/ ...will assess . . . . (s) on a weekly basis and document observations. Where (DHW)/ ...is Licensed Practical Nurse (LPN), (DHW) will assess weekly with home health nurse ....6. Documentation will be completed ....in the resident's nurses' notes. Review of the "un-dated" facility policy and procedure for Physician's Orders provided by the (DHW) documented, Policy: Physician orders are obtained for all residents to include ....treatments ....Procedures: 1. Physician orders are	AN278		

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AN278	Continued From page 2 maintained in the Individual Resident Record. 2. Each resident will have a move-in order sheet completed, signed by the physician, noted by a licenses nurse ....5. All orders are transcribed and noted by the license nurse. Review of the "un-dated" facility licensed nurse job description/Coordinator of Health & Wellness provided by the (DHW) documented Position Summary: to provide adequate and sufficient services to meet the needs of the assisted living resident and to assure that preventative measures, restorative service, and related support services are carried out, recorded and reviewed. Responsibilities/Accountabilities: 1. Takes an active role in direct resident assessment, development of service plan, and care ...3. Administers ...,treatment to residents in accordance with physician orders ... Resident #1 was admitted to the facility on and subsequently admitted to receive LNS on with diagnoses to include History of and A change observation was conducted for 2 of the 3 facility acquired for Resident #1, performed by the resident's physician's Advanced Registered Nurse Practitioner (ARNP) on Thursday at 11:16 AM. The ARNP as well as the resident provided permission for this surveyor to observe the care. According to Resident #1's physician's ARNP, the resident is on a "special-type" of air mattress which is not motorized. However, she stated that this type of bed is designed to provide "relief in pressure of the resident's bony prominences." The ARNP added that Resident #1 is not bed bound; she is	AN278		

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AN278	Continued From page 3 up and about in her wheelchair. And, Resident #1 had 3 ---1 of which is now healed as follows: 1) Resident #1 has a ... of the right , . According to the ARNP, this was initially un-stageable and it was surgically debrided and discovered/determined to be a ..., ... , , (DTI); (measurements on: 3.2 cm x 3.3 cm x 3.6 and measurements on: ..... 4.1 cm x 3 cm x 2.1 cm---improving per the A.R.N.P.) is 50% and 50% is epithelization with 25 % yellow ... . There is no ... eschar, this was initially debrided, is .... for drainage, a small to moderate amount and no odor. There is no ... and no undermining. The initial order dated read as follows: "Wash all ... with ..... Solution then rinse with Normal ... . Apply Medihoney gel into the ... bed, cover with 4 x 4 gauze, secure with tape; change all ... every day." The 2nd order was changed and dated ..... which read as follows: "Irrigate/wash with Hysept 0.50% solution , ... dry, then apply ... 0.1% cream, then lightly pack with moistened gauze with ..... , Polymixin, ... , solution, cover 4 x 4 gauze foam and secure with Tegaderm at 9 AM. Replace all ... on Tuesday, Thursday and Saturdays; Nurse Practitioner to change ... on Thursdays." The most current order dated reads as follows: "Irrigate/wash with Hysept 0.50% solution , dry, then apply 0.1% cream, then lightly pack with moistened gauze with , Polymixin, , solution, cover 4 x 4 gauze foam and secure with Tegaderm; perform care three times per week. Replace ... if soiled or dislodged. ARNP to change on Thursday." 2) Resident #1 has a ... of the right , ; (measurements on: 1.2 cm x 1.2 cm x	AN278		

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AN278	Continued From page 4 .2 cm and measurements on: 0.9 x 0.8 x 0.2----improving per the ARNP). According to the ARNP, it was not required to be surgically debrided. is 50% and 50% is epithelization, no ; it is pink. There is no eschar, scant small amount; with no odor. There is no and no undermining. The initial order dated read as follows: "wash all with Solution then rinse with Normal , adaptic then 4 x 4 gauze, secure with Tegaderm foam film; change all every day." The 2nd order was changed and dated read as follows: "wash with Hysept 0.50% solution , dry, then apply 0.1% cream, small piece of Adaptic, 4 x 4 gauze and secure with Tegaderm film at 9 AM. Replace all on Tuesday, Thursday and Saturdays; Nurse Practitioner to change on Thursdays." The most current order dated reads as follows: "wash with Hysept 0.50% solution , dry, then apply 0.1% cream, small piece of Adaptic, 4 x 4 gauze and secure with Tegaderm film; perform care three times per week. Replace if soiled or dislodged. ARNP to change on Thursday." 3) Finally, Resident #1 has a of the left heel (measurements on: 0.8 cm x 0.9 cm x 0.1 cm and measurements on: healed) with only preventive care done. The initial order dated read as follows: "wash all with Solution then rinse with Normal , wet/dry, Kerlix and secure with netting; change all every day." The 2nd order was changed and dated read as follows: " wet/dry, Kerlix and secure with netting at 9 AM. Replace all on Tuesday, Thursday and Saturdays; Nurse Practitioner to change on Thursdays." The most	AN278		

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AN278	Continued From page 5 current order dated reads as follows: " wet/dry, Kerlix and secure with netting; perform care three times per week. Replace if soiled or dislodged. (A.R.N.P.) to change on Thursday." The ARNP stated that she does Resident #1 every Thursday in the facility. Photographic evidence obtained of the 2 observed for Resident #1-- of the right , and of the right , . On at 11:58 AM, during a side-by-side computerized record review of the Nurses' Note dated Saturday at 11:09 AM, and interview conducted with Staff A, a Licensed Practical Nurse (LPN), it was noted that Resident #1's MAR only showed that Staff A had "initialed" the care treatments as being done. However, there was no documentation noted in the Nurses' Notes describing the appearance or progress of Resident #1's , nor response to treatment. Staff A acknowledged and admitted that she had not documented in either her Nurses' Notes nor in the LNS notes section that Resident #1's care had been done that day and she concurred that if there was an order to change the resident's , then it should have been done. Staff A also said that if it "shows up" on the MARs or Treatment Administration Record (TARs) for the care to be done, she said that she would do the and initial it as being done. Staff A added that normally if she does a treatment, she does usually include any documentation regarding a description or other specific details of the 's progress. However, this was not done in this Nurses' Note. On at 1:15 PM, a side-by-side record review was conducted with all of the following	AN278		

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AN278	Continued From page 6 facility on-site members: Director of Health & Wellness (DHW), the "covering" Executive Director of (name of sister facility) and the facility's dedicated LNS nurse. Resident #1's MAR only showed that the nurses had "initialed" the care treatments as being done. However, there was no documentation noted in any of the Nurses' Notes describing the appearance or progress of the resident's , nor response to treatment. It was revealed that there was only documentation to support that on every Tuesday on 5 occasions on the following dates , , , and , there was a change done by Hospice staff only. And, on weekly Thursdays, consistent documentation was reviewed of the Advanced Nurse Practitioner (ARNP) performing the resident's changes for dates of service to . However, further record review revealed that there was only one Saturday and one Monday in which it is documented that Resident #1's change was done by facility staff; no other days were reviewed to indicate that Resident #1's changes were being done for dates of service to , by the facility staff, to include a description or progress of the resident's and response to treatment. On at 2:00 PM during an interview conducted with Staff C, the LNS Supervisor, she acknowledged that there was no "daily/consistent" 'computerized facility nursing specific documentation nor reference to Hospice specific documentation in the facility files to indicate that Resident #1's changes were actually being performed and documented as ordered by the physician which includes a	AN278		

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AN278	Continued From page 7 description or progress of the resident's and response to treatment. Staff C also acknowledged that Resident #1's care should have been performed daily as ordered up until the "new" physician order was written dated and she concurred that Resident #1's care should have been performed on Saturday ; this was not done. Further, Staff C added that she does not do any of the " -on" care, she only overseas the facility nurses' care. The "un-dated" Hospice Integrated Plan of Care documented for ....Skin integrity need for observation/assessment of skin left heel (see narrative). However, it does not reflect or address care and treatment of either Resident #1's right , nor of her right , There were no Nursing Notes or LNS documentation to reflect or indicate that Resident #1's , changes were consistently done as per the Physician's multiple change in orders. Further there was no clarification obtained for the Physician's orders dated , and to specify as to whether the facility licensed nursing staff or whether the Hospice care entity were to perform the care for the resident on a daily basis, or subsequently on Tuesdays and Saturdays. As a result, the care was not properly and consistently documented, in detail description as being done as ordered to include the following components: a description or progress of the resident's and response to treatment. On at 2:45 PM, during an interview conducted with the DHW, she further acknowledged that the Physician's Order for	AN278		

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AN278	Continued From page 8 . . . . care provision should have been clarified as to exactly which days that the facility and/or hospice should have been providing . . . care to this resident and she also acknowledged that that there was no "daily/consistent" computerized facility nursing specific documentation nor reference to Hospice specific documentation in the facility files to indicate that Resident #1's . . . . . changes were actually being performed and documented as ordered by the Physician to include a description or progress of the resident's and response to treatment. She also acknowledged that the resident's . . . . care should have been performed daily as ordered up until the "new" physician order was written dated and she also concurred that the resident's care should have been performed on Saturday which was not done. The DHW also indicated that there was no specific facility documentation available to reflect that the resident was turned and re-positioned every 2 hours, when in bed. Class III	AN278		