

Agency for Health Care Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11969020	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 07/20/2022
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NAME OF PROVIDER OR SUPPLIER

STREET ADDRESS, CITY, STATE, ZIP CODE

WINDERMERE MEMORY CARE INC

**7901 KIPLING ST
PENSACOLA, FL 32514**

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CZ821 SS=D	59A-35.110() FAC Reporting Requirements; Electronic Submission 59A-35.110 Reporting Requirements; Electronic Submission. (1) During the two year licensure period, any change or expiration of any information that is required to be reported under Chapter 408, Part II, F.S., or authorizing statutes for the provider type as specified in Section 408.803(3), F.S., during the license application process must be reported to the Agency within 21 days of occurrence of the change, including: (a) Insurance coverage renewal; (b) Bond renewal; (c) Change of administrator or the similarly titled person who is responsible for the day-to-day operation of the provider; (d) Annual sanitation inspections; (e) Fire inspections. (2) Electronic submission of information. (a) The following required information must be submitted electronically through the Agency's Single Sign On Portal located at https://apps.ahca.myflorida.com/SingleSignOnPo rtal: 1. Nursing homes: Adverse incident reports must be submitted electronically to the Agency within 15 calendar days after the occurrence of the incident as required in Section 400.147, F.S. on Nursing Home Adverse Incident, AHCA Form 3110-0010 OL, , which is hereby incorporated by reference and available at: https://www.flrules.org/Gateway/reference.asp?N o=Ref-08777, and through the Agency's adverse incident reporting system which can only be accessed through the Agency's Single Sign On Portal located at: https://apps.ahca.myflorida.com/SingleSignOnPo rtal.	CZ821		

AHCA Form 3020-0001

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

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CZ821	Continued From page 1 2. Assisted living facilities: Adverse incident reports must be submitted electronically to the Agency within 1 business day after the occurrence of the incident, and within 15 calendar days after the occurrence of the incident as required in Section 429.23, F.S., on Assisted Living Facility Adverse Incident, AHCA Form 3180-1025 OL, , which is hereby incorporated by reference and available at: https://www.flrules.org/Gateway/reference.asp?No=Ref-08778, and through the Agency's adverse incident reporting system which can only be accessed through the Agency's Single Sign On Portal located at: https://apps.ahca.myflorida.com/SingleSignOnPortal. 3. Hospitals: Adverse incident reports must be submitted electronically to the Agency within 15 calendar days after the occurrence of the incident as required in Section 395.0197, F.S., on Hospital Adverse Incident, AHCA Form 3140-5001 OL, , which is hereby incorporated by reference and available at: https://www.flrules.org/Gateway/reference.asp?No=Ref-08779, and through the Agency's adverse incident reporting system which can only be accessed through the Agency's Single Sign On Portal located at: https://apps.ahca.myflorida.com/SingleSignOnPortal. 4. Ambulatory Surgical Centers: Adverse incident reports must be submitted electronically to the Agency within 15 calendar days after the occurrence of the incident as required in Section 395.0197, F.S., on Ambulatory Surgical Center Adverse Incident, AHCA Form 3140-5004 OL, , which is hereby incorporated by reference and available	CZ821			

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CZ821	Continued From page 2 at: https://www.flrules.org/Gateway/reference.asp?No=Ref-08780 , and through the Agency's adverse incident reporting system which can only be accessed through the Agency's Single Sign On Portal located at: https://apps.ahca.myflorida.com/SingleSignOnPortal . 5. Hospitals and ambulatory surgical centers must submit annual reports pursuant to Section 395.0197 F.S., electronically to the Agency on Annual Report, AHCA Form 3140-5005 OL, , which is hereby incorporated by reference and available at: http://www.flrules.org/Gateway/reference.asp?No=Ref-12123 , and through the Agency's Single Sign On Portal located at: https://apps.ahca.myflorida.com/SingleSignOnPortal . 6. For the purposes of this rule, the following applies for submitting adverse incident reports: a. A business day means any day other than a Saturday, Sunday, or legal holiday as designated in Section 110.117, F.S. b. A preliminary (1-Day) report is deemed late when submitted more than 1 business day after the day of the incident. c. Nursing Homes, Hospitals, and Ambulatory Surgical Centers: A full report (15- Day) is deemed late when submitted more than 15 calendar days after the day of the incident. d. Assisted Living Facilities: A full report (15-Day) is deemed late when submitted more than 15 calendar days after the day of the incident or more than 3 business days after the Agency issues the reminder pursuant to Section 429.23(5), F.S., whichever is later. e. Assisted Living Facilities and Nursing Homes that submit reports deemed late may be fined up	CZ821		

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CZ821	Continued From page 3 to \$50 per day late not to exceed \$500. (b) The licensee must retain a copy of all documentation generated at time of reporting as confirmation of successful electronic submission. (c) If the Agency's Single Sign On Portal or the online adverse incident reporting system is temporarily out of service the licensee may contact the Agency directly at 1(888)419-3456 for assistance. Reporting will resume as soon as online access is restored. This Statute or Rule is not met as evidenced by: Based on observations, interviews and record reviews, facility failed to submit electronically to the Agency a preliminary adverse incident report within 1 business day after the occurrence of the incident, and a complete adverse incident report within 15 calendar days after the occurrence of the incident for 1 of 4 residents reviewed for elopement. (Resident #3) The findings include: On at approximately 10:10 AM, an interview was conducted with Staff B, Assistant Administrator (AA). She reported that Resident #3 was able to elope from the facility by pulling a board from the property fence. The AA further reported that Resident #3 got off the property and to the corner of the skating rink approximately 0.2 miles away. She continued that it was around the change of 1st shift, about 2:30 PM, when staff realized Resident #3 was missing during resident checks. According to Staff B, staff begin searching inside and outside the facility. Police were in the area and noticed staff searching for an eloped resident. Resident #3 was sitting in the of the police car. Resident #3 was returned to the facility and	CZ821			

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CZ821	Continued From page 4 assessed for injury but none was found. Review of elopement drills revealed a drill conducted on _____ in which Resident #3 climbed under the fence and went to a local skating rink (0.2 miles away according to Google Maps). Further review revealed a drill conducted on _____ in which Resident #3 could not initially be located, she had _____ into another resident's room and was found during room-to-room checks. Review of the Resident #3's Resident Health Assessment for Assisted Living Facilities (AHCA Form 1823) revealed an admission date of _____ and a medical examination date of _____. Further review revealed diagnoses including, but not limited to _____'s _____, agitation, and _____. Review of the section on _____ or behavior needs revealed that the resident was oriented to person, otherwise _____ and _____. The resident was indicated as being an elopement risk. Review of the Windermere Memory Care Resident Rules revealed "Residents are to sign out when leaving facility and upon return. Residents who fail to notify staff/sign out when leaving, may be considered as having eloped and procedure followed as outlined in the facility elopement policy." Review of the facility's undated Elopement Policy revealed the following: Elopement is defined when a resident leaves the facility property beyond the perimeter of the parking lot or further and is missing for two (2) hours or more, without the facility knowledge, and who has not verbally informed the facility of their plans for returning to	CZ821		

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CZ821	Continued From page 5 the facility nor signed out on pass. On at approximately 2:30 PM, a follow-up interview was conducted with Staff B, AA. She was not aware of any adverse report being filed for the elopement of Resident #3 on Staff B explained that the Administrator files those reports and it is the facility's policy that if the resident leaves the property and is missing for two (2) hours or more without the facility's knowledge, then it is an elopement. When asked about the rationale for the two (2) hour rule, the AA replied "I just know where the two hour rule came from, I just know that it has always been in our policy." The AA added that Resident #3 was found after a short time during resident checks, and was brought to the facility safely. Class III	CZ821		

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A 000	Initial Comments An unannounced complaint investigation (complaint numbers 2022000757, 2022008929, & 2022006013) and generator monitoring visit was conducted at Windermere Memory Care Inc on . Deficiencies were identified at the time of the survey.	A 000		

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