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
	AL11965436	A. BUILDING: _____ B. WING _____	R 11/08/2022

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
SILVER LIFE LLC	2830 SW 106 AVENUE MIAMI, FL 33165

(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 A second revisit to a re-licensure survey was conducted at Silver Life on [illegible] to [illegible]. Deficiencies were identified at the time of the survey.	{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 [illegible] or [illegible] or has a change of condition in order to rule out the presence of an underlying physiological condition that may be contributing to such [illegible] or [illegible]. 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 [illegible] 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 resident diets in accordance with Rule	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 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 observation, record review and interview the facility failed to maintain 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 for one out of five sampled residents (Residents #2). Findings included: Observation on at 10:11 AM revealed Resident #2 ambulating with a walker. The resident was observed with a reddened bruise	A 025		

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A 025	Continued From page 2 around the right eye. Review of Resident #2's health assessment (AHCA Form 1823) completed on revealed diagnoses of hypertension, degenerative disc disease, type two diabetes without complication, epilepsy, major depressive disorder, anemia, , and history of bilateral hip replacements. The resident had physical limitations of diminished visual acuity, poor coordination, and balance, uses walker and wheelchair for mobility. Further review of the health assessment revealed the resident's memory was poor. He needed fall precautions and required assistance with ambulation, bathing, dressing, grooming, toileting, and transferring. During an interview on at 10:11 AM Resident #2 stated "I fell yesterday but I am fine. I'm going to the doctor tomorrow." During an interview on at 10:18 AM Staff E stated, "[On , Resident #2] went to his room around 4:30 PM and dropped a cookie and tried to grab it and lost his balance and hit himself on the floor. When he called me, he was on the floor with blood on his face. He didn't lose consciousness. I asked him if he wanted to call the rescue, or the doctor and he said no. After that I got him up, sat him down, and put some ice. I didn't call anyone because he did not want anyone to come. Based on my knowledge he didn't have anything wrong." During an interview on at 10:30 AM The Administrator stated "This happened around 8 or 8:30 PM at night. [Staff E] called me around 7:30 PM saying that the resident fell, but I never went to the facility. I asked the staff if she called 911 and she said no because the resident did not	A 025		

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A 025	Continued From page 3 want to, and it was a superficial wound. I didn't come to the facility because I was doing something else. I called [Resident #2's daughter] yesterday and told her what happened, and she said no problem. The daughter stated she would call the resident doctor and try to get him an appointment for today. There was no appointment available today, therefore an appointment was made for tomorrow [. . . . .]." Review of Resident #2"s record revealed no documentation of the resident sustaining a fall at the facility. There was no documentation resident health care provider was notified or a doctor appointment was scheduled. During an interview on . . . . . at 10:30 AM the Administrator stated "I have not wrote anything in the chart yet since it happened yesterday. I know I was supposed to write something in the progress notes but I was busy helping the caregivers so I forgot to write it." Class III	A 025		
A 027 SS=G	59A-36.007(3) FAC Resident Care - Arrangement for Health Care (3) ARRANGEMENT FOR HEALTH CARE. In order to facilitate resident access to health care as needed, the facility must: (a) Assist residents in making appointments and remind residents about scheduled appointments for medical, dental, nursing, or mental health services. (b) Provide transportation to needed medical, dental, nursing or mental health services, or arrange for transportation through family and	A 027		

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A 027	Continued From page 4 friends, volunteers, taxi cabs, public buses, and agencies providing transportation. (c) The facility may not require residents to receive services from a particular health care provider. This Statute or Rule is not met as evidenced by: Based on observation, record review and interview the facility failed to assist with the arrangement of healthcare services for a resident who had fallen, with injury, for one out of five sampled residents (Resident #2). Findings included: Observation on at 10:11 AM revealed Resident #2 ambulating with a walker. The resident was observed with a reddened bruise around the right eye. Review of Resident #2's health assessment (AHCA Form 1823) completed on revealed diagnoses of hypertension, degenerative disc disease, type two diabetes without complication, epilepsy, major depressive disorder, anemia, , and history of bilateral hip replacements. The resident had physical limitations of diminished visual acuity, poor coordination, and balance, uses walker and wheelchair for mobility. Further review of the health assessment revealed the resident's memory was poor. He needed fall precautions and required assistance with ambulation, bathing, dressing, grooming, toileting, and transferring. During an interview on at 10:11 AM Resident #2 stated "I fell yesterday but I am fine. I'm going to the doctor tomorrow." During an interview on at 10:18 AM Staff	A 027		

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A 027	Continued From page 5 E stated, "[On . . . . . , Resident #2] went to his room around 4:30 PM and dropped a cookie and tried to grab it and lost his balance and hit himself on the floor. When he called me, he was on the floor with blood on his face. He didn't lose consciousness. I asked him if he wanted to call the rescue, or the doctor and he said no. After that I got him up, sat him down, and put some ice. I didn't call anyone because he did not want anyone to come. Based on my knowledge he didn't have anything wrong." During an interview on . . . . . at 10:30 AM The Administrator stated "This happened around 8 or 8:30 PM at night. [Staff E] called me around 7:30 PM saying that the resident fell, but I never went to the facility. I asked the staff if she called 911 and she said no because the resident did not want to, and it was a superficial wound. I didn't come to the facility because I was doing something else. I called [Resident #2's daughter] yesterday and told her what happened, and she said no problem. The daughter stated she would call the resident doctor and try to get him an appointment for today. There was no appointment available today, therefore an appointment was made for tomorrow [. . . . .]." On . . . . . , at 11:17 AM Resident #2 family member was contacted and asked was she aware the resident had a fall at the facility. The family member stated, "anytime he has fallen, they [facility staff] call me.' Concerning the fall that occurred on , the family stated, " I think I called the doctor." Review of the facility's fall prevention policy revealed, 'if resident falls at the facility, the resident will be immediately assessed to determine if any bones or injuries occurred. As	A 027		

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A 027	Continued From page 6 needed and when needed all falls are to be called out to EMT for pick up so the resident can have a medical examiner conduct an assessment. Contact the resident's doctor and guardian.' Review of Resident #2's record showed no documentation fall precautions were in place. There was no documentation the resident's health care provider was notified of the resident's fall, and there was no documentation the resident received care and services from a medical provider after sustaining a fall, with injury to the eye. There was no documentation a doctor appointment was scheduled. Class II	A 027		