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
	AL11969444	A. BUILDING: _____ B. WING _____	R 03/07/2023

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
PLAZA AT PARKSQUARE (THE)	2940 NE 207 STREET AVENTURA, FL 33180

(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 152 SS=E	59A-36.014(3) FAC Physical Plant - Safe Living Environ/Other (3) OTHER REQUIREMENTS. (a) All facilities must: 1. Provide a safe living environment pursuant to section 429.28(1)(a), F.S.; 2. Be maintained free of hazards; and, 3. Ensure that all existing architectural, mechanical, electrical and structural systems, and appurtenances are maintained in good working order. (b) Pursuant to section 429.27, F.S., residents must be given the option of using their own belongings as space permits. When the facility supplies the furnishings, each resident bedroom or sleeping area must have at least the following furnishings: 1. A clean, comfortable bed with a mattress no less than 36 inches wide and 72 inches long, with the top surface of the mattress at a comfortable , to ensure easy access by the resident, 2. A closet or wardrobe space for hanging clothes, 3. A dresser, or other furniture designed for storage of clothing or personal effects, 4. A table or nightstand, bedside lamp or floor lamp, and waste basket; and, 5. A comfortable chair, if requested. (c) The facility must maintain master or duplicate keys to resident bedrooms to be used in the event of an emergency. (d) Residents who use portable bedside commodes must be provided with privacy during use. (e) Facilities must make available linens and personal laundry services for residents who require such services. Linens provided by a facility must be free of tears, stains and must not be	A 152		

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A 152	Continued From page 1 This Statute or Rule is not met as evidenced by: Based on observations, record review and interviews the facility failed to ensure that all its systems and appurtenances are maintained in good working order. The facility's Emergency Pendant call system on three out of three sampled rooms. (. . . # , # . . . #). 205 out 2,160 sampled calls on the facility's Emergency Pendant system took longer than 15 minutes to respond. Findings: A review of the facility's Plan of Correction of for deficiencies related to delays in responding to resident needs first identified by the call pendant system showed: "The Emergency Pendant calls will be answered within 15 minutes and no longer than 20 minutes for those staff members occupied providing care to other residents." "The Emergency Pendant call log will be printed and reviewed daily with the Wellness staff. Any staff not responding to calls within 15 minutes will be counseled and/or further disciplinary action will be taken." "Director of Resident Care, Assistant Director of Resident Care and Administrator will randomly tour building for compliance rounds and compliance of responding to emergency pendant calls." A review of 2,172 resident calls from to to the facility's Emergency Pendant system showed that 58 calls had a response elapsed time of over 15 minutes, and 147 calls had a response elapsed time of over 20 minutes. A review of the facility's Emergency Pendant log	A 152		

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A 152	Continued From page 2 showed a call from # on at 11:59 am indicating a . Further review revealed an elapsed time response of 33 minutes and twenty-three seconds for that call. Further review of the facility's Emergency Pendant log showed a call from # on at 10:06 am indicating a . Further review revealed an elapsed time response of 4 hours and 52 seconds for that call. Observation on at approximately 4:35 am showed that the facility's Emergency Pendant system displayed a "Fault" message on #. Observation on at 4:38 am showed that Staff AX checked the emergency pendant in #, found that it was and replaced the battery on the device. Further review of the facility's Emergency Pendant log showed a call from # on at 6:19 am. Further review revealed an elapsed time response of 1 hour and 58 minutes for that call. A review of the facility's census revealed that Resident #116 resided in #. A review of Resident #116 nurses' notes of showed that Resident #116 complained of (), was repositioned and 911 was activated for further evaluation. Observation on at approximately 9:40 am showed that there was no response after two test calls of the emergency pendant from #.	A 152		

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A 152	Continued From page 3 During an interview on at approximately 9:45 am when questioned about the call pendant test calls Staff AAB stated that she did not receive any calls on her cell phone. Observation on at approximately 9:45 am showed that Staff AAB tested the call pendant from # . During an interview on at approximately 9:45 am Staff AAB stated that the emergency pendant was , and she would have it corrected. During an interview on at approximately 9:50 am Resident #24 in # stated that it took over 30 minutes for the nurse to respond after she pressed the call pendant that morning because she had , . Observation on at approximately 9:55 am showed that there was no response after the emergency pendant was tested from # . During an interview on at approximately 10:05 am when asked about the test call, Staff AAB stated that she did not receive a call from # , and that she would have to change her cellular phone due to poor reception of the emergency pendants. During telephone interview on at 1:41 pm the Administrator stated: "The purpose of the Emergency Pendant system is to provide the residents a way to call in case of an emergency, but they use it for everything." The Administrator also stated: "This system tends to wear out the batteries too quickly, the batteries always need to be changed." When asked how the facility	A 152		

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A 152	Continued From page 4 ensures a timely response to residents in distress the Administrator stated that they had implemented rounding the rooms every two hours and providing snacks to the residents in the evening. Class III	A 152		

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{A 000}	Initial Comments A Second Revisit Survey to a Complaint Investigation (#2022012794, #2022012452, #2022012020, and #2022012719} was conducted at Plaza at ParkSquare from 07, 2023 to 15, 2023. Deficiencies were identified at the time of the survey.	{A 000}		
{A 030} SS=D	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 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; Rights Florida, 1(800)342-0823; the Agency Consumer Hotline 1(888)419-3456, and the statewide toll-free telephone number of the Florida Hotline, 1(800)96- or 1(800)962-2873. The telephone numbers must be posted in close	{A 030}		

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{A 030}	Continued From page 1	{A 030}		

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. and tobacco use;
3. Medication storage;
4. Resident elopement;
5. Reporting resident , neglect, and , ;
6. Administrative and housekeeping schedules 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

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{A 030}	Continued From page 2 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. (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	{A 030}		

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{A 030}	Continued From page 3 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 paragraph, the term "adequate and appropriate health care" means the management of medications, assistance in making , , for health care services, the provision of or arrangement of transportation to health care ., 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 ., 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	{A 030}		

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{A 030}	Continued From page 4 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 , 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 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	{A 030}		

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{A 030}	Continued From page 5 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, 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 observation, record review, and interview the facility failed to obtain consent for the use of a full bed rail for one out of 119 sampled residents (Resident #104). Findings included: On at 7:23 AM, observation showed Resident #104 sleeping with two half bed rails up	{A 030}		

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{A 030}	Continued From page 6 on each side of the bed. (on each side it formed a full bed rail) Further observation revealed a chair propped against the bed with the seat facing away from the resident in between the two half bed rails. Review of Resident #104's record revealed no documentation of a physician order for full bed rails. During an interview on . . . . . at 1:29 PM The Administrator stated "They put the chair there when they feed him is what I was told by the private duty aid. I thought I saw full bed rail order, but I could be wrong." Uncorrected Class III	{A 030}		