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
	AL11969616	A. BUILDING: _____ B. WING _____	04/06/2023

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
AMIRA CHOICE NAPLES	9015 BELLAIRE BAY DR NAPLES, FL 34120

(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 relicensure survey with limited nursing services, Health Facility Reporting System, generator and visitation monitoring visit, and complaint survey for #2022008289 was conducted on at Amira Choice Naples, an assisted living facility in Naples, Florida. Complaint #2022008289 was substantiated without citation. The following is a description of the deficiencies. .	A 000		
AN277 SS=D	59A-36.022(2) FAC LNS - Resident Care Standards (2) RESIDENT CARE STANDARDS. (a) A resident receiving limited nursing services in a facility holding only a standard and limited nursing services license must meet the admission and continued residency criteria specified in Rule 59A-36.006, F.A.C. (b) In accordance with Rule 59A-36.010, F.A.C., the facility must employ sufficient and qualified staff to meet the needs of residents requiring limited nursing services based on the number of such residents and the type of nursing service to be provided. (c) Limited nursing services may only be provided as authorized by a health care practitioner's order, a copy of which must be maintained in the resident's file. (d) Facilities licensed to provide limited nursing services must employ or contract with a nurse(s) who must be available to provide such services as needed by residents. The facility's employed or nurse must coordinate with third party nursing services providers to ensure resident care is provided in a safe and consistent	AN277		

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AN277	Continued From page 1 manner. The facility must maintain documentation of the qualifications of nurses providing limited nursing services in the facility's personnel files. (e) The facility must ensure that nursing services are conducted and supervised in accordance with Chapter 464, F.S., and the prevailing standard of practice in the nursing community. This Statute or Rule is not met as evidenced by: Based on record review, and resident and staff interviews, the facility failed to provide limited nursing services in accordance with the physician's orders and residency agreement for 2 (Resident #1 and #2) of 2 sampled residents receiving limited nursing services. The findings included: Record review of the Limited Nursing Service (LNS) binder on . . . . . revealed Resident #1 had an order for LNS services for care dated . . . . . . Record review of the Limited Nursing Service (LNS) binder on . . . . . revealed Resident #2 had an order for LNS services for care dated . . . . . . On at 12 p.m., during an interview, the Director of Health Services (DHS) said that was a refreshed order and Resident #2 had actually been on LNS since her admission 2 years prior. Review of facility policy titled - EVALUATION OF CLIENTS - INITIAL AND ONGOING, effective date . . . . . , ... , listed under bullet #4 is Limited Nursing Services and "most common LNS services that the facility may provide" included Care. 1. On at 10:28 a.m., during an interview,	AN277		

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AN277	Continued From page 2 Resident #1's daughter said her mother had private duty staff. Resident #1's daughter said the private duty had been doing all the . . . . . work and the facility staff did nothing with the . . . . Resident #1's daughter said she had never seen facility staff come in to empty it or change it. Resident #1's daughter said she was charged $500 a month for the LNS services and they had done nothing she was aware of as they hadn't changed the bag, they hadn't cleaned it, they hadn't done anything. She said she thought Hospice was changing the bag. On at 10:45 a.m., during an interview, Resident #1's private duty aide said she has worked with Resident #1 for about 2 months and worked 5 days a week, 12 hour shift during the day. She said none of the facility staff came in to empty the . . . . . , only her. She said none of the facility staff came to help and if she called for help it could take hours and she sometimes had to go on the floor looking for someone to help her. On . . . . . at 11 a.m., the DHS said she couldn't change bags. Record review of Resident #1's progress notes revealed facility staff had only documented care on , , , , and . . . . . Review of Resident #1's Residency Agreement with a signature date of discusses supplemental services on page 5 and refers you to Exhibit B. Exhibit B lists service fees for LNS services but does not describe what services are provided. 2. On at 11:41 a.m., during an interview, Resident #2 said the Home Health nurse had been in that morning to change the . . . . . She	AN277		

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AN277	Continued From page 3 said no staff at the facility does anything with her ␣ but they do change the bag from ␣ to bag in the evening and morning. Record review of Resident #2's progress notes for the past month reveal Home Health had changed Resident #2's on . Facility staff had only documented care on , , , , and . Review of Resident #1's Residency Agreement with a signature date of discusses supplemental services on page 5 and refers you to Exhibit B. Exhibit B lists service fees for LNS services but does not describe what services are to be provided. On at 12 p.m., during an interview, the Director of Health Services (DHS) said Resident #1 and Resident #2 are both receiving Limited Nursing Services for care. She said the facility nurses do the daily looking and touching and document daily. She also said Resident #1 receives Hospice services and Hospice changed the . She said Resident #2 receives home health services for changing the and dealing with the urologist. On at 12:18 p.m., during an interview, the Administrator said Residents #1 and #2 were charged $500 extra per month for LNS. She said Home Health always changed the . Administrator said the facility did the documentation but facility staff wouldn't change it and said the home health visits would be billed through the residents' insurance. On at approximately 3 p.m., during an interview, the DHS said she had become aware of the lack of documentation for LNS services and agreed if nothing was documented there was	AN277		

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AN277	Continued From page 4 no way to prove the services had been provided. The Administrator said she would look into how to handle [redacted] changes without bringing in an outside nurse to provide added services that should be covered under a Limited Nursing Services license. Class III	AN277		
AN278 SS=D	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 record review, and staff interview, the facility failed to maintain progress notes documenting care provided to each resident receiving a limited nursing service (LNS) for 3 (Residents #1, #2, and #15) of 3 residents	AN278		

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AN278	Continued From page 5 reviewed for LNS progress notes. The findings included: Record review of the Limited Nursing Service (LNS) binder on revealed Resident #1 had an order for LNS services for care dated . Record review of the Limited Nursing Service (LNS) binder on revealed Resident #2 had an order for LNS services for care dated . However, on at 12 p.m., during an interview, the Director of Health Services (DHS) said that was a refreshed order and Resident #2 had actually been on LNS since her admission 2 years prior. Record review of the Limited Nursing Service (LNS) binder on revealed Resident #15 had an order dated to admit to LNS for a left brace when ambulating. On at 12 p.m., the Director of Health Services (DHS) said the facility nurses are responsible to do the daily looking and touching and document daily on the LNS residents. A review of the LNS progress notes on for Residents 1, 2 and 15 revealed the following: Resident #1's progress notes revealed facility staff had only documented care on , , , and . Resident #2's progress notes revealed facility staff had only documented care on , , , , and . Resident #15's progress notes revealed facility staff had only documented on the brace on , and .	AN278		

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AN278	Continued From page 6 On . . . . . at 1:24 p.m., during an interview, the DHS said she had recognized the lack of progress notes for LNS services. She said they had had a lot of agency staff and were working on that. On . . . . . at approximately 3 p.m., during an interview, the DHS said she had become aware of the lack of documentation for LNS services and agreed if nothing was documented there was no way to prove the services had been provided. Class III	AN278		