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
	AL11967495	A. BUILDING: _____ B. WING _____	08/11/2023

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
HAPPY LIFE ALF	14785 COOLIDGE LANE HOMESTEAD, FL 33033

(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 complaint investigation (# 2023009432) was conducted at Happy Place ALF, Inc. on July 11, 2023 through August 11, 2023. The provider had a deficiency identified at the time of the survey.	A 000		
A 010 SS=G	429.26(1-3) FS; 59A-36.006(4) FAC Admissions - Continued Residency 429.26 Appropriateness of placements; examinations of residents.- (1) The owner or administrator of a facility is responsible for determining the appropriateness of admission of an individual to the facility and for determining the continued appropriateness of residence of an individual in the facility. A determination must be based upon an evaluation of the strengths, needs, and preferences of the resident, a medical examination, the care and services offered or arranged for by the facility in accordance with facility policy, and any limitations in law or rule related to admission criteria or continued residency for the type of license held by the facility under this part. The following criteria apply to the determination of appropriateness for admission and continued residency of an individual in a facility: (a) A facility may admit or retain a resident who receives a health care service or treatment that is designed to be provided within a private residential setting if all requirements for providing that service or treatment are met by the facility or a third party. (b) A facility may admit or retain a resident who requires the use of assistive devices. (c) A facility may admit or retain an individual receiving hospice services if the arrangement is agreed to by the facility and the resident, additional care is provided by a licensed hospice, and the resident is under the care of a physician	A 010		

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A 010	Continued From page 1 who agrees that the physical needs of the resident can be met at the facility. The resident must have a plan of care which delineates how the facility and the hospice will meet the scheduled and unscheduled needs of the resident, including, if applicable, staffing for nursing care. (d)1. Except for a resident who is receiving hospice services as provided in paragraph (c), a facility may not admit or retain a resident who is bedridden or who requires 24-hour nursing supervision. For purposes of this paragraph, the term "bedridden" means that a resident is confined to a bed because of the inability to: a. Move, turn, or reposition without total physical assistance; b. Transfer to a chair or wheelchair without total physical assistance; or c. Sit safely in a chair or wheelchair without personal assistance or a physical restraint. 2. A resident may continue to reside in a facility if, during residency, he or she is bedridden for no more than 7 consecutive days. 3. If a facility is licensed to provide extended congregate care, a resident may continue to reside in a facility if, during residency, he or she is bedridden for no more than 14 consecutive days. (2) A resident may not be moved from one facility to another without consultation with and agreement from the resident or, if applicable, the resident's representative or designee or the resident's family, guardian, surrogate, or attorney in fact. In the case of a resident who has been placed by the department or the Department of Children and Families, the administrator must notify the appropriate contact person in the applicable department.	A 010		

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A 010	Continued From page 2 (3) A physician, physician assistant, or advanced practice registered nurse who is employed by an assisted living facility to provide an initial examination for admission purposes may not have financial interests in the facility. 59A-36.006 (4) CONTINUED RESIDENCY. Except as follows in paragraphs (a) through (c) of this subsection, criteria for continued residency in any licensed facility must be the same as the criteria for admission. As part of the continued residency criteria, a resident must have a face-to-face medical examination by a health care practitioner at least every 3 years after the initial assessment, or after a significant change, whichever comes first. A significant change is defined in Rule 59A-36.002, F.A.C. The results of the examination must be recorded on the practitioner's form or on AHCA Form 1823, which is incorporated by reference in paragraph (2)(b) of this rule and must be completed in accordance with that paragraph. Exceptions to the requirement to meet the criteria for continued residency are: (a) The resident may be bedridden for no more than 7 consecutive days, unless the resident is receiving licensed hospice services pursuant to Section 429.26(1)(c), F.S. (b) A resident requiring care of a stage 2 pressure sore may be retained provided that: 1. The resident contracts directly with a licensed home health agency or a nurse to provide care, or the facility has a limited nursing services license and services are provided pursuant to a plan of care issued by a health care practitioner, 2. The condition is documented in the resident's record; and, 3. If the resident's condition fails to improve within	A 010		

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A 010	Continued From page 3 30 days, as documented by a health care practitioner, the resident must be discharged from the facility. (c) A terminally ill resident who no longer meets the criteria for continued residency may continue to reside in the facility if the following conditions are met: 1. The resident qualifies for, is admitted to, and consents to receive services from a licensed hospice that coordinates and ensures the provision of any additional care and services that the resident may need; 2. Both the resident, or the resident's legal representative if applicable, and the facility agree to continued residency; 3. A licensed hospice, in consultation with the facility, develops and implements an interdisciplinary care plan that specifies the services being provided by hospice and those being provided by the facility; and, 4. Documentation of the requirements of this paragraph is maintained in the resident's file. (d) The facility administrator is responsible for monitoring the continued appropriateness of placement of a resident in the facility at all times. (e) A hospice resident that meets the qualifications of continued residency pursuant to this subsection may only receive services from the assisted living facility's staff which are within the scope of the facility's license. (f) Assisted living facility staff may provide any nursing service permitted under the facility's license and total help with the activities of daily living for residents admitted to hospice; however, staff may not exceed the scope of their professional licensure or training. (g) Continued residency criteria for facilities holding an extended congregate care license are described in Rule 59A-36.021, F.A.C.	A 010		

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A 010	Continued From page 4 This Statute or Rule is not met as evidenced by: Based on record review and interview, the facility failed to determine the appropriateness of continuous residency for one out of one sampled resident (Resident # 1). The facility was unable to support the resident with transferring or ambulation. The resident fell 2 days in a row and suffered a hip fracture with the second fall. Findings included: A review of Resident # 1's record revealed that the health assessment completed on 06/01/21 stated that she was on fall precautions and required total assistance with bathing and assistance with transferring, ambulation, eating, grooming, toileting and dressing. The resident had suffered a fall on 06/06/23 at 6:25 PM as she was transferring from her commode to bed. Rescue was called and they had to lift the resident up from the floor and she had no fractures. On 06/07/23 the resident slipped out of bed while sitting up on the edge of the bed and the employee could not handle the resident because of her overweight, however she helped her fall so that she would not hit her head. The employee called rescue and they came to attend to her; the employee also called the administrator immediately. The resident was taken to the hospital. She suffered a fracture to the right hip and had to have surgery. On 07/11/23 at 8:07 AM Staff B stated, "Resident # 1 fell, she had been complaining of pain in her knee, she used to walk and stopped coming to the dining room table, stayed in her room. She liked to keep the bedroom door closed, but that day she told me to leave it open; she was in room # 2. I saw her at the edge of the bed and told her	A 010		

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A 010	Continued From page 5 that she was going to fall and went to her room, but she started sliding off the bed and I helped her so that she did not hit her head; she was very fat, and I slid to the floor with her, rescue came and they had a hard time to get her off the floor. She went to the hospital and had surgery; she died like a week after." On 07/11/23 at 9:23 AM the Administrator stated, "We were in the process of getting her out of hospice to see if we could provide her with physical therapy, because she was better. she did not like people helping her, not even the hospice certified nursing assistant, she would give her the soap and Resident # 1 would wash herself. The problem was her right knee. She was blind and had been on hospice a long time." On 07/11/23 at 10:30 AM, Staff B stated, "The day before, she had fallen when transferring from the commode to the bed. That day rescue came and did not take her to the hospital because she had no signs of fracture. The three of them lifted her with a blanket because she was too heavy. She did not call for assistance." A review of the resident record found no documentation of the facility's efforts to find appropriate assistance or placement for Resident #1 when they were unable to assist the resident due to her weight. On 08/11/2023 at 2:25 PM Administrator stated that when the resident started to complaint about knee pain, they called the doctor from hospice, and she ordered medication for the pain. She also stated that she and the staff used to tell the resident to call them for help and she would say, "ok, ok", and would not call.	A 010		

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A 010	Continued From page 6 Class II	A 010		