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
	AL11969059	A. BUILDING: _____ B. WING _____	06/30/2020

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
AMERICAN HOUSE COCONUT POINT	8460 MURANO DEL LAGO DR BONITA SPRINGS, FL 34135

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A 000	Initial Comments An unannounced off-hours Control Focused Visit, Emergency Power Plan Monitoring and Complaint survey for #2020002717, #2020005005 and #2020010440 was conducted beginning at 5:00 a.m. at American House Coconut Point, an assisted living facility in Bonita Springs, Florida. Complaint #2020002717 was substantiated at A0079. Complaint #2020005005 was substantiated at A0079. Complaint #2020010440 was substantiated without citation. The following is description of the deficiency. .	A 000		
A 079 SS=D	59A-36.010(3) FAC Staffing Standards - Levels (3) STAFFING STANDARDS. (a) Minimum staffing: 1. Facilities must maintain the following minimum staff hours per week: Number of Residents, Day Care Participants, and Respite Care Residents Staff Hours/Week 0-5 168 212 16-25 253 26-35 294 36-45 335 46-55 375 56-65 416 66-75 457 76-85 498 86-95 539 For every 20 total combined residents, day care	A 079		

AHCA Form 3020-0001

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE | (X6) DATE

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A 079	Continued From page 1 participants, and respite care residents over 95 add 42 staff hours per week. 2. Independent living residents, as referenced in subsection 59A-36.015(3), F.A.C., who occupy beds included within the licensed capacity of an assisted living facility but do not receive personal, limited nursing, or extended congregate care services, are not counted as residents for purposes of computing minimum staff hours. 3. At least one staff member who has access to facility and resident records in case of an emergency must be in the facility at all times when residents are in the facility. Residents serving as paid or volunteer staff may not be left solely in charge of other residents while the facility administrator, manager or other staff are absent from the facility. 4. In facilities with 17 or more residents, there must be at least one staff member awake at all hours of the day and night. 5. A staff member who has completed courses in First Aid and , , ( ) and holds a currently valid card documenting completion of such courses must be in the facility at all times. a. Documentation of attendance at First Aid or courses pursuant to subsection 59A-36.011(5), F.A.C., satisfies this requirement. b. A nurse is considered as having met the course requirements for First Aid. An emergency medical technician or paramedic currently certified under chapter 401, part III, F.S., is considered as having met the course requirements for both First Aid and . 6. During periods of temporary absence of the administrator or manager of more than 48 hours when residents are on the premises, a staff member who is at least , must be physically present and designated in writing to be	A 079		

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A 079	Continued From page 2 in charge of the facility. No staff member shall be in charge of a facility for a consecutive period of 21 days or more, or for a total of 60 days within a calendar year, without being an administrator or manager. 7. Staff whose duties are exclusively building or grounds maintenance, clerical, or food preparation do not count towards meeting the minimum staffing hours requirement. 8. The administrator or manager's time may be counted for the purpose of meeting the required staffing hours, provided the administrator or manager is actively involved in the day-to-day operation of the facility, including making decisions and providing supervision for all aspects of resident care, and is listed on the facility's staffing schedule. 9. Only on-the-job staff may be counted in meeting the minimum staffing hours. Vacant positions or absent staff may not be counted. (b) Notwithstanding the minimum staffing requirements specified in paragraph (a), all facilities, including those composed of apartments, must have enough qualified staff to provide resident supervision, and to provide or arrange for resident services in accordance with the residents' scheduled and unscheduled service needs, resident contracts, and resident care standards as described in rule 59A-36.007, F.A.C. (c) The facility must maintain a written work schedule that reflects its 24-hour staffing pattern for a given time period. Upon request, the facility must make the daily work schedules of direct care staff available to residents or their representatives. (d) The facility must provide staff immediately when the agency determines that the requirements of paragraph (a) are not met. The	A 079		

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A 079	Continued From page 3 facility must immediately increase staff above the minimum levels established in paragraph (a), if the agency determines that adequate supervision and care are not being provided to residents, resident care standards described in rule 59A-36.007, F.A.C., are not being met, or that the facility is failing to meet the terms of residents' contracts. The agency will consult with the facility administrator and residents regarding any determination that additional staff is required. Based on the recommendations of the local fire safety authority, the agency may require additional staff when the facility fails to meet the fire safety standards described in rule chapter 69A-40, F.A.C., until such time as the local fire safety authority informs the agency that fire safety requirements are being met. 1. When additional staff is required above the minimum, the agency will require the submission of a corrective action plan within the time specified in the notification indicating how the increased staffing is to be achieved to meet resident service needs. The plan will be reviewed by the agency to determine if it sufficiently increases the staffing levels to meet resident needs. 2. When the facility can demonstrate to the agency that resident needs are being met, or that resident needs can be met without increased staffing, the agency may modify staffing requirements for the facility and the facility will no longer be required to maintain a plan with the agency. (e) Facilities that are co-located with a nursing home may use shared staffing provided that staff hours are only counted once for the purpose of meeting either assisted living facility or nursing home minimum staffing ratios. (f) Facilities holding a limited mental health,	A 079		

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A 079	Continued From page 4 extended congregate care, or limited nursing services license must also comply with the staffing requirements of rules 59A-36.020, 59A-36.021 or 59A-36.022, F.A.C., respectively. This Statute or Rule is not met as evidenced by: Based on resident, and staff interviews, and record review, the facility failed to provide scheduled and unscheduled service needs for 5 (Residents #7, #8, #9, #10, and #11) of 5 residents interviewed in regards to timeliness of response and receiving physician ordered care. The findings included: On at 12:01 p.m., the complainant said they occasionally find only two staff members in the whole building. The complainant said the staff are slow to respond to call lights but more so at night. The complainant said there are a few good employees, however, most are uncaring. The complainant said in the evening it takes, at least, a half hour to respond to call lights and often longer. Upon arrival at the facility on at 5:00 a.m., there was one staff member, a Resident Assistant ( ) working in the Assisted Living (AL) and there was a Licensed Practical Nurse (LPN) in the building. LPN Staff C said she was covering the AL and Memory Care unit dispensing medications. Staff D said she was the only for Assisted Living (3 floors) on the 10:00 p.m. to 6:00 a.m. shift. Staff D said there is only one nurse on the 10:00 p.m. to 6:00 a.m. shift. Staff D said there were two 's in the Memory Care unit. The said there were supposed to be 2 to 3	A 079		

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A 079	Continued From page 5 's in the AL on the 10:00 p.m. to 6:00 a.m. Staff D said it is not often there is only one . Staff D said most of the time there are 2 's. Staff D said each resident has a pendant which activates the call system. Staff D said the call comes up on the pager carried by the 's and on the computer on the Medication Technician's (Med Tech) medication cart. Staff D said the 's carry a key fob that deactivates the resident's call alert. Staff D said the has to be near the activated pendant (must go into the room) to cancel the call. In an interview on at 5:50 a.m., Resident #8 said she gets up early to exercise walking in the corridor when no one else is about. The resident said there was only one on this night. She said there are usually at least two. In an interview on at 7:50 a.m., Resident #7 said he stays in his room. The resident said he has failing health and requires assistance to transfer and is not able to walk very well. Resident #7 said it often takes a long time for the 's to respond. In an interview on at 10:52 a.m., Resident #9 said medications were late this morning and one of the medications was not available. Resident #9 said the staff does not come in a reasonable amount of time. Said sometimes there are long delays. In an interview on at 11:03 a.m., Resident #10 said staff are supposed to check on her every 2 to 3 hours throughout the night. She said some 's do and some don't. Resident #10 said the physician ordered for her to be every morning before breakfast due to water retention. The resident said she will press the	A 079		

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A 079	Continued From page 6 call pendant at 7:30 a.m. to get an to come and help weigh. The resident said staff will not come to weigh her until 8:30 a.m. with breakfast served at 8:00 a.m. Resident #10 said she is not getting the service she needs. In an interview on at 11:40 a.m., Resident #11 said most times 's respond soon after called. She said, however there are long wait times on Sunday and when they don't have the help. In an interview on at 8:45 a.m., the Wellness Director said scheduled staffing is as follows: 10:00 p.m. to 6:00 a.m.: 1 Med Tech, 1 for AL; 1 Med Tech 1 for Memory unit; 1 Nurse. There is always a nurse on every shift and 2 's if a Med Tech is not available. 6:00 a.m. to 2:00 p.m.: 3 Med Techs, 3 's for AL; 1 Med Tech and 3 for Memory unit; 1 Nurse and the Wellness Director. 2:00 p.m. to 10:00 p.m.: 3 Med Techs, 3 's for AL; 1 Med Tech and 3 for Memory unit and 1 Nurse. The Wellness Director said call lights are enunciated on the pager and Med Tech computer and continue to beep until deactivated. She said the call light can only be deactivated by key fob carried by 's or at the receptionist's computer at the front desk. She said there is a fob for each on staff in the AL, however there are two extra fobs missing. The Wellness Director said it is a problem when staff call off because it is often impossible to find someone to cover the shift. The Wellness Director said she will assign a from Memory Care to help in AL.	A 079		

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A 079	Continued From page 7 The Memory Care 's do not have deactivation fobs (memory care residents do not have pendants), so when they come to the AL to assist the memory care residents 's cannot deactivate the call pendant. She said there are three pagers for each floor in the AL carried by the 's. She said 1st floor is the "most needy - call often." She said the 's on the 2nd floor also cover the 1400 rooms in the of the building. The minimum staffing requirement for a census of 87 AL residents is 539 hours per week. A review of the timesheets shows hours worked per week to be greater than 581 hours. However, the timesheets for a two-week period - found that on on the 10:00 p.m. to 6:00 a.m. shift only 1 was clocked in. There were four nights in the two week period on the 10:00 p.m. to 6:00 a.m. shift with only 2 's clocked in. On Sunday and Saturday on the 2:00 p.m. to 10:00 p.m. shift only 3 's were clocked in. In an interview on at 9:00 a.m., the Executive Director said the call system records each activation; the time activated by the resident and how long it took to be deactivated by the . The Executive Director said she does not review the reports of call response times. A review of the documented call response times found that: Monday, at 2:12 a.m., call light activated, deactivated after 2 hours (, (min). Sunday, , a call light was activated at 9:22 p.m., 2 hrs 14 min to deactivate; activated at 11:46 p.m., deactivated 1 ; activated at 7:45 p.m., deactivated 2 hrs 28 min; activated at 7:32 p.m., deactivated 4 hrs 2 min; activated at	A 079		

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A 079	Continued From page 8 7:32 p.m. deactivated 2 hrs 30 min; activated at 7:11 p.m., deactivated 1 . Friday, : 26 from 7:00 p.m. to 9:30 p.m. there were 14 call lights activated with deactivation times of: 4 , 3 , 4 hr 1 min, 3 hrs 42 min, 4 hrs 40 min, 2 hrs 56 min, 3 hrs 2 min, 2 hrs 16 min, 2 hours 21 min, 1 , 2 hrs 28 min, 1 , 2 hrs 1 min, and 1 . In an interview on at 3:20 p.m., Med Tech Staff E said the usual staffing on the 2:00 p.m. to 10: p.m. shift is 1 Med Tech and 1 for each floor in the AL. She said this is enough for care, however, if someone calls off it is difficult. In an interview on at 3:30 p.m., LPN Staff K said sometimes we are unable to replace staff when they call off. She said the AL will get assistance from the Memory Care unit staff. She said the 's should request help from other 's if several residents require assistance at the same time. LPN Staff K said sometimes the pendant cannot be turned off from the door to the apartment. She said if the pendant is not turned off, the pagers and the computer on the medication cart keep beeping. The nurse said staff may get numbed to the beeping. In an interview on at 3:45 p.m., Staff L said when several call lights are beeping at the same time on her floor, she tries to complete the required care for each resident as fast as she can and move on to the next. The said she does not call on other staff for assistance. She said sometimes it can take a while to get to all of the residents. She said the call light does not always clear so when the work settles down she goes and presses the fob until the pendant is	A 079		

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A 079	Continued From page 9 reset. In an interview on [redacted] at 4:15 p.m., the Executive Director said she is not happy with the call system. She said not being able to deactivate the pendants is a real problem. The Executive Director confirmed it is difficult to get replacement staff when a care-giver calls off. She said on the occasions when call offs cannot be replaced, the facility operates with a reduced staff. Class III .	A 079		