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
	AL11910705	A. BUILDING: _____ B. WING _____	10/30/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
OASIS AT MARGATE ASSISTED LIVING LLC	1189 WEST RIVER DRIVE MARGATE, FL 33063

(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 Bed Capacity Increase survey, licensure complaint survey (#2023013383, #2023013671, #2024010167, #2024012051) and Generator Monitoring survey were conducted on through at Oasis at Margate Assisted Living LLC. The facility had deficiencies at the time of the survey related to licensure complaint survey (#2023013383, #2023013671, #2024010167, #2024012051) .	A 000		
A 025	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 or or has a change of condition in order to rule out the presence of an underlying physiological condition that may be contributing to such or . 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 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.	A 025		

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A 025	Continued From page 1 (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 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 records review and interviews, the facility failed to have a robust system in prevent to prevent unsafe _ of residents, as evidenced in 1 of 1 sampled resident (Resident #1). The findings included: On review of the facility's signing log dated revealed Resident #1 left the	A 025		

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A 025	Continued From page 2 facility after signing out. The record revealed that Resident #1 went to the store, and he wrote his phone number. However, Resident #1 got lost and could not return to the facility. Review of the Sheet and the Incident report revealed that Resident#1 was admitted to the facility on . His health assessment AHCA (form 1823) dated revealed the following diagnoses: History of , , , ; , , ; ; , , ; and , , . Section C of the form documented that Resident #1 experienced physical or sensory limitations which included lack of coordination related to in his right , , Ataxia. , and Apraxia. Resident #1 required supervision with ambulation, bathing, , and transferring. He also needed assistance with self-administration of medication. An updated 1823 with no date signed by an advanced practical registered nurse (APRN) documented that Resident #1 required assistance with ambulation, bathing, toileting, and transferring. He also needed supervision for eating and required total care for and grooming. Additionally, he required medication administration. After Resident #1 was brought to the facility, the Administrator reported on at 2:34 PM that they implemented a new monitoring system which included a better signing log, a door alarm, and consistent supervision to prevent Resident #1 from from the facility. However, review of the elicited measures on at 12:49 PM, revealed that the singing log was not monitored as claimed, the door alarm	A 025		

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A 025	Continued From page 3 was not functioning properly, and Resident #1 successfully left the facility on without reporting his whereabouts. Resident #1 signed out, but he did not write his phone number or where he went. The lack of supervision to Resident #1 was discussed with the Administrator during the exit meeting on . Class III	A 025		
A 030	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,	A 030		

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A 030	Continued From page 4 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 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),	A 030		

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A 030	Continued From page 5 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 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,	A 030		

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A 030	Continued From page 6 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 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	A 030		

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A 030	Continued From page 7 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 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	A 030		

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A 030	Continued From page 8 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 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 records review, and interviews, it was determined that the facility failed to protect the right of 1 of 1 resident (Resident #2) for continued residency and failed to provide a required 45-day	A 030		

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A 030	Continued From page 9	A 030		

discharge notice.

The findings included:

Review of the facility's Admission, Transfer, and Discharge log revealed that Resident #2 was admitted to the facility on . She resided in the facility for over eight years. The resident's clinical record and health assessment (AHCA form 1823) documented that Resident #2 was diagnosed with , History of Right Radial , Left , with surgical intervention. Resident #2 the Coronavirus-19 (COVID-19) on and was subsequently hospitalized.

On , Resident #2 returned to the facility very alert and awake. But, on , Resident #2 was sent to the hospital for and . Meanwhile, while out of the facility, a letter written by the previous Administrator of the facility documented that he had a telephonic communication with Resident #2's power of Attorney (POA) which ended with the POA abruptly hanging up the phone unsatisfied with the responses provided to him regarding the cause of his mother's need to return to the hospital. The letter revealed that the Administrator thereafter decided to not accept the return of Resident #2 to the facility.

Review of the Resident's contract documented in line items15 and 16 that:

If after 60 days of absence, it appears that a Resident's stay in a recognized medical facility outside of the facility is to be permanent in nature,

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A 030	Continued From page 10 the Resident's furniture may be stored at the Resident's expense, and his apartment may be made available to another Resident, and the lease payment shall be terminated. If Resident's condition necessitates a transfer to a Skilled Nursing Facility, Resident will have first priority for admission" to a sister facility capable of providing the higher level of care. Additionally, an interview with the current Administrator who was then the Health Wellness Director, on at 11:15 AM, it became clear that the previous Administrator had given formal order to accept the resident into the facility on the basis that Resident #2 required higher level of care. Yet, no 45-day discharge notice was given to the resident, nor was the resident allowed to explore hospice services at the facility. finally, the Admission, Transfer, Discharge notice documented that Resident #2 was discharged for higher level of care, on Class III	A 030		
A 152	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	A 152		

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A 152	Continued From page 11 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 . This Statute or Rule is not met as evidenced by: Based on observations and interviews, the facility failed to provide an environment with clean furnishings and furniture in the rooms of 4 of 55 residents, and the facility failed to provide clean and functional equipment in the kitchen and furnishings in good condition, in the Residents' common area. The findings included: During a tour of the facility on at 10:00 AM, and on at 1:30 PM the	A 152		

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A 152	Continued From page 12 following were observed: a) , the on the Eastside door with a glass panels, had broken panels, the door was in disrepair. b) , the carpet was disrepair c) The window screen in was dirty and is ripped. A drawer of the Resident's draw was broken. d) The base of the door in was in disrepair. The Balcony's door in was in total disrepair. The screen of the door was in disrepair. e) The seat cover of the chair in was torn. f) There were three chairs on the second-floor hallway that were torn. g) The steam table only had two functioning sections h) The Freezer lid was in disrepair and there was heavy condensation observed in the freezer. The health department had issued citations for the same issues on . i) The deep fryer basket was heavily soiled and rusted. j) There were twenty baking pans that were in disrepair k) The ice maker was broken and not making ice. An interview with the Assistant Kitchen Manager on at 10:01 AM, revealed that lack of equipment limits their work productivity and their effectiveness in meeting Residents 'needs timely. The Administrator reported on at 2:49 PM that they will address all concerns identified. Class III	A 152		