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
	AL11965169	A. BUILDING: _____ B. WING _____	02/20/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
WICKSHIRE PORT ST LUCIE	9825 S. U.S. HIGHWAY 1 PORT SAINT LUCIE, FL 34953

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A 000	Initial Comments An unannounced Complaint survey, complaint #2024016847 & #2025001822 and a Generator Monitoring survey was conducted on at Wickshire Port St. Lucie. The facility had a deficiency related to Complaint #2025001822 identified at the time of the visit.	A 000		
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, 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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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

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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 interviews, the facility failed to demonstrate their Grievance Policy and Procedure for receiving and responding to resident complaints was effective for 2 out of 3 sampled residents (Residents #1 and #2). The findings included:	A 030		

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A 030	Continued From page 6 The facility's Grievance Policy and Procedure notes that the facility "will encourage all residents and family members to express their grievances" and "will be responsive to reasonable concerns and suggestions". It also states that "the resident will be asked if they wish to put an oral grievance in writing" and that the written grievances will be logged and responded to in writing within seven business days. 1. On at 2:22 PM, the representative for Residents #1 stated during a telephone interview that the resident had activated the call bell on at approximately 8:30 PM when the resident could not get off the floor, and that the staff did not respond until approximately 6:30 AM . The resident's representative stated that the Interim Administrator showed her the call bell response time report for that night which showed staff responded to the call bell timely, and that staff were interviewed and reported that no call bell was activated that wasn't responded to. A grievance was documented with statements written by staff, but no response to a call bell inquiry was included. There was no docuementation of an investigation into the operation of the call bell and reponse time for Resident #1's incident. Staff B's statement dated noted "On Thursday night ...when I got to work ...(resident) appeared he was asleep ...around 5 o'clock, he was still in bed". Staff B wrote and dated the statement on Thursday, and documented that the incident occurred on "Thursday" night, not Monday night when it actually happened. Staff B stated during a telephone interview on at 3:00 PM that he checked on the resident during the 11:00 PM to 7:00 AM shift on and observed the resident in bed at the beginning of the shift and again around 2:00 AM. During interview with the	A 030		

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A 030	Continued From page 7 resident on at 2:00 PM, he stated he called all 3 call bells (bathroom, bedroom and pendant) around 8:30 PM on and staff did not come until the morning about 7:00 AM on . The resident's call bell in bathroom was attempted to be activated at this time, but the pull cord was stuck and could not be pulled by this writer. The pendant on the resident's was pressed by him with no light to show if it was activated. The bedroom call bell was activated by this writer pulling the cord. The Environmental Services Manager was asked during interview on at 2:45 PM to show what was alerting on the computer for staff to know that the call bells were activated. The resident's pendant was not showing activated. After investigating, the Manager stated that the resident had 2 pendants and the one he was wearing was the one that didn't work. He stated he checked the resident's pendants this past Monday on , and checks all resident call bells every Monday. There was no documentation to show this was completed and the status of the residents' call bell operation either after the alleged incident or on Mondays. Review of the call bell response time report for identified the call bell in this resident's bathroom to have been activated at 8:33 PM on and "cleared" on at 7:09 AM (635 minutes). 2. On , the 24 hour report of the call bell response times were reviewed and showed Resident #2 activated the call bell on this date at 8:52 AM and that the call bell was "cleared" at 10:45 AM (112 minute response time). The resident stated during interview on at 1:00 PM that staff never respond timely to call bells, and she has waited for long periods of time on multiple occasions, including today (112 minutes). She stated she does not report it	A 030		

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anymore since after telling the front desk representative a few times in the past, nothing has been done about it. Resident #2's call bell was activated by this writer on at 1:14 PM in the resident's room with no response by staff. At 1:35 PM (21 minutes later), the resident was escorted to the elevator by this writer. Staff A stated during interview at 3:10 PM on that she was the employee responsible for the resident's call bell response and went to the resident's room but she wasn't there. She stated it is expected at the facility that staff respond to call bells within 7 to 8 minutes. When Staff A was notified by this writer that nobody came to the resident's room for 21 minutes, she acknowledged that she was busy and did not ask a coworker to assist the resident since she could not respond timely. She stated that the call bell system did not operate properly at times.

During interview with the Interim Administrator on at 11:30 AM, he stated that staff were expected to respond to call bells within 15 minutes. Review of the facility's Emergency Calls and Personal Pendants Policy and Procedure revealed "Residents will be issued a personal pendant...to provide access to resident care associates at all times by simply pressing the button". The policy also notes that "timely assistance will be provided to residents' alert buttons" and that staff are to "answer emergency lights immediately". To ensure the operation of the call bell system is effective, the policy states "a print out of response time is run daily by the Health and Wellness Director (HWD), the Memory Care Program Manager (MCPM), and/or charge nurse on duty (in the HWD or MCPM's absence) to ascertain that all resident calls have been responded to". There was no documentation to show the daily reports with

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A 030	Continued From page 9 untimely call bell responses addressed as required by the HWD. The Administrator was notified of these findings on at 4:30 PM. The facility provided no additional information at the time of the visit. Class III	A 030		