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
	AL11964636	A. BUILDING: _____ B. WING _____	06/03/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
PENINSULA (THE)	5100 WEST HALLANDALE BEACH BLVD HOLLYWOOD, FL 33023

(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 Complaint survey (2025007088), was commenced on and concluded on at Peninsula (The). The facility had deficiencies identified related to Complaint (2025007088) at the time of the survey.	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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A 030	Continued From page 3 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	A 030		

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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 safe safety of the resident. This Statute or Rule is not met as evidenced by: Based on interview and record review, it was determined, the facility failed to implement and follow an effective grievance procedure that demonstrated a system for receipt and resolution of all grievances of residents and/or their representatives. The findings included:	A 030		

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A 030	Continued From page 6 A review of the facility's grievance policy titled, "Complaint-Grievance" (effective) revealed the following information: Policy: The Community will assure a process is in place to investigate a complaint or grievance made by a Resident, Visitor or Staff promptly and to resolve the issue in a professional manner. The Executive Director is responsible for assuring the Complaint-Grievance policy is in place. Procedures: Residents, family members, visitors or staff may submit a complaint or grievance in writing to the Executive Director or make a call to the Resident Relations or Human Relations Hotline. The call in number is on the poster. Staff will be trained to report any Resident or Visitor complaint/grievance promptly to their supervisor or directly to the Executive Director. The Executive Director will investigate a complaint or grievance promptly. The investigation may include interviews of all parties involved and/or a group meeting to listen and discuss the issue as well as discuss suggestions for resolution. An individual conference may be necessary. The goal is to resolve the complaint in a professional manner with agreement by all parties as soon as practical. The Executive Director will assure a log is kept to document each grievance to include the date reported and resolved, nature of the grievance, summary of meeting, individuals involved and	A 030		

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A 030	Continued From page 7 resolution. The Executive Director should follow up after the resolution is in place to assure the plan of correction is successful. During an interview conducted on at 9:45 AM with the Administrator a request was made for the facility's grievance documentation for the past year. A log was provided for review. At this time, the Administrator acknowledged that she was responsible for the receipt and resolution of all grievances. A review of the facility's grievance log revealed on a grievance was filed against Staff C (Maintenance Worker) for stealing a laptop, a bottle of vintage wine, and an , license plate. Further review of the grievance revealed that the resident's power of attorney (POA) contacted law enforcement. There was no documentation for further investigation on the facility's behalf to determine if the incident was or repetitive behavior from the staff. There was also no documentation of interviews with the resident, their representative, or Staff C in the log. The resolution documented by the facility stated that Staff C returned the license plate and the family dropped the charges. There was no documentation of disciplinary action for Staff C documented in the resolution. Additionally, there were no documented follow-up measures to ensure compliance and prevent recurrence. Further review of the facility's grievance log revealed on another grievance was filed against Staff C (Maintenance Worker) for alleged of Resident #2 while on the job. Further review of the documented grievance revealed the facility contacted the authorities and generated an incident report as their actions. The facility documented that Staff C had been	A 030		

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A 030	Continued From page 8	A 030		

suspended pending the completion of the investigation as a resolution. Further review of the grievance revealed that there was no documentation for further investigation on the facility's behalf to determine if the incident was or repetitive behavior from the staff. There was also no documentation for interviews with the resident, their representative, other residents, or Staff C in the log. Additionally, there were no documented follow-up measures to ensure compliance and prevent recurrence.

During an interview conducted on at 9:36 AM with the Administrator, she stated that Staff C (Maintenance Worker) had been suspended immediately as of . She verified this by providing timecards showing Staff C's last day as . The Administrator stated Staff C's suspension was the resolution to the grievance because it was a precaution to protect other residents. She further stated it would be difficult to implement any other actions because the law enforcement investigation was still ongoing.

During an interview conducted on at 3:15 PM with the Administrator, documentation of the facility's investigation into both grievances (theft and alleged) was requested. The Administrator stated she reported the related grievance to the Agency and other required State Agencies (responsible for) and local law enforcement. She further stated she did not complete an internal investigation for this incident because Staff C (Maintenance Worker) was immediately suspended the day of the allegation and law enforcement was involved. Additionally, the Administrator stated she did not have investigation notes for the theft related grievance because the resident's family dropped

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A 030	Continued From page 9 the charges after Staff C returned the , license plate. At this time, the Administrator was informed that the facility failed to implement their grievance policy and procedure to ensure residents' rights are honored and protected, and to ensure residents resided in a safe environment. This was evidenced by the facility's failure to thoroughly investigate and document any additional information outside of the law enforcement involvement. The Administrator acknowledged the findings. Class III	A 030		