

Agency for Health Care Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11966506	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____		(X3) DATE SURVEY COMPLETED 09/17/2025
NAME OF PROVIDER OR SUPPLIER ARBOR AT SHELL POINT (THE)			STREET ADDRESS, CITY, STATE, ZIP CODE 8100 ARBOR COURT FORT MYERS, FL 33908		
(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 for #2025012207 and an emergency power plan monitoring survey was conducted at The Arbor at Shell Point on Deficiencies were identified at the time of survey.	A 000			
A 030 SS=E	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			

AHCA Form 3020-0001

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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A 030	Continued From page 1 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	A 030			

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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. (1) 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 record review, interview, and observation, the facility failed to provide a safe and decent living environment, free from for misappropriation of property for 3 (Residents #1, 2, and 7) of 5 residents reviewed. This type of violates the resident's rights and can lead to emotional distress, loss of trust, and financial harm.	A 030			

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A 030	Continued From page 6 The findings included: Loss of Personal Property policy; effective date _____, POLICY: Shell Point Assisted Living Communities will take reasonable measures to prevent the loss, theft, or damage to personal property of residents, employees, visitors or volunteers. 1. Record review of facility record documentation Missing Item/Theft Investigation form dated _____, outlined the following details: "On Friday morning, _____, I was called to the Arbor for a theft investigation. Resident #1 reported that she was missing cash and jewelry. She had gone to the bank on Wednesday to cash a check. On Friday morning she went in the drawer where she keeps her rings and everything was missing. She then looked for her cash approximately \$500.00 in her nightstand and it was also missing. She said she was missing several rings (about 15), six chains, and a few heirloom pieces. After looking around her room and not finding anything I advised her to call LCSO (Lee County Sheriff's Office)." Record review of Resident #1's Health Assessment Form 1823 (1823) dated _____, showed a medical history and diagnoses of _____, RLS (restless _____), _____, and high _____. It indicated that she uses walker and has a history of _____. Her activities of daily living (ADL's) indicate that she is independent in ambulation, bathing, _____, eating, self-care, toileting, and transferring. Her _____ or behavioral status indicated within normal limits (WNL). During an interview on _____ at 2:20 p.m.,	A 030		

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A 030	Continued From page 7 Resident #1 said she had \$40,000 worth of jewelry and about \$900.00 stolen from her room. Resident #1 said she filed a report with law enforcement, but she hasn't heard anything from them and just figured that if she didn't hear anything from them early on, that they would never find it. Resident #1 said she remembers the day before it went missing, there were 2 girls standing outside her room waiting for her to go to the dining room, and she thought it was weird that the day prior, someone came to talk to her, as no one ever comes to talk to her, because she never asks for any help. Resident #1 said she had suspicion after that - something didn't feel right. Resident #1 said after that incident, someone also tried to enter her apartment at 5:00 a.m. and for a long time she did not feel safe at home, and she reported it to someone at the time. Resident #1 said she never knew the name of the staff members that were outside her door that day, and thinks they may have gotten fired. Resident #1 said she is upset about the nice jewelry that was taken, but more upset over the heirlooms that she lost. 2. Review of Missing Item/Theft Investigation form dated _____ outlined the following details: "On Tuesday afternoon I received a phone call from the Executive Director (ED). She explained to me that Resident #7 was missing a very expensive ring. Approximate value was \$4000. She also explained to me that this is not the first thing to go missing in the past month. Resident #1 had filed a complaint about a month ago about missing jewelry as well. She was concerned because there were two private duty nurses that work for another resident seen _____ around the hallways of the Arbor. When I interviewed Resident #7, she told me that she last saw the ring about two months ago, she hadn't looked for	A 030			

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A 030	Continued From page 8 it lately. She talked to her daughter this morning and the daughter mentioned it, so she decided to look for the ring and it was missing. It is an oval ring, surrounded by pearls with the value of approximately \$4000. I did search her jewelry drawer and did not find it." Record Review of Resident #7's 1823 showed a medical history and diagnoses of .. , .. , (..), (..), (..), RLS (restless ..), (..) with left side and was a risk. Her ADL's indicated that she needed assistance with ambulation, bathing, .. , eating, self-care, toileting, and transferring. During an interview on .. at 1:34 p.m., Resident #7 said that she was on her way out to an .. and didn't have time to talk, although she mentioned that there had not been any resolution to the grievance regarding missing jewelry she filed. 3. Record review of grievance log dated .. showed a grievance filed by Resident #2's son. It indicated that Resident #2 had money missing from her personal wallet. Wallet in purse inside pocket of walker. Approximately \$35.00 - \$20.00 had been added on .. Bills were mixed \$10.00, 5.00, & 1.00. \$20 delivered; 1 - \$10, 1 - \$5, 5 - \$1. Not sure if credit care info was copied. I will monitor activity as a precaution. During an interview on .. at 12:24 p.m., Resident #2's son said that he filed a grievance and spoke with the ED, regarding money missing from his mother's wallet. He said the first	A 030			

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A 030	Continued From page 9 grievance was filed on _____ regarding \$35.00 missing. Then he filed another grievance on _____, after \$30.00 went missing again from his mother's wallet. He said that he asked the ED if this has happened to anyone else in the facility, to which she told him "no". He asked the ED if there were cameras in the building, to which she said there were cameras in the hallways. Resident #2's son said that the camera near his mother's room does not point toward her apartment, and when he asked the ED about it, she said that the camera had not been installed. Resident #2's son said the facility has offered no resolution to the situation or offered to reimburse the money missing, and he has had numerous conversations with the ED. During an interview on _____ at 2:01 p.m., Resident #2 said that she has had money missing from her walker twice now. The first time she went down to the front and filed a grievance with her son, and the second time, her son did it for her. She said there has been no resolution to it and that the facility has not offered to reimburse her. Resident #2 said the facility has said they are thinking about putting in cameras. She does not want to put a camera in her room, because she just doesn't want to feel that she has to go to that extent to feel safe. Resident #2 said after the second time the money went missing, she no longer feels as though her belongings are safe here. She has no idea who it may be - possibly a housekeeper or someone who comes to take her order or deliver her food. Resident #2 said she is in her apartment all the time and she never goes anywhere without her walker, except for when she sits outside on her balcony without it. Resident #2 admits that she would not be able to hear anyone when she is out there, and she no longer keeps her wallet in the same location.	A 030			

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A 030	Continued From page 10 Record review of grievance log showed a grievance filed by Resident #2 on regarding \$35 that was missing from Resident #2 wallet. Further review of the grievance logs revealed no documentation of the second grievance filed by Resident #2 on , regarding the \$30.00 missing from Resident #2's wallet, or an internal investigation into the matter. Class III	A 030			