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
	AL11969089	A. BUILDING: _____ B. WING _____	10/07/2025

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
ARBOR TERRACE COOPER CITY	2580 PINE ISLAND RD COOPER CITY, FL 33024

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A 000	Initial Comments An unannounced Relicensure with Limited Nursing Services (LNS) and a Generator Monitoring survey was conducted at Arbor Terrace Cooper City on . The facility had a deficiency identified related to the Relicensure with Limited Nursing Services (LNS) at the time of the survey.	A 000		
AN277	59A-36.022(2) FAC LNS - Resident Care Standards (2) RESIDENT CARE STANDARDS. (a) A resident receiving limited nursing services in a facility holding only a standard and limited nursing services license must meet the admission and continued residency criteria specified in Rule 59A-36.006, F.A.C. (b) In accordance with Rule 59A-36.010, F.A.C., the facility must employ sufficient and qualified staff to meet the needs of residents requiring limited nursing services based on the number of such residents and the type of nursing service to be provided. (c) Limited nursing services may only be provided as authorized by a health care practitioner's order, a copy of which must be maintained in the resident's file. (d) Facilities licensed to provide limited nursing services must employ or contract with a nurse(s) who must be available to provide such services as needed by residents. The facility's employed or nurse must coordinate with third party nursing services providers to ensure resident care is provided in a safe and consistent manner. The facility must maintain documentation of the qualifications of nurses providing limited nursing services in the facility's personnel files. (e) The facility must ensure that nursing services	AN277		

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AN277	Continued From page 1 are conducted and supervised in accordance with Chapter 464, F.S., and the prevailing standard of practice in the nursing community. This Statute or Rule is not met as evidenced by: Based on review of policy and procedure, observation, interview and record review, the facility failed to follow Resident Care Standards for 1 of 2 sampled residents reviewed for Limited Nursing Services (LNS), Resident #5. The findings included: Review of the facility policy titled Limited Nursing Services provided by the Administrator reviewed documented in the Policy Statement: A Community with a limited nursing services license may provide the following nursing services in addition to any nursing services permitted under a standard license. Procedures: 1. Limited Nursing Services Provided: ....K. Caring for casts, braces and , ...2. Limited Nursing Services may only be provided as authorized by a health care provider's order, a copy of which must be maintained in the resident's file ....4. Records: ...B. Nursing progress notes must be maintained for each resident who receives limited nursing services .... Review of the facility policy titled Documentation Guide: Chart Note Documentation provided by the Resident Care Director (RCD) reviewed documented in the Policy Statement: ...10. Refusal of care, treatment, or medications - If a Resident ....refuses care, treatment, or medications, this must be documented in the Observation Notes along with any counseling the Resident received. If this was done by the Wellness Nurse or the RCD, then that person should write the note.	AN277		

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AN277	Continued From page 2 Resident #5's move-in date to the facility's locked Memory Care Unit was on with diagnoses which included 's , and , . His admission date for LNS was: . Resident #5 was ordered a left brace (assistive device) on related to " changes and ," in his left . During an observational tour conducted on at 10:16 AM of the Memory Care Lakeview Neighborhood on the 2nd floor, Resident #5 was observed sitting up in a recliner chair, in the dining area with the television on by two (2) Agency for Healthcare Agency (AHCA) Surveyors. However, closer observation revealed that Resident #5 exhibited some "mild" lower left , but he was not observed wearing his "soft" left "Velcro" brace (assistive device) designed to help stabilize, provide support and protection to his left ; it had not been applied until Surveyor inquisition. On at 10:20 AM a brief interview was conducted with Resident #5, utilizing an AHCA Spanish Surveyor as an interpreter. Resident #5 was asked, in Spanish, if he was currently wearing his left brace (assistive device). He slowly held up his left arm, and stated, in Spanish, that his left upper area had some , , at a , level. But, Resident #5 was unable to further any additional information, at the time. During an interview conducted on at 10:19 AM with Staff J, Licensed Practical Nurse (LPN), she was asked why Resident #5 was not currently wearing his left arm brace (assistive device). Staff J initially responded by saying that	AN277		

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the "Certified Nursing Assistant (CNA) was probably unable to find it". Staff J acknowledged that Resident #5 was not currently wearing his left arm brace (assistive device) and she also acknowledged that she had not been made aware of any earlier "issues" that morning regarding the resident not wearing his left brace (assistive device), by the facility's CNA staff member. Staff J went on to reveal that she also had not documented any refusals in the resident's record, by the resident, to wear the left brace (assistive device). Finally, Staff J ended by saying that the left arm brace (assistive device) was ordered to be worn daily in the AM, in order to provide for support, stabilization and protection, to the resident's left .

On at 10:21 AM an interview was conducted with Resident #5's assigned Staff K, CNA, in which she was questioned as to why the resident was not currently wearing his left brace (assistive device). Staff K said that Resident #5 was supposed to wear his left brace (assistive device) every day in the AM. Staff K went on to say, that after showering the resident earlier that morning around 8 AM, that Resident #5 had been "holding" his left arm and she indicated that he "initially" did not seem to want to have his brace put on, when first shown to him. However, Staff K revealed that she had not made any other subsequent attempts to go again, and try to offer to apply the left brace (assistive device) to the resident, as ordered. Lastly, Staff K revealed that she had not reported any of the above information to Resident #5's nurse, at the time.

On Resident #5's Physician's History & Physical (H & P) documented, " ....Left and ..... changes and

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AN277	Continued From page 4 ....Assessment and Plan: Left . Brace to left ...." On the Physician's Order documented, "Apply brace to the left in AM remove at bed time." Interview with Staff G, Memory Care Director, on at 11:49 AM regarding the fact that Resident #5 had not been observed wearing his left brace (assistive device), as ordered by the doctor. Staff G acknowledged that Resident #5 was supposed to be wearing his left brace (assistive device) daily in the AM, as ordered, in order to stabilize, and to provide support and protection, to the resident's left . Record review revealed that there had been no documentation reviewed in the daily nursing progress observational note dated , to document whether or not Resident #5's left brace (assistive device) had been applied and in place at the time, nor was there any documentation noted, at the time, as to the presence and level of Resident #5's , and , of his left . Additional record review also revealed that there had not been any recent documented "refusals" to wear the left brace (assistive device), by Resident #5, since . Further record review also revealed that there was no documentation recorded, in the resident's most recent AHCA Form 1823 Resident Health Assessment for Assisted Living Facility's (ALFs) dated , of Resident#5's left brace. Nor, had this information been captured, in Resident#5's most recent Individual Service Plan	AN277		

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AN277	Continued From page 5 dated . The RCD recognized on at 1:05 PM, that Resident #5 had had some mild left . The RCD also acknowledged that the left brace (assistive device) should have been on and in place in the AM, in order to stabilize, and to provide support and protection, as ordered by the Doctor. The RCD further acknowledged that the application of the left brace (assistive device) should have been documented accordingly. Moreover, the RCD indicated that Resident #5's left brace (assistive device) should have been recorded in his most recent AHCA Form 1823 Resident Health Assessment dated for ALFs, as well as being reflected, in Resident #5's most recent Individual Service Plan dated . Class III	AN277		