

Agency for Health Care Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11965474	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____		(X3) DATE SURVEY COMPLETED 02/05/2026
NAME OF PROVIDER OR SUPPLIER BROOKDALE WEKIWA SPRINGS		STREET ADDRESS, CITY, STATE, ZIP CODE 203 S WEKIWA SPRINGS ROAD APOPKA, FL 32703			
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A 000	Initial Comments A complaint investigation (#2025019237) survey was conducted at Brookdale Wekiwa Springs assisted living facility on . The facility had deficiencies at the time of the survey.	A 000			
A 007	59A-36.006(1) FAC Admissions - Criteria (1) ADMISSION CRITERIA. (a) An individual must meet the following minimum criteria in order to be admitted to a facility holding a standard, limited nursing services, or limited mental health license: 1. Be at least 2. Be free from signs and symptoms of any communicable that is likely to may be transmitted to other residents or staff. AnHowever, an individual who has () may be admitted to a facility, provided that the individual would otherwise be eligible for admission according to this rule. In addition, an individual that exhibits signs or symptoms of or has been diagnosed with a , illness that can be spread through droplet transmission, may be admitted, at the administrator's discretion, if appropriate droplet precautions are implemented by facility staff. Appropriate droplet precautions include recommendations from nationally accepted standards, recommendations from the local county health department, and the facility's prevention and control policies and procedures at the time of the individual's admission. The individual must otherwise be eligible for admission according to this rule. 3. Be able to perform the activities of daily living, with supervision or assistance if necessary. 4. Be able to transfer, with assistance if necessary. The assistance of more than one person is permitted.	A 007			

AHCA Form 3020-0001

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

TITLE

(X8) DATE

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NAME OF PROVIDER OR SUPPLIER

STREET ADDRESS, CITY, STATE, ZIP CODE

BROOKDALE WEKIWA SPRINGS

**203 S WEKIWA SPRINGS ROAD
APOPKA, FL 32703**

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A 007	Continued From page 1 5. Be capable of taking medication, by either self-administration, assistance with self-administration, or administration of medication. a. If the resident needs assistance with self-administration of medication, the facility must inform the resident of the professional qualifications of facility staff who will be providing this assistance. If unlicensed staff will be providing assistance with self-administration of medication, the facility must obtain written informed consent from the resident or the resident's surrogate, guardian, or attorney-in-fact. b. The facility may accept a resident who requires the administration of medication if the facility employs a nurse who will provide this service or the resident, or the resident's legal representative, designee, surrogate, guardian, or attorney-in-fact, contracts with a third party licensed to provide this service to the resident. 6. Not have any special dietary needs that cannot be met by the facility. 7. Not be a danger to self or others as determined by a health care practitioner, or a mental health practitioner licensed under Chapter 490 or 491, F.S. 8. Not require 24-hour licensed professional mental health treatment. 9. Not be bedridden, unless the resident is receiving licensed hospice services pursuant to Section 429.26(1)(c), F.S.; 10. Not have any _____ or 4. _____ A resident requiring care of a _____ may be admitted provided that: a. The resident either: (I) Resides in a standard or limited nursing services licensed facility and contracts directly with a licensed home health agency or a nurse to provide care; or	A 007		

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A 007	Continued From page 2 (II) Resides in a limited nursing services licensed facility and care is provided by the facility pursuant to a plan of care issued by a health care practitioner; b. The condition is documented in the resident's record and admission and discharge logs; and, c. If the resident's condition fails to improve within 30 days as documented by a health care practitioner, the resident must be discharged from the facility. 11. Residents admitted to standard, limited nursing services, or limited mental health licensed facilities may not require any of the following nursing services: a. airway management of any kind, except that of continuous positive airway pressure may be provided through the use of a CPAP or bipap machine; b. Assistance with _____, c. Monitoring of _____ gases, d. Management of post-surgical drainage tubes and _____ vacuum devices; e. The administration of _____ products in the facility; or f. Treatment of surgical _____ or _____ unless the surgical _____ or _____ and the underlying condition have been stabilized and a plan of care has been developed. The plan of care must be maintained in the resident's record. 12. In addition to the nursing services listed above, residents admitted to facilities holding only standard and/or limited mental health licenses may not require any of the following nursing services: a. _____ and _____ performed in the facility; b. _____ performed in the facility. 13. Not require 24-hour nursing supervision, unless the resident is receiving licensed hospice	A 007			

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A 007	Continued From page 3 services pursuant to Section 429.26(1)(c), F.S.; 14. Not require skilled rehabilitative services as described in Rule 59G-4.290, F.A.C. 15. Be appropriate for admission to the facility as determined by the facility administrator. The administrator must base the determination on: a. An assessment of the strengths, needs, and preferences of the individual; b. The medical examination report required by Section 429.26, F.S.; c. The facility's admission policy and the services the facility is prepared to provide or arrange in order to meet resident needs. Such services may not exceed the scope of the facility's license unless specified elsewhere in this rule; and, d. The ability of the facility to meet the uniform fire safety standards for assisted living facilities established in rule Chapter 69A-40, F.A.C. (b) A resident who otherwise meets the admission criteria for residency in a standard licensed facility, but who requires assistance with the administration and regulation of portable _____ or assistance with routine _____ care of _____ site _____ placement, may be admitted to a facility with a standard license as long as the facility has a nurse on staff or under contract to provide the assistance or to provide training to the resident on how to perform these functions themselves. (c) Nursing staff may not provide training to unlicensed persons, as defined in Section 429.256(1)(b), F.S., to perform skilled nursing services, and may not delegate the nursing services described in this section to certified nursing assistants or unlicensed persons. This provision does not restrict a resident or a resident's representative from _____ with a licensed third party to provide the assistance if the facility is agreeable to such an arrangement	A 007			

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A 007	Continued From page 4 and the resident otherwise meets the criteria for admission and continued residency in a facility with a standard license. (d) Notwithstanding any other provisions of this rule, an individual enrolled in and receiving licensed hospice services may be admitted to an assisted living facility pursuant to Section 429.26(1)(d), F.S. (e) Resident admission criteria for facilities holding an extended congregate care license are described in Rule 59A-36.021, F.A.C. This Statute or Rule is not met as evidenced by: Based on interview and record review, the facility failed to ensure 1 of 3 sampled residents (#1) admitted to the assisted living facility was not a danger to self or others and failed to implement the facility's policy and procedures on admissions and discharge. Findings: Review of the Agency for Health Care Administration (AHCA) form 1823 health assessment of the Resident #1 dated [] revealed she posed danger to self and others ([]) (photographic evidence obtained). Review of Resident 1's demographic sheet revealed her admission and discharge dates: Review of the facility's Admissions and Discharge policy indicated, "Admission criteria. An individual must meet the following minimum criteria to be admitted into the facility is not a danger to self and others ..." (photographic evidence obtained).	A 007			

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A 007	Continued From page 5 During the interview on _____ at approximately 3 PM, Administrator stated she did not notice that Resident #1's AHCA 1823 health assessment form indicated she was danger to self and others. The Administrator agreed that the resident was not supposed to be admitted to the facility. Class III	A 007			
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	A 025			

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A 025	Continued From page 6 services appropriate to the needs of residents accepted for admission to the facility. (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 the interview and record review, the facility failed to provide appropriate resident supervision for 1 of 3 sampled residents (#1), who exhibited self-injurious behavior by ingesting sanitizer containing . Findings include:	A 025			

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A 025	Continued From page 7 Review of the Agency for Health Care Administration (AHCA) form 1823 health assessment of the Resident #1 dated revealed she posed danger to self and others ([]). Diagnosis: unspecified, , major , (photographic evidence obtained). Review of Resident #1's annual health visit noted dated revealed, " female presents to the clinic to perform her annual physical examination ... She is moving to assisted living facility and needs paperwork filled out and medications reconciled. History of dependence, , and , ... Notes: Patient with drinking up to 12 beers on any given day. She denies this; however, her son who lives with her confirms this. The patient has a memory as well". During the interview on at approximately 12 PM, the Administrator stated Resident #1 was admitted to the assisted living facility unit on and was discharged several days later after drinking sanitizer on several occasions. The resident was admitted to the hospital twice due to intoxication. The Administrator indicated the facility considered whether the resident would be a for a memory care unit after the resident's first admission to the hospital with intoxication but decided not to go ahead with placing the resident in the memory care unit. The resident was discharged from the assisted living facility after the second hospital visit. During the interview on at approximately 1:10 PM, Staff A, Medication	A 025			

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A 025	Continued From page 8 Technician, indicated she found Resident #1 intoxicated in the assisted living facility before the resident's first visit to the hospital on . The cup the resident was using smelled of . Staff A called 911, notified the resident's son, and the Health and Wellness Coordinator. Staff A indicated there were sanitizer stations all over the facility. Staff A indicated sanitizer stations were still present in the facility after Resident #1 returned after the first hospital admission on . During the interview on . at approximately 2:30 PM, the Health and Wellness Coordinator stated Resident #1 was transferred to the hospital with intoxication twice while in the facility. First time was on , when the resident was found drinking sanitizer from her cup. After the resident returned from the hospital on , Resident #1 was found intoxicated in the assisted living facility same day and was sent to the hospital again on . The Health and Wellness Director indicated that sanitizers were not removed from the facility after the first admission of the resident to the hospital. She stated there were no hospital records for the resident's second visit to the hospital, as she was not readmitted to the assisted living facility. The Health and Wellness Director agreed that Resident #1, being admitted to the assisted living unit of the facility, had potential access to within or outside of the facility. During the interview on . at approximately 3 PM, the Administrator stated she could not implement preventive measures to ensure Resident #1 would not drink sanitizer again after the first incident, as she did not receive communication the resident returned	A 025			

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A 025	Continued From page 9 to the assisted living facility after the first hospital visit. The Administrator stated the facility decided to discharge the resident after the second time she was admitted to the hospital (admitted to the hospital the second time with intoxication on). Resident #1 was not readmitted to the assisted living facility after her second hospital visit. Review of the Resident #1's hospital discharge summary from AdventHealth Apopka Emergency dated revealed, "Reason for visit: ; intoxication; Diagnosis: acute intoxication without complication". Review of the Resident #1's care plan revealed "Resident is at risk for consuming substances that are not to be consumed, verify resident's safety frequently. Resident will not consume liquids that are not to be consumed. Redirect resident away from sanitizer dispensers (date initiated). Verify what resident drinks in each cup (date initiated)" (photographic evidence obtained). Class II	A 025			