RICK SCOTT
GOVERNOR

AHCA
FLORIDA AGENCY FOR HEALTH CARE ADMINISTRATION

Better Health Care for all Floridians

ELIZABETH DUDEK
SECRETARY

2012

Administrator
Crystal Gem Manor ALF
10845 West Gem Street
Crystal River, FL 34428

Dear Administrator:

Re: CCR #2012006058

This letter reports the findings of a state licensure survey that was conducted on . 2012 by representative(s) of this office.

Enclosed is the provider's copy of the State (3020) Form, which indicates the deficiencies that were identified on the day of the visit. Section 408.811(4), Florida Statutes, requires that you correct these deficiencies within thirty days of the date of this letter unless the Agency has approved another timeframe. Staff from this office will conduct a review after . 2012 to verify that the necessary corrections are in place to correct the deficiencies identified on your survey.

The Quality Assurance Questionnaire has long been employed to obtain your feedback following survey activity. This form has been placed on the Agency's website at http://ahca.myflorida.com/Publications/Forms.shtml as a first step in providing a web-based interactive consumer satisfaction survey system. You may access the questionnaire through the link under Health Facilities and Providers on this page. Your feedback is encouraged and valued, as our goal is to ensure the professional and consistent application of the survey process.

Thank you for the assistance provided to the surveyor(s). Should you have any questions please call this office at (386) 462-6201.

Sincerely,

Anne Hipp, HSQF

Kriste J. Mennella
Field Office Manager

KJM/amw

Enclosure

Headquarters
2727 Mahan Drive
Tallahassee, FL 32308
http://ahca.myflorida.com

Alachua Field Office
14101 N W Hwy 441, Suite 800
Alachua, FL 32615-5669
Phone (386) 462-6201; Fax (386) 418-5300

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STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	AL11966445	A. BUILDING _____ B. WING _____	

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
CRYSTAL GEM MANOR ALF	10845 WEST GEM STREET CRYSTAL RIVER, FL 34428

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A 000	Initial Comments	A 000		

On : an unannounced Assisted Living Facility (ALF)complaint survey for CCR # 2012006058 was conducted, the facility was found to not be in compliance with Chapter 429, Part I, F.S. and 58A-5, F.A.C.

A 030 SS=D	58A-5.0182(6) FAC; 429.28 FS Resident Care - Rights & Facility Procedures	A 030	

(6) 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 Council shall be posted in full view in a freely accessible resident area, and included in the admission package provided pursuant to Rule 58A-5.0181, F.A.C.
(b) In accordance with Section 429.28, F.S., the facility shall have a written grievance procedure for receiving and responding to resident complaints, and for 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 address and telephone number for lodging complaints against a facility or facility staff shall be posted in full view in a common area accessible to all residents. The addresses and telephone numbers are: the District Long-Term Care Ombudsman Council, 1(888)831-0404; the Advocacy Center for Persons with , 1(800)342-0823; the Florida Local Advocacy Council, 1(800)342-0825; and the Agency Consumer Hotline 1(888)419-3456.
(d) The statewide toll-free telephone number of the Florida Hotline " 1(800)96 or 1(800)962-2873 " shall be posted in full view in a

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A 030	Continued From page 1	A 030		

common area accessible to all residents.
(e) The facility shall have a written statement of its house rules and procedures which shall be included in the admission package provided pursuant to Rule 58A-5.0181, F.A.C. The rules and procedures shall address the facility ' s policies with respect to such issues, for example, as resident responsibilities, the facility ' s and tobacco policy, medication storage, the delivery of services to residents by third party providers, resident elopement, and other administrative and housekeeping practices, schedules, and requirements.
(f) Residents may not be required to perform any work in the facility without compensation, except that facility rules or the facility contract may include a requirement that residents be responsible for cleaning their own sleeping areas or apartments. If a resident is employed by the facility, the resident shall be compensated, at a minimum, at an hourly wage consistent with the federal minimum wage law.
(g) The facility shall 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 shall not prohibit 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 shall be, at a minimum, an accessible telephone on each floor of each building where residents reside.
(h) Pursuant to Section 429.41, F.S., the use of physical shall be limited to half-bed rails, and only upon the written order of the resident ' s physician, who shall review the order biannually, and the consent of the resident or the resident ' s representative. Any device, including half-bed rails, which the resident chooses to use

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and can remove or avoid without assistance shall not be considered a physical . . . . .

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 achieve 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 facility to provide safekeeping for funds as

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provided in s. 429.27.
(g) Share a . . . . . 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) Access to adequate and appropriate health care 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 shall be set forth in writing. 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

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active in, and to associate with advocacy or special interest groups.

This Statute or Rule is not met as evidenced by: Based on interview and observation the facility failed to ensure all the facility residents (33 of 33) live in a safe and decent living environment and failed to treat 2 (resident #1 and #2) of 6 sampled residents with consideration and respect and with due recognition of personal dignity during a meal.

Findings:

1. Interview and facility tour with the administrator on [redacted]: at 9:10 AM revealed she was aware that the facility had a problem with small frogs entering the building. During the tour of the facility, the administrator stated "we have been having a real problem with the tiny frogs entering the building, especially when it rains; we have tried putting stuff on the sidewalks but the rain washes it away." The administrator stated "it's quite a sight to see the residents trying to step on the frogs; but it's so hard to clean them up after they are smashed on the floor." The administrator added "we have had the maintenance man working on it but they still get in."

Observation of the facility on [redacted]: at 9:20 AM revealed 15 smashed [redacted] frogs throughout the facility. Follow-up observation at 3:45 PM revealed over 50 live frogs on the floor in the common area by the nurses station and more entering the facility through a hole between the door and door jam nearest to the nurses station. During the observation, 3 frogs were stepped on

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by residents and one frog jumped on resident #5's leg.

Interview with the administrator on [redacted] at 3:55 PM revealed that she stated "we have tried to stop the frogs but they still get in." The administrator added "I didn't know there was a hole in the door allowing them to come in when the door is closed."

2. Observation of lunch on memory unit on [redacted] at 11:55 AM revealed the dining area was monitored by 3 staff. Resident #2 stated, "its [redacted] in here" and twice stated, "don't take anybody's food," to another resident taking food off another resident's plate. Resident #2's initial attempt to confront the resident was not heard by staff due to the volume of the music in the dining area.

Interview with resident #2 at 12:05 PM revealed she stated the staff play, "their" music loudly "all the time."

Observation of the dining [redacted] lunch on [redacted] at 12:10 PM revealed a boom box radio tuned to station 97X (Rock). One resident (#1) in the rear of the cafeteria attempted to call for a staff but was unable to be heard over the music playing approximately 4 feet from her table. The resident raised her hand for over a minute before a staff attended to her. Observation of resident #1 on [redacted] at 12:12 PM revealed she had multiple food items on her lap and was attempting to spoon out ice cubes from her cup. Staff walked past resident #1 three times during the observation and did nothing to assist her. Resident #1's plate was on a tray approximately 12 inches away from the resident and the resident's wheel chair was not pulled up to and under the table.

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Review of resident #1's record revealed a "Hospice" visit note dated [redacted] revealing documentation stating "ALF [Assisted Living Facility] staff report that she (resident #1) continues to need to be fed by ALF staff. The Hospice note also contains the assessments "positive for [redacted] and [redacted]"

Interview with the administrator on [redacted] at 4:05 PM revealed she stated "they are not supposed to be playing their music during meals; they know better." She added "they should have assisted her (resident #1) if she was having problems eating..."

Class: III
Correction Date: [redacted]

A 152 SS=D	58A-5.023(3) FAC Physical Plant - Safe Living Environ/Other	A 152		

(3) OTHER REQUIREMENTS.
(a) All facilities must:
1. Provide a safe living environment pursuant to Section 429.28(1)(a), F.S.; and
2. Must be maintained free of hazards; and
3. Must ensure that all existing architectural, mechanical, electrical and structural systems and appurtenances are maintained in good working order.
(b) Pursuant to Section 429.27, F.S., residents shall be given the option of using their own belongings as space permits. When the facility supplies the furnishings, each resident [redacted] sleeping area must have at least the following furnishings:
1. A clean, comfortable bed with a mattress no less than 36 inches wide and 72 inches long, with

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the top surface of the mattress a comfortable height to ensure easy access by the resident;
2. A closet or wardrobe space for hanging clothes;
3. A dresser, chest or other furniture designed for storage of personal effects;
4. A table, bedside lamp or floor lamp, and waste basket; and
5. A comfortable chair, if requested.
(c) The facility must maintain master or duplicate keys to resident . to be used in the event of an emergency.
(d) Residents who use portable bedside commodes must be provided with privacy during use.
(e) Facilities must make available linens and personal laundry services for residents who require such services. Linens provided by a facility shall be free of tears, stains and not be

This Statute or Rule is not met as evidenced by:
Based on observation and interview, the facility failed to maintain a facility free of hazards for 33 of 33 residents residing in the facility.

Findings:

Interview and facility tour with the administrator on . . . at 9:10 AM revealed she was aware that the facility had a problem with small frogs entering the building. During the tour of the facility, the administrator stated "we have been having a real problem with the tiny frogs entering the building, especially when it rains; we have tried putting stuff on the sidewalks but the rain washes it away." The administrator stated "it's

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quite a sight to see the residents trying to step on the frogs; they but it's so hard to clean them up after they are smashed on the floor." The administrator added "we have had the maintenance man working on it but they still get in."

Observation of the facility on [redacted] at 9:20 AM revealed 15 smashed [redacted] frogs throughout the facility. Follow-up observation at 3:45 PM revealed over 50 live frogs on the floor in the common area by the nurses station and more entering the facility through a hole between the door and door jam nearest to the nurses station, During the observation, 3 frogs were stepped on by residents and one frog jumped on resident #5's leg.

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