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
	AL11965554	A. BUILDING _____ B. WING _____	

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
SANDHILL GARDENS RETIREMENT CE	24949 SANDHILL BLVD. PUNTA GORDA, FL 33983

(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 These are the results for Complaint surveys CCR# 2012007358 and CCR# 2012008723 conducted on : at Sandhill Gardens Retirement Center, an Assisted Living Facility. CCR# 2012007358 had three allegations of which one was substantiated at A0025. CCR# 2012008723 had one allegation which was substantiated with out deficiencies.	A 000		
A 025	58A-5.0182(1) FAC Resident Care - Supervision An assisted living facility shall provide care and services appropriate to the needs of residents accepted for admission to the facility. (1) SUPERVISION. Facilities shall offer personal supervision, as appropriate for each resident, including the following: (a) Monitor the quantity and quality of resident diets in accordance with Rule 58A-5.020, 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 individual. (c) 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; contacting the resident ' s family, guardian, health care surrogate, or case manager if the resident is discharged or moves out. (e) A written record, updated as needed, of any significant changes as defined in subsection	A 025		

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A 025	Continued From page 1 58A-5.0131(33), F.A.C., any illnesses which resulted in medical attention, major incidents, changes in the method of medication administration, or other changes which resulted in the provision of additional services. This Statute or Rule is not met as evidenced by: Based on record review and interviews, the facility failed to provide the appropriate care services to prevent severe weight loss for 1 (Resident #1) of the 3 sampled residents. The findings include: 1. On ..... Resident #1's facility record was reviewed. The record revealed Resident #1 was admitted to the facility on ..... A review of the Agency for Health Care Administration Resident Health Assessment Form 1823, dated ..... shows Resident #1 weighed 135 lbs. on admission to the facility. A review of the facility's Semi-Annual Weight and Height Chart shows Resident #1 weighed 133 lbs. on 11/21/10 and 130 lbs. on ..... Resident #1 was not weighed in ..... (The scheduled weighting month). Records show Resident #1 refused to have her weight taken on ..... and ..... The facility recorded Resident #1's weight at 81 ..... on ..... (49 ..... lower than her previous weight on ..... 2. On ..... the Resident Observation Log was reviewed for Resident #1. The observation entry for ..... states, "[Resident #1] went to the [audiologist] for a check up on her hearing aides. [She was] re-counseled and practiced putting them in her ears." The following entry, dated ..... states, "[Resident #1] Went to [a doctor] for a ..... diagnosis Urticaria. New order, West	A 025		

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A 025	Continued From page 2 Cartivaerate 25 cream. 1 app 2 x a day for 14 days; also 25 mg PO at bedtime. Hold The entry for states, "Received orders for 50 mg." There are no more entries on the observation log for Resident #1 until The entry states, "Met [Resident #1] refused to use cream. Yells for nurse but doesn't need anything." The entry for states, "Refused to weight." The observation record entry for states, "[Resident #1] has been smiling more lately...She yell for nurse-but doesn't need anything." An entry for states, [Resident #1] was yelling and being combative in the dining The documentation on the observation log shows Resident #1 refused to be weighed. The Resident Observation Log reveled the facility arranged for an ARNP to come in to evaluate the Resident #1 on The ARNP documented, "She [resident #1] is very about making bed. She is always angry and while belittling staff and family." The ARNP made note of Resident #1's not fitting properly. Entries on the Resident Observation Log for and reflect a change in medication was discontinued, was ordered and resident was prescribed to regulate levels). The next entry dated states, "Spoke with daughter [Resident #1] in hospital with UTI, now eating." An entry dated documents, "[Resident #1] returned from hospital." The following note, dated on reveals Resident #1 was sent to another hospital because she was, "not responding." The last entry is dated as It states Resident #1 was discharged from this facility and sent to a Skilled Nursing Facility.	A 025		

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A 025	Continued From page 3 3. On Resident #1's Hospital records were reviewed. Resident #1 was admitted to a hospital on The Initial Triage Report shows an estimated weight of 110 for Resident #1. A review of Resident #1's hospital nutritional assessment shows a bed scale weight of 76 lb. On Resident #1 was evaluated by the Hospital's Registered Dietitian (RD). A review of the RD's Adult Nutritional Assessment for Resident #1 reveals a weight of 76 (weight source: bed scale,) and a of 13.0. The assessment lists 120 as an ideal/reference weight for this resident. The RD's nutritional diagnosis is: underweight related to insufficient PO (by mouth) intake as evidence of low The RD's assessment comment reads, (patient) bedscale reads this weight [76] will not answer any of my questions, SHE is sitting with her food untouched. RN States can feed herself. Diet is appropriate. Recommenced 4 oz of Two Cal HN [a medical food supplements] TD (3 times a day). Will monitor." Resident #1 was discharged from the hospital and back to the facility on her weight was recorded as 80 lbs. on discharge records. The Resident's discharge records show patient was switched to a therapeutic diet and educated on dietary needs after discharge. 4. The Chief Operating Officer (COO) and the Administrator were interviewed on at 12:08 p.m. They were questioned about Resident #1's care and weight loss. After reviewing the resident's information, the COO and the Administrator recalled Resident #1's behavior at the facility. They both described Resident #1 as a picky eater who was combative. Neither was able to explain Resident #1's weight	A 025		

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A 025	Continued From page 4 loss or show documentation as to what care and services the resident received to prevent weight loss, such as a change in diet consistency or dietary supplements. 5. On [redacted] at 3:42 p.m. an interview was conducted with Resident #1's Power of Attorney (POA). The POA stated, "She had lost about half of her body weight since I put her there. Just to look at here you knew she was nothing but skin and bones." The POA confirmed the resident had issues eating food, which was caused by her [redacted]. The POA stated, "She [Resident #1] did have some issues eating her foods, because of her [redacted]. She could eat anything like soft foods. She could eat soups and bread. She would eat mashed potatoes. Her meats had to be cut up pretty small." 6. On [redacted] at 2:19 p.m. The ARNP who evaluated Resident #1 on [redacted] was interviewed. She denied being aware of a weight loss issue for this resident. The ARNP stated, "She was little when I met her so I did not know about any weight loss." Class III Correction Date: [redacted]	A 025		

RICK SCOTT
GOVERNOR

AHCA
FLORIDA AGENCY FOR HEALTH CARE ADMINISTRATION

Better Health Care for all Floridians

ELIZABETH DUDEK
SECRETARY

2012

Administrator
Sandhill Gardens Retirement Center
24949 Sandhill Blvd.
Punta Gorda, FL 33983

Dear Administrator:

Re: CCR #2012007358 & 2012008723

This letter reports the findings of two Complaint surveys that were conducted on 2012 by representatives of this office.

Attached 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 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 surveyors. Should you have any questions please call this office at 239-335-1315.

Sincerely,

Harold D. Williams
Field Office Manager

bw
Enclosure

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

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