

Agency for Health Care Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11965357	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED
NAME OF PROVIDER OR SUPPLIER POINTE AT NEWPORT PLACE, THE		STREET ADDRESS, CITY, STATE, ZIP CODE 4733 NORTHWEST SEVENTH COURT BOYNTON BEACH, FL 33426		
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A 000	Initial Comments An Assisted Living Facility complaint survey (CCR# 2012010639) was conducted on The Pointe at Newport Place, had licensure deficiencies found at the time of the visit.	A 000		
A 030 SS=D	58A-5.0182(6) FAC; 429.28 FS Resident Care - Rights & Facility Procedures (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 Disabilities, 42-0823; 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 Abuse Hotline, 1(800)96-ABUSE or 1(800)962-2873 shall be posted in full view in a	A 030		

AHCA Form 3020-0001

TITLE

(X8) DATE

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

STATE FORM

6880

KH34211

If continuation sheet 1 of 7

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A 030	Continued From page 1 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	A 030		

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A 030	Continued From page 2 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	A 030		

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A 030	Continued From page 3 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		A 030		

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A 030	Continued From page 4 active in, and to associate with advocacy or special interest groups. This Statute or Rule is not met as evidenced by: Based on interviews and record review, the facility failed to honor residents' right to present grievances without _____ and failed to demonstrate implementation of the facility's grievance policies and procedures when presented with a complaint for one out of three sampled residents (Resident #3). The findings include: 1. Resident #3 was admitted to the facility in _____ 2011 and _____ in _____ 2012. During an interview conducted on _____ at 10 AM with Resident #3's legal representative, it was revealed she did not receive timely and appropriate responses to inquiries about the related refund, including failure to return her telephone calls and failing to be present for a scheduled appointment. Review of Resident #3's file and facility records on _____ revealed no documentation related to this grievance. In an interview conducted on _____ at 2:07 PM, the facility's Administrator denied not returning the legal representative's calls. He confirmed he was not present when she arrived at the facility for a scheduled appointment in _____ 2012 and no one from the facility contacted her to let her know. He acknowledged she contacted the facility's regional offices for assistance. He further stated, they had not documented this grievance in accordance with facility policy or any resolutions.	A 030			

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A 030	Continued From page 5 2. Review of resident council meeting minutes dated _____ documented, "Dining Residents do not like the servers they rush them and are not helpful. Residents complained that dining staff is talking amongst themselves in another language and they find this disrespectful." Further record review revealed no documentation showing facility's staff had investigated, resolved, or took any other related actions. In confidential interviews conducted _____, two alert and oriented residents stated they recently experienced excessive wait times or felt rushed to eat by the dining _____ In an interview conducted on _____ at 12:07 PM, the Administrator stated complaints are directed to the applicable department head and are to be investigated and resolved in a reasonable immediate timeframe, usually within 24-48 hours depending on the situation. He acknowledged nine days had passed since the Resident Council meeting and stated this should have been addressed by the applicable department head by this time. During an interview at 1:10 PM on _____, he stated, he spoke with the applicable department head and was told she was not aware of any problems in the dining _____, and she thought the complaint related to use of a foreign language in the residents' presence was related to personal care staff. He acknowledged the complaint had not been acted on in accordance with facility protocol. And there was no additional related documentation available for review. Review conducted on _____ of the facility's written policy titled "Resident Grievance Policy and Procedures Policy 2-1a revised _____ Version 1.3" documented the following: "It is the policy of this community to encourage	A 030			

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A 030	Continued From page 6 each resident to exercise their right to voice or present a grievance, concern or suggestion addressing all areas of living. Grievance, concerns or suggestions shall be acknowledged and addressed to the satisfaction of the resident. Procedures: 1. Resident may voice their concerns or suggestions to a staff member at any time. Staff will take the information to their Department Manager who will follow up in the appropriate manner to satisfy the resident's concern. 2. Residents may also present a formal grievance or concern and make suggestions at the monthly Resident Council Meeting. The concern will be directed to the appropriate Department Manager for resident satisfaction with the results of follow up documented in the Resident Council Minutes, if applicable. ... 5. The Management Team is always available to discuss concerns of residents and family. Should a grievance or concern be presented that is difficult for the designated department to rectify to the resident's satisfaction, it will then be brought to the attention of all members involved. A team approach will be utilized to address the resident grievance. 6. A resolution of a grievance, concern and/or suggestion must be documented with a written response to one of the above in 30 days." Further interview with the Administrator, confirmed the facility had not followed its policy and procedures regarding "Resident Grievance".	A 030			



RICK SCOTT
GOVERNOR

Better Health Care for all Floridians

ELIZABETH DUDEK
SECRETARY

, 2013

Administrator
The Pointe At Newport Place
4733 Northwest Seventh Court
Boynton Beach, FL 33426

RE: CCR #2012010639

Dear Administrator:

This letter reports the findings of a complaint survey that was conducted on , 2012 by a representative from 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 2013 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 representative. Should you have any questions please call this office at (561) 381-5840.

Sincerely,


for Arlene Mayo-Davis
Field Office Manager

AMD/lis
Enclosure

