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
	AL11965162	A. BUILDING: _____ B. WING _____	

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
VILLAS AT GULF BREEZE, INC	101 MCABEE COURT GULF BREEZE, FL 32561

(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 On [redacted] - [redacted], a complaint investigation for CCR#2013001141 and CCR#2013002397 was conducted at The Villas Gulf Breeze. The Assisted Living Facility had deficiencies found at the time of the survey. A revist survey was conducted in conjunction with the complaint survey.	A 000		
A 030	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 [redacted], 1(800)342-0823; the Florida Local Advocacy Council, 1(800)342-0825; and the Agency Consumer Hotline 1(888)419-3456.	A 030		

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A 030	Continued From page 1	A 030		

(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 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

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A 030	Continued From page 2	A 030		

biannually, and the consent of the resident or the resident ' s representative. Any device, including half-bed rails, which the resident chooses to use 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

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representative, designee, surrogate, guardian, or attorney in fact authorizes the administrator of the facility to provide safekeeping for funds as 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

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residents ' exercise of this right. This right includes access to ombudsman volunteers and advocates and the right to be a member of, to be active in, and to associate with advocacy or special interest groups.

This Statute or Rule is not met as evidenced by: Based on observation and interview, the facility failed to ensure that every resident has the right to live in a clean environment, free of foul odors for 1 of 3 sampled on the third floor.

Findings include:

1) at approximately 8:45 am, upon entrance to the facility, it was observed by the surveyor that there was a smell of in the facility.

2) at approximately 9:15 am, during the initial tour of the entire facility, when the surveyor arrived on the 3rd floor, there was observed to be an extremely strong, foul smell of to the right of the main staircase. Further observation revealed that the smell was coming from A-D. It was also observed that the surrounding area in the hall also smelled strongly of .

3) at approximately 1:45 pm, a second observation was conducted specific to the 3rd floor in and near A-D. There continued to be a very strong, foul smell of in the the surrounding area.

4) at approximately 2:00 pm, an interview was conducted with the Administrator. She was

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asked about the strong smell of on the 3rd floor in and around A-D. She stated "we have 2 residents in that this goes on all the time. We do to remove the and clean it at least once a week, but it continues to be a problem. We condidered taking the carpet out and replacing it with linoleum, but we did that in another the floor just absorbed the ".

5) at approximately 2:05 pm, an interview was conducted with the Activities Director. She was asked if she was aware of the smell from A-D and she stated "yes". She named the resident and stated, "she is a behavior resident and refuses to let anybody change her. She says she can do it herself, but she won't. The worse her behavior is, the more it occurs. Her daughter has been involved and for a while it gets better, but then she will get mad and it starts again. It doesn't help that both residents are and I think the Administrator has considered putting them in separate ".

6) at approximately 2:10 pm, an interview was conducted with the Maintenance Director. He was asked about the of the from A-D. He stated that they do it a couple of times a week, "when they call", but it doesn't last too long.

7) at approximately 2:30 pm, an interview was conducted with the daughter of Resident #9, who lives in a the immediate vicinity of A-D. She was asked if she visits often and if she has noticed the smell of in the area around her mother's , and if her mothers . She stated, "yes, I come all the time and it's always like that, and I can tell when I walk in the door". She stated that she

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keeps deodorizer in her mothers it doesn't smell.

8) at 8:00 am, surveyor entered facility for day two of survey and went immediately to the 3rd floor, to -D. Again observed extremely strong odor in the surrounding area. The maintenance personnel was again extracting uring and cleaning the carpet.

9) at approximately 8:30 am, an interview was conducted with Resident #10, who lives in the immediate vicinity of A-D. He was asked if he has noticed the smell of . He stated, " oh boy have I". He was asked if he had spoken to anybody about it and he stated, "I have talked to the girls about it but not anybody higher up. They know about it".

10) at approximately 8:35 am, an interview was conducted with Resident #11, who lives in the immediate vicinity of A-D. He was asked if he has noticed the smell of the . He stated, "yes, you smell it all the time....all the time. They know about it because they are always doing something in there but it doesn't help".

11) at approximately 8:45 am, an interview was conducted with Staff B. She was asked about the smell in A-D and replied, "yep, it is bad and has been for a long time". She stated that she calls housekeeping all the time about that when she was asked if any of the residents have complained about it to her she stated, "yes, a lot of the have said something".

12) at approximately 10 am, an interview

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was conducted with the Administrator. She stated that they have been extracting and cleaning the carpet for over a month. She stated that "her behavior gets better and it's not as bad, but when one of them acts up, the other one does. I just don't know what else to do about it. They went in this morning and extracted again".

13) at approximately 1:00 pm, observation was conducted of A-D by surveyor, after the was completed. The to have a very strong odor of , as well as a smell of cleaner. The area surrounding the to have a slight smell of foul .....

Class III

AHCA
FLORIDA AGENCY FOR HEALTH CARE ADMINISTRATION

RICK SCOTT
GOVERNOR

Better Health Care for all Floridians

ELIZABETH DUDEK
SECRETARY

, 2013

Administrator
Villas At Gulf Breeze, Inc
101 McAbee Court
Gulf Breeze, FL 32561

RE: CCR #2013001141 and 2013002397

Dear Administrator:

This letter reports the findings of a complaint survey and a revisit survey conducted on , 2013 by representative(s) of this office. Enclosed is the provider's copy of the Statement of Deficiencies and Plan of Correction (State Form 3020), which references the new deficiencies identified during the survey.

You will not receive a copy of this report in the mail; you will only receive this faxed report. **All deficiencies shall be corrected no later than , 2013.**

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. Should you have any questions please call this office at 850-412-4540.

Sincerely,

for Donah Heiberg, M.S.W.
Field Office Manager

DH/kb
Enclosure

BBT7

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Tallahassee, FL 32308
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