RICK SCOTT
GOVERNOR

AHCA
FLORIDA AGENCY FOR HEALTH CARE ADMINISTRATION
Better Health Care for all Floridians

ELIZABETH DUDEK
SECRETARY

, 2013

Administrator
Fore Ranch Senior Housing, LLC
Fore Ranch ALF
4511 SW 48th Avenue
Ocala, Florida 34474

Dear Administrator:

This Directed Plan of Correction (DPOC) letter reports the findings of complaint CCR#2013010237 inspection survey conducted on , 2013 and , 2013, by a representative of the Agency for Health Care Administration. Enclosed is the provider's copy of the Statement of Deficiencies, which indicates there were deficiencies noted during the inspection. You are hereby responsible for complying with the Agency's corrective action plan within **ten calendar days** of receipt of this hand delivered report.

The inspection resulted in findings of non-compliance in the following areas:

1) A0030 Resident Rights
The facility failed to provide a safe living environment free from in the memory care unit for one resident, by not adequately supervising a second resident known to have violent behavior, who the first resulting in bodily harm.

You are directed to perform the following:

1. Develop a plan to monitor and redirect residents that wander in the memory care unit into other residents'
2. Conduct a study to determine if the locking mechanisms on residents' doors are adequately meeting the needs of residents to prevent uninvited residents coming into their
3. Prepare a policy and procedure to evaluate memory care residents to ensure they are not a danger to themselves and others and what steps will be taken if such a resident is identified.

Nothing in this DPOC limits the Agency's authority and responsibility to impose administrative sanctions as provided by law.

Thank you for the assistance provided to the surveyor. If you have questions, please contact Steve Burgin, RN, at (386) 462-6201.

Sincerely,

Stephen Burgin for,

Kriste J. Mennella
Field Office Manager

Enclosure

LC/amw

Accepted by: _____

Printed Name: Shree Cribb

Title: Business Office Dir.

Dated: 10-7-13

Thank you for the assistance provided to the surveyor. If you have questions, please contact Steve Burgin, RN, at (386) 462-6201.

Sincerely,

Stephen Burgin for

Kriste J. Mennella
Field Office Manager

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Accepted by:_____

Printed Name:_____

Title:_____

Dated:_____

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11968282	09/30/2013
NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE	
Brentwood At Fore Ranch	4511 Sw 48th Ave Ocala, FL 34474	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAG AND REGULATORY IDENTIFYING INFORMATION)		

List of Tags Cited:

St - A - 0030 - 58a-5.0182(6) Fac; 429.28 Fs - Resident Care - Rights & Facility Procedures S-S= G

Specific Tag Findings:

0000-Initial Comments
On . . . . . unannounced complaint survey CCR #2013010237 was conducted at Fore Ranch Assisted Living Facility in Ocala Florida. Discernible deficiencies were identified as a result of this survey. The facility was not in compliance at this time.

0030-Resident Care - Rights & Facility Procedures 58A-5.0182(6) FAC; 429.28 FS
Based on interviews and record reviews and observations the facility failed to maintain a safe environment free from . . . . . for 1 of 7 residents, for resident #1. The facility did not adequately supervise resident #2 who wandered into resident #1 ' s . . . . . pushed her down causing her to sustain injury's.

Findings:

On . . . . . at approximately 11:15 AM interviews were conducted with resident #1 and family members at the hospital. According to resident #1 ' s daughter, her mother was hospitalized because she sustained a broken collar bone and a broken hip when she was pushed down by another resident in the memory care unit at the assisted living facility. Resident #1 stated " that women kicked me and knocked me over, and I hit my head " .

A review of the facility ' s adverse incident report revealed that on . . . . . at approximately 8:00 AM a staff heard resident #1 yelling for assistance from her . . . . . When the Licensed Practice Nurse (LPN) arrived at the . . . . . found resident #1 lying on the . . . . . in pain. Resident #2 was sitting on a chair in resident #1 . . . . . Resident #1 stated to the staff member that resident #2 had knocked her down.

A review of resident #2 ' s record revealed the resident had been evaluated by a psychiatrist for behavior issues and violence in . 2013.

On /2013 at approximately 12:12 PM an interview was conducted with Staff member #I who works in the memory care unit. During the interview staff member #I stated there are 3 certified nurse ' s assistants (CNA' s) and 2 LPNs caring for needs of 40 residents in the morning. She said all the CNA's are busy with residents helping them with their activities of daily living (ADL ' s) and the LPN ' s are administrating medication. She said there are no staff members monitoring the residents that are outside their . . . . . or wandering in the halls. " That ' s why no one saw resident #2 go into resident #1 . . . . . "

On . . . . . at approximately 12:41 PM an interview was conducted with staff member #F. During the interview she was asked if she felt there was enough staff to supervise residents in the memory care unit. She stated, " I wish .....that would be great! " She stated in the morning there isn ' t enough staff to supervise the wandering residents because all the staff members are assisting other residents with their ADL ' s and

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medication. She said she feels rushed when she is trying to assist residents that are not able to do things as quickly as they use to.

Class II