AHCA
FLORIDA AGENCY FOR HEALTH CARE ADMINISTRATION

RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

, 2014

Administrator
Highland Terrace
700 Medical Court East
Inverness, FL 34452

Dear Administrator:

Re: CCR #2014001080

This letter reports the findings of a state licensure survey that was conducted on , 2014 by representative(s) of this office.

Enclosed is the provider's copy of the State (5000-3547) 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 , 2014 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,

Deborah Allison for

Kriste J. Mennella
Field Office Manager

KJM/amw

Enclosure

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Tallahassee, FL 32308
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Alachua, FL 32615-5669
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STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11964467	02/05/2014
NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE	
Highland Terrace	700 Medical Court East Inverness, FL 34452	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAG AND REGULATORY IDENTIFYING INFORMATION)		

List of Tags Cited:

St - A - N276 - 58a-5.031(1) Fac - Lns - Nursing Services S-S= D

0000-Initial Comments

On a complaint (CCR# 2014001080) inspection was conducted at Highland Terrace Assisted Living Facility. Deficient practice was identified at the time of the survey.

N276-LNS - Nursing Services 58A-5.031(1) FAC
Based on observation, interview and record review, the facility allowed an unlicensed employee (Staff A) to assist one of seven residents sampled with a Limited Nursing Service (as defined in 58A-5.031(1) FAC), for which the facility does not hold a license (Resident # 7).

The findings include:

On at approximately 10:50 a.m. Resident #7 was observed in the seating area on the third floor of the facility. Resident #7 was observed seated in her wheelchair with an ankle brace on her leg.

A review of Resident #7 ' s record revealed an Assessment and Negotiated Service Plan Summary (signed on The box which states, " do you need assistance donning any special equipment to clothing such a as a brace, or hose? " The box next to this question is marked. A note below the box states, " Resident [#7] has a plastic brace she wears daily on 1 leg for foot drop. "

A review of Resident #7 ' s physician orders revealed an order (dated on for Resident #7 ' s husband to assist the resident with leg brace. There were no other physician order in Resident #7 ' s record related to the brace prior to (the date of the survey).

A review of the facility ' s licensure information confirmed the facility does not have a Limited Nursing Service License.

A review of Staff A ' s employee record confirmed Staff A is not a licensed nurse.

On at approximately 11:45 a.m. Staff A was interviewed. Staff A (an unlicensed employee) stated she provides assistances putting on Resident #7 ' s leg brace. " We will put her socks on and then we will put her shoe on with the : (Brace). "

On at approximately 3:20 p.m. an interview was conducted with Resident #7 ' s husband. He denied assisting Resident #7 with putting her leg brace every day and every night. He stated this assistance was the responsibility of the facility.

On at 3:49 p.m. The Wellness director was interview. She stated Resident #7 ' s husband assist Resident #7 with the application of her leg brace. When informed Resident #7 ' s husband is does not assist

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Resident #7 with the application of her leg brace the Wellness director replied, " Honestly, I don ' t know what to say. "

Class III