STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11953460	03/25/2014
NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE	
Crystal Bay	2400 Crystal Cove Lane Destin, FL 32541	

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= D

0000-Initial Comments
An unannounced complaint survey for CCR#'s 2014001895 and 2014002365 was conducted at Crystal Bay Assisted Living Facility on . . . . until . . . . Deficient practice was found at the time of the survey.

0030-Resident Care - Rights & Facility Procedures 58A-5.0182(6) FAC; 429.28 FS
Based on observation of memory care unit, family interview, and staff interview the facility failed to provide a clean, sanitary, odor free environment (A wing hallway, . . and . . failed to respond to grievances presented by the Resident Council and family members, and failed to respect the privacy of 3 residents (# 2, #8, and #9) by allowing construction to begin in their . . ahead of schedule and locking them out of their apartment without another apartment being made available for use from early am to late afternoon.

The findings are:

A tour of the building was conducted on . . . . . The hallway leading to the memory care unit was found to have 3 small bags of Quick set and grout about 12 inches high; and 3 glass globes sitting on the floor of the hallway. When the locked unit was entered there was a strong odor of .

On . . . . . about 11:00 am a tour of the locked unit was conducted with the Executive Director (ED) and Maintenance Director. They were asked about the bags and the glass light fixtures. The Maintenance Director confirmed the bags and fixtures had been on the floor since last week. He stated, "No I do not feel it is safe to leave these glass fixtures and bags in the hallway." He confirmed residents used this area.

the surveyor , facility ED and maintenance director then entered the locked unit. When the door was opened the ED and Maintenance Director were asked if they smelled anything. The ED stated, "Yes, I smell incontinence problems ". the group moved to . . . . . and . . . . . on the A wing. The ED confirmed odors in both . . . . . smelling like . . . . .

An interview with wife of Resident #3 who resides in . . . . . 107 was conducted on . . . . . about 1:10 pm . She stated, " The . like . . . . . " She then said she has to call corporate to get the carpet cleaned. She also said, " I have had to bring cleaning supplies from home to clean his . . . . . kitchen floor." An interview was conducted with Resident # 4's daughter on . . about 1:30 pm. She says that she has noticed the smell entering the unit: " It smells like . . . . . I am embarrassed to bring guests here because of the smells." She also said that she has had to clean her mother's . . the bed linens and vacuuming since mid-

Family interviews with Resident #3, and #4's found that both family members have resorted to contacting corporate offices before grievances were addressed. Resident #3's wife stated, "I talked to the previous ED, the interim ED 2-3 times and finally called corporate twice regarding the cleanliness of the facility. " Resident # 4's daughter stated, "I have had to call the regional executive director corporate and hotline. I told her 4 weeks ago I

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needed some action regarding the cleaning. As a result the carpets were just cleaned. "

A review of the Resident Council Minutes found several grievances by residents and family members. Some examples included: Laundry not getting done enough, Housekeeping needs improvement, Management they need to get their act together, New fabric furniture, and flooring for locked unit.
Laundry not getting back same day, pieces of laundry missing , Housekeeping freezers need defrosting, , Life enrichment need a place to hit a golf ball, We would like to go on a picnic. Dining I would like steak every now and then. Laundry spots not coming out, Dining breakfast portions too small, same thing every day; Resident care - too bossy, be more polite.
Management we need to see more often; Resident help we need more help; Caregiver (name) take in into dining least 20 minutes early and expecting us to be done by 5:15 pm.

An interview was conducted with the ED on about 2:15 pm . She was shown the Resident Council Minutes and asked about resolutions to the issues listed. She stated, "Yes there should be notations about resolutions about concerns brought up by Residents and families " .

An interview was conducted with the Activities Director on about 2:40 pm . She was asked about the process for concerns presented in Resident Council. She stated, "I would give my boss a copy of Resident Council Minutes. Then I would talk to the department heads and give them the concerns listed. I bring it before the department head and the department finds resolution. " She confirmed there was no indication that anything had been done about resolution of concerns listed in Resident Council minutes. "I am not sure concerns were taken care of or resolved"

During tour of the locked unit about 8:30 am on Tuesday, this surveyor found 3 apartments with signs on the door stating "Do not enter Construction " . The residents for these were observed to be dressed and in the day - Resident # 2, #8, and #9.

During tour with the ED and Maintenance Director they were asked what would happen to the residents in the 3 apartments that were locked. The ED stated, " We have 3 empty apartments used for respite care that we will be moving them into for the night 112, and 115. They were asked to show the surveyor the 3 . A 111 smells strongly of paint and has no furniture. A 112 still needs to be painted and the windows need framing, there is no furniture in the 115 has a worker painting the furniture and odd items all over the place.

The ED was asked if family members were notified of the move. She said the families were notified. Requested to see confirmation of the notification to the families. An email was provided sent to the ED on at 6:02 pm. The email indicates the families were notified that their family members would be moved to the respite on Wednesday.
On about 12:50 pm Resident #2's son-in-law stated, " We are locked out of her : are we supposed to do now. We were told the move would start tomorrow. No one can tell me anything about where she will be going. "

Surveyor found the ED and asked what time the respite would be ready for residents #2, #8, and #9. Both went back to locked unit. has 4-5 men working but it is not finished. is still not ready. I still smelled strongly of paint.
3:30 pm Resident #2 has just been moved into . She has necessary items for the night. She is distressed and communicated on her communication board that she is afraid of getting lost. She was shown how

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to push her necklace pendant and staff showed up within minutes.
Residents #8 and #9 according to Ed would be in their [illegible] very shortly.

Class III

AHCA
FLORIDA AGENCY FOR HEALTH CARE ADMINISTRATION

RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

, 2014

Administrator
Crystal Bay
2400 Crystal Cove Lane
Destin, FL 32541

Dear Administrator:

Re: CCR #2014001895, 2014002365

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

Attached 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. Should you have any questions please call me at 850-412-4540.

Sincerely,

Patricia McIntire, RN

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

DH/pm
Enclosure
XG90

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