

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER: AL11953701	(X3) DATE SURVEY COMPLETED 08/13/2014
NAME OF PROVIDER OR SUPPLIER Ashton Place	STREET ADDRESS, CITY, STATE, ZIP CODE 4151 Ashton Road Sarasota, FL 34233	
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
St - A - 0162 - 58a-5.024(3) Fac - Records - Resident S-S= B

Specific Tag Findings:

These are the results of an unannounced Complaint Survey, CCR# 2014005395 which was conducted at Ashton Place an Assisted Living Facility located in Sarasota, Florida. This complaint survey was conducted on The census the day of the survey was 40 residents.

There were 3 allegations of which 1 was confirmed with citations.

The following is a description of non-compliance:

0030-Resident Care - Rights & Facility Procedures 58A-5.0182(6) FAC; 429.28 FS
Based on interview and record review the facility failed to ensure 2 (Residents #1 and #4) of 4 residents' complaints/grievances were documented, investigated, and resolved in a timely manner.

The findings include:

1. On at around 10:30 a.m. an interview was conducted with Resident #4. She stated that last week a Resident Aid yelled at her during the night. She needed to use the the yelled at her and told her she need to stand up and walk to the She is very weak and needs assistance but the insisted she do it herself. The next morning she had one of the RAs write a grievance for her, which she gave to the nurse. She further stated that a female nurse told her later the was reassigned to another assignment and will not be working with her again. No one from management has come to talk to her about what had happen that night and/or given her the findings of their investigation.

An interview was conducted with the facility Manager, Staff B, on at 11:00 a.m. He stated Resident #4 had filed a complaint on (Friday) morning with Staff C who gave to it the nurse, Staff D, who put the complaint/grievance in his box. When he came to work on Sunday this was the first time he heard about the complaint/grievance. He wrote a letter to Staff A telling her this behavior is not acceptable. When he spoke to Staff D, Staff D told him she told Resident #4 that Staff A would not be working with her any more. He also stated that as of this time he has not spoken with Resident #4 about the incident or interviewed any staff involved in the incident. When asked about the letter he had written to Staff A he stated that he he had put a copy of the letter in the employee's file.

On at round 11:20 a.m. Staff B was observed writing a letter to place into Staff A's employee file. He stated he was unable to find the letter he had written so he was writing another letter from memory to place in her file. He further stated that he has no documentation that an investigation was conducted and as of this time he has not started the investigation.

Review of the facility policy and procedure for residents' complaints/grievances state all complaints/grievances will be documented and addressed within 48 hours.

During a second interview on at 4:00 p.m. Staff B confirmed that the facility complaint/grievance policy and procedure state they are required to document all complaint/grievances and address them within 48 hours with the resident filing the complaint/grievance. He again stated they did not document the complaint and has not started the investigation.

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2. A complaint called into the Agency regarding Resident #1 stated: "I had mailed written concerns to the administrator of Ashton Place."

In an interview on at 8:55 a.m. the complainant stated she did not receive adequate resolution to concerns about safety for her family member. The complainant stated she asked for copies of documents which have not been provided and that an explanation of injuries has not been forthcoming

A review of the facility records found there was no documentation of receipt of a complaint or complaints regarding Resident #1. There was no facility complaint log. There was neither documentation of resolution of complaints nor documentation of notification of resolution to the complainant. The closed resident record of Resident #1 did not contain the written complaints submitted by the family.

In an interview on at 11:45 a.m. the Assistant Administrator stated that he was aware of Resident #1's family's concerns regarding missing clothing and stated the administrator reimbursed the family for the replaced clothing. The assistant administrator stated that he addressed the family's concerns about with the daughter but did not document the complaint or resolution.

In an interview on at 3:00 p.m. the Administrator stated that he does not keep a log of complaints. The Administrator stated that he spoke with the daughter of Resident #1 often but did not record the complaints. The Administrator stated that he resolved the issue of missing clothing but has no documentation of the complaint or resolution. He stated that he discussed the injuries, and sustained by Resident #1 with the family but did not log the concerns of the family as grievances.

Class III

0162-Records - Resident 58A-5.024(3) FAC

Based on record review and interview the facility failed to maintain a complete record, including a copy of the resident's contract with the facility, for 1 (Resident #1) of 4 resident records reviewed.

The findings include:

A review of the resident record for Resident #1 revealed that the facility does not have a copy of the resident's contract. Resident #1 was removed from the facility on by family and placed in another Assisted Living Facility.

In an interview on at 3:00 p.m., the Administrator presented the file for Resident #1 and stated the contract was not in the file. The Administrator stated the contract is missing and feels it may have been stolen. The Administrator stated the resident records for all current residents are kept at the nursing desk at the front of the facility in an unsecured cabinet. He stated anyone could have accessed the records.

The Administrator acknowledged the facility does not have a copy of the contract for Resident #1.

Class



RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

. 2014

Administrator
Ashton Place
4151 Ashton Road
Sarasota, FL 34233

RE: CCR #2014005395

Dear Administrator:

This letter reports the findings of a complaint survey that was conducted on . 2014 by representative(s) 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 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 (239) 335-1315.

Sincerely,

Harold D. Williams
Field Office Manager

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Enclosure: State Form

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