STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11966016	10/22/2014
NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE	
Royal Oaks Manor	1833 Seminole Blvd Largo, FL 33778	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAG AND REGULATORY IDENTIFYING INFORMATION)		

List of Tags Cited:
St - A - 0000 - - Initial Comments
St - A - 0030 - 58a-5.0182(6) Fac; 429.28 Fs - Resident Care - Rights & Facility Procedures S-S= D

Specific Tag Findings

Assisted Living Facility

An unannounced Biennial state licensure survey was conducted on , and a Complaint survey, CCR #2014007608.

The Royal Oaks Manor, assisted living facility, had a deficiency at the time of this visit related to the Biennial Survey.

0030-Resident Care - Rights & Facility Procedures 58A-5.0182(6) FAC; 429.28 FS

Based on record review and interview, the facility failed to honor residents ' rights to provide 30 days ' notice of termination of residency from the facility.

Findings Include:

Four of 4 resident contracts reviewed did not honor residents ' rights to provide 30 days ' notice of termination of residency from the facility.

Per review of Resident #3 ' s contract dated , 30 days written notice policy states: " If the resident decides to leave Royal Oaks Manor not under a doctor due to health reasons or the resident, resident ' s responsible party and/or POA is required to give a 30 day written notice. Upon receipt of written notice resident will be responsible for rents to end of the following 30 days (ie: Written notice received on 1 will be responsible for rent until 30. " This statement, exactly as written in the contract, is actually requiring 60 days ' notice, as rent payment is required for two months.

Per review of Resident #1 ' s contract dated , 30 days written notice policy states: " If the resident decides to leave Royal Oaks Manor not under a doctor due to health reasons or the resident, resident ' s responsible party and/or POA is required to give a 30 day written notice. Upon receipt of written notice resident will be responsible for rents to end of the following 30 days (ie: Written notice received on 1 will be responsible for rent until 30. " This statement, exactly as written in the contract, is actually requiring 60 days ' notice, as rent payment is required for two months.

Per review of Resident #4 ' s contract dated , 30 days written notice policy states: " If the resident decides to leave Royal Oaks Manor not under a doctor due to health reasons or the resident, resident ' s responsible party and/or POA is required to give a 30 day written notice. Upon receipt of written notice resident will be responsible for rents to end of the following 30 days (ie: Written notice received on 1 will be responsible for rent until 30. " This statement, exactly as written in the contract, is actually requiring

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60 days ' notice, as rent payment is required for two months.

Per review of Resident #12 ' s contract dated , Discharge Policy states: " If it is determined that a Resident no longer meets the criteria for ALF (Assisted Living Facility) living, then the Administrator will have an assessment done and set up a Care Conference with the family and/or Resident. The family and/or Resident will be given thirty (30) days notice in writing to relocate unless it is felt that immediate placement is necessary. "

Per review of resident records, several contracts include an additional page at the end of the contract entitled " Resident Amendment to contract. " Some of these Amendments are not signed, some are signed (e.g., Resident #1). The Amendment states: " If the resident decides to leave Royal Oaks Manor not under a doctors order due to health reasons or the resident and/or POA is required to give a 30 day written notice. Upon receipt of written notice resident will be responsible for rents to end of the following 30 days (ie: Written notice received on 1 will be responsible for rent until 30.) " This statement, exactly as written in the contract, is actually requiring 60 days ' notice, as rent payment is required for two months.

Per interview with the facility Administrator, she acknowledged awareness that residents have to give only a 30-day notice to vacate, and stated that some of the contracts are old and need to be revised.

Class III

RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

, 2014

Administrator
Royal Oaks Manor
1833 Seminole Blvd
Largo, FL 33778

RE: CCR #2014007608 & Biennnial State Licensure Survey

Dear Administrator:

This letter reports the findings of a complaint survey and a biennial state licensure 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 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 **Paul Brown**, HFES, at 272-552-2000.

Sincerely,

FOR Patricia Reid Caufman
Field Office Manager

PRC/clt
Enclosure: State (5000-3547) Form

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