STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11910377	12/29/2014
NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE	
Grand Villa Of Delray East	14555 Sims Road Delray Beach, FL 33484	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAG AND REGULATORY IDENTIFYING INFORMATION)		

Revisit Corrected Tags:
0030-Resident Care - Rights & Facility Procedures-12/29/2014
0053-Medication - Administration-12/29/2014
0056-Medication - Labeling And Orders-12/29/2014

Revisit Repeat Tags:
0025-Resident Care - Supervision-58a-5.0182(1) Fac
0079-Staffing Standards - Levels-58a-5.019(3) Fac

Revisit New Tags:
0008-Admissions - Health Assessment-58a-5.0181(2) Fac

Specific Tag Findings:

0000-Initial Comments
An unannounced follow-up inspection was conducted from 12-23-14 to 12-29-14 at Grand Villa of Delray East assisted living facility (ALF).

The facility was in not compliance and it did not correct it previously cited deficiencies at the time of this visit. The facility also had an additional finding at A8, Class III.

0008-Admissions - Health Assessment 58A-5.0181(2) FAC
Based on observation, record review and interview, the facility failed to ensure that the health assessments for residents #2, 15, 16, 20 and 21, accurately addressed their physical and mental status, any health-related problems, any physical limitations, and their completed activities of daily living (ADLs) evaluations.

The findings are:

Review of resident #2 ' s record indicated that he was admitted to the facility on with diagnoses including history of multiple with hip , bowel obstruction with incontinence, with , and abnormality of gait. Review of the resident's health assessment dated on indicated that the resident was alert and oriented, required supervision with ambulation using a rolling walker and needed assistance with transfers using contact guard. Further review of the health assessment indicated that he required 1 person assistance with bathing and staff supervision after toileting for clothing adjustment.

In an interview with the nurse manager on at 10:10AM, she stated that resident #2 ambulated with staff supervision for short distances using his walker, but he preferred using his

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wheelchair for mobility the majority of the time. She stated that the resident was independent for all other ADL care and he propelled his wheelchair on his own to the toileting and bathing and that he rarely asked for staff assistance.

In an interview with the nurse manager on at 1:45 PM, she stated that she was aware that resident #2's health assessment indicated that he required 1 person assistance with bathing and after toileting, and staff supervision with ambulation and transfers. She stated that the resident had been showering, toileting and transferring independently, without staff intervention. She stated that the health assessment dated on does not accurately reflect the resident's physical and functional status, and it did not address the resident's previously assessed risk on .

Review of resident #16's health assessment dated on indicated that she was diagnosed with abnormal gait, severe and leg . Review of this resident's health assessment indicated that she had physical limitations of movements in her hips and knees, and needed assistance with ambulation and bathing. Further review of the health assessment's ADL evaluation indicated that the resident used a motorized wheelchair without explanation on how the resident would receive the assistance with ambulation, as concurrently assessed. Review of the resident's Medicaid assistive care services (ACS) certificate dated on indicated that she needed assistance with her ADLs including ambulation, transferring, bathing, dressing, eating, and/or toileting. Further review of the resident's record did not indicate that the facility addressed her health assessment's incomplete and ambiguous ADL evaluation to adequately extend the physician-prescribed care and services.

Review of resident #15's health assessment dated on indicated that she was diagnosed with and Review of this resident's health assessment indicated that she needed assistance with ambulation and transferring. Further review of the health assessment's ADL evaluation indicated that the resident ambulated and transferred independently with a walker without explanations on how the resident would receive assistance with ambulation and transferring, as concurrently assessed. Review of the resident's Medicaid assistive care services (ACS) certificate dated on indicated that the she needed assistance with her ADLs including ambulation, transferring, bathing, dressing, eating, and/or toileting. Further review of the resident's record did not indicate that the facility addressed her health assessment's incomplete and ambiguous ADL evaluation to adequately extend the physician-prescribed care and services.

Review of resident #20's undated health assessment indicated that she was diagnosed with , and lower extremity . Review of this resident's health assessment indicated that she had physical limitations that required her to use a walker for mobility and needed precautions, and needed assistance with ambulation, bathing, dressing, toileting and transferring. Further review of the health assessment's ADL evaluation indicated that the resident used a walker for mobility without explanation on how the resident would receive assistance with ambulation, as concurrently assessed. Further review of the resident's record did not indicate that the facility addressed her undated health assessment which was represented to be the resident's most current and up-to-date health assessment.

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Review of resident #21's health assessment dated on indicated that he was diagnosed with Paget's and . Review of this resident's health assessment indicated that he had physical limitations of and gait and needed precautions. Further review of the health assessment's ADL evaluation indicated that the resident needed supervision with ambulation, dressing, , toileting and transferring without explanation on how the resident would receive this supervision. Further review of the resident's record did not indicate that the facility addressed his health assessment's incomplete and ambiguous ADL evaluation to adequately extend the physician-prescribed care and services.

Class III

0025-Resident Care - Supervision 58A-5.0182(1) FAC

Based on observation, interview and record review the facility failed to adequately provide assisted living services to identified at-risk residents by not properly supervising their care and by not promoting their safety and physical well-being for 5 out of 6 sampled residents (residents #2, 14, 16, 20 and 21).

The findings include:

Review of resident #2's record indicated that he was admitted to the facility on with diagnoses including history of multiple with hip , bowel obstruction with incontinence, with and abnormality of gait. Review of the resident's health assessment dated on indicated that the resident was alert and oriented, required supervision with ambulation using a rolling walker and needed assistance with transfers using contact guard. Further review of the health assessment indicated that he required 1 person assistance with bathing and staff supervision after toileting for clothing adjustment.

In an interview with the nurse manager on at 10:10AM, she stated that resident #2 ambulated with staff supervision for short distances using his walker, but he preferred using his wheelchair for mobility the majority of the time. She stated that the resident was independent for all other ADL care and he propelled his wheelchair on his own to the toileting and bathing and that he rarely asked for staff assistance.

In an interview with resident #2 on at 10:20 AM, he stated that he had been recently hospitalized and now lived in the facility's memory care unit with his wife. He stated that he was very weak and was only able to ambulate independently with the walker for short distances and he preferred to use his wheelchair for mobility. He stated that he propelled himself independently to the toileting and showers, and he used the shower grab bars for support. He stated that he does not ask or need assistance from the staff to perform these tasks.

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In an interview with the nurse manager on at 11:30AM, she stated that resident #2 was independent with his activities of daily living (ADLs), and he did not call for assistance to go to the shower or to the toilet. She stated that the resident was able to ambulate with a walker but he preferred to use his wheelchair approximately 85% of the time. She stated that the resident showered and toileted himself, without assistance and he used the grab bars/ handrails for support when standing in the

In an observation on at 11:35AM, resident #2 transferred independently from his bed to his wheelchair, and he then propelled himself to the dining lunch, without any staff assistance or supervision.

In an interview with the nurse manager on at 1:45 PM, she stated that she was aware that resident #2's health assessment indicated that he required 1 person assistance with bathing and after toileting, and staff supervision with ambulation and transfers. She stated that she had discussed with the resident, the assessment requirements for assistance with bathing and toileting and he had requested to be assessed as independent. She provided a copy of a physician telephone order dated at 1:29 PM which indicated a request for an occupational evaluation to determine the extent of assistance required for the resident. She stated that the resident had been showering, toileting and transferring independently, without staff intervention.

Review of resident #21's health assessment dated on indicated that he was diagnosed with Paget's of the bone, and Review of this resident's health assessment indicated that he had physical limitations of and gait , and needed precautions. Further review of the health assessment's ADL evaluation indicated that the resident needed supervision with ambulation, dressing, toileting and transferring without explanation on how the resident would receive this supervision. Further review of the resident's record did not indicate that the facility addressed his health assessment's incomplete and ambiguous ADL evaluation to adequately extend the physician-prescribed care and services. Review of the resident's physician order dated on indicated that he needed a right knee brace due to a diagnosis of The resident's record did not contain any further information on this ordered knee brace.

In an observation on at 11:15am, resident #21 was walking independently using a rolling walker, without any supervision, from his near the facility lobby to the dining The administrator was present during this observation and he stated that the resident would normally ambulate and transfer independently without any facility staff supervision.

In an observation on at 2:15pm, resident #21 transferred independently from standing to sitting without any supervision, in the patio located on the south end of the facility. In an interview with the resident on at 2:20pm, he stated that he normally walked and transferred independently, that he did not feel physically stable doing those tasks and that the staff did not offer any supervision or

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precautions due to his physical limitations. He stated that walking on his right knee was really painful, that he was not aware of what happened to the knee brace that his physician ordered for him a couple of weeks ago and that it helped him reduce the pain. The resident presented to be alert and oriented at this time.

In an interview with the resident care supervisor on at 3:55pm, she stated that resident #21 received his knee brace approximately 2 weeks ago and about a week ago, his family member told a staff nurse that the large-sized knee brace was too small for the resident. She stated that the facility arranged to exchange the knee brace for an extra-large knee brace about a week ago and it had not arrived yet. She stated that she was not aware of the reason why the new knee brace took approximately a week to arrive and she did not know how it affected the resident not wearing the knee brace because a facility nurse that was currently on vacation, was responsible for this physician-ordered intervention.

Review of resident #14's health assessment dated on indicated that he was diagnosed with Parkinson's and Review of this resident's health assessment indicated that he had physical limitations that required him to use a walker and wheelchair, needed assistance and supervision with his ADLs, and needed risk precautions. Further review of the health assessment's ADL evaluation indicated that the resident needed assistance with transferring without explanation on how the resident would receive this assistance while using a walker. Further review of the resident's record did not indicate that the facility addressed his health assessment's incomplete and ambiguous ADSL evaluation to adequately extend the physician-prescribed care and services.

In an observation on at 11:35 am in the dining resident #14 was transferring independently from sitting to standing using his rolling walker, without any staff assistance. The resident presented to be hunched over and considerably unstable during this transfer.

In an interview with resident #14 on at 11:45 am, he stated that he had to transfer independently all the time because the staff is not around to help him. He stated that he was aware that he was very unstable transferring independently, but there was only one caregiver in the facility that only helped him with bathing 2 times per week. The resident presented to be alert and minimally at this time.

Review of resident #16's health assessment dated on indicated that she was diagnosed with abnormal gait, severe osteopath and leg Review of this resident's health assessment indicated that she had physical limitations of movements in her hips and knees, and needed assistance with ambulation and bathing, and was independent with transferring. Further review of the health assessment's ADSL evaluation indicated that the resident used a motorized wheelchair without explanation on how the resident would receive any physical assistance with ambulation, as concurrently assessed. Review of the resident's Medicaid assuasive care services (AC'S) certificate

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dated on . indicated that the she needed assistance with her ADSL including ambulation, transferring, bathing, dressing, eating, and/or tilting. Further review of the resident's record did not indicate that the facility addressed her health assessment's incomplete and ambiguous ADSL evaluation to adequately extend the physician-prescribed care and services.

In an interview with resident #16 on at 12:10pm, she stated that she used her motorized wheelchair independently to ambulate, without any staff assistance or oversight. She stated that she felt unsteady transferring independently from her wheelchair to standing and to sitting on her stationary chair, but the staff did not offer any assistance or escorting relating to her physical limitations. She stated that the facility recently increased her monthly assisted living charges to include more personal care, but she does not feel she received increased staff assistance. The resident presented to be alert and oriented at this time.

Review of the resident's and facility's record indicated that she was classified at a "personal care 1" level of care, which included daily "escort" by the staff to the , activities and meals as needed.

Review of resident #20's undated health assessment indicated that she was diagnosed with cellulite, , and lower extremity . Review of this resident's health assessment indicated that she had physical limitations that required her to use a walker for mobility and needed precautions, and needed assistance with ambulation, bathing, dressing, tilting and transferring. Further review of the health assessment's ADSL evaluation indicated that the resident used a walker for mobility without explanation on how the resident would receive assistance with ambulation, as concurrently assessed. Further review of the resident's record did not indicate that the facility addressed her undated health assessment which was represented to be the resident's most current and up-to-date health assessment.

In an observation on at 12:10pm, resident #20 was walking independently using a rolling walker, without any facility staff assistance in the first floor hallway behind the west elevator. The administrator was present during this observation and he stated that he understood that the resident was walking independently using a rolling walker and he was unaware of the resident's functional ADSL status. In an interview with the resident care supervisor on at 12:10pm, she stated that it was her understanding that the resident walked independently throughout the facility and transferred independently from standing to sitting and back to standing only the dining , based on her recent observations of the resident. She stated that she was unaware of the resident's assessed functional ADSL status.

In an interview with the administrator on at 2:10pm, he stated that the facility did not have a dedicated resident risk/precaution list, that the facility's resident risk/precautions policies and procedures were included in the "risk management plan", as attached, and that the facility had not developed further interventions to specifically address resident risk/precautions.

Review of the facility's risk management plan indicated that the administrator was ultimately

responsible for the plan's oversight and implementation. Further review of this plan indicated that "risk identification" and "risk analysis" did not specifically consider a resident's health assessment for interventions and it required the facility to measure historical trending with resident ..... Review of this plan's "risk prevention and/or reduction" component identified the facility resident care supervisor as the individual responsible to develop resident care interventions to eliminate or reduce risks.

Class II

0079-Staffing Standards - Levels 58A-5.019(3) FAC
Based on observation, record review and interview, the facility failed to provide adequate staffing to provide resident services and meet their care needs.

The findings are:

Review of resident #2's record indicated that he was admitted to the facility on ... with diagnoses including history of multiple ..... with hip ... bowel obstruction with ... incontinence, ... with ... and ... abnormality of gait. Review of the resident's health assessment dated on ... indicated that the resident was alert and oriented, required supervision with ambulation using a rolling walker and needed assistance with transfers using contact guard. Further review of the health assessment indicated that he required 1 person assistance with bathing and staff supervision after toileting for clothing adjustment.

In an observation on ... at 11:35AM, resident #2 transferred independently from his bed to his wheelchair, and he then propelled himself to the dining ... lunch, without any staff assistance or supervision.

Review of resident #21's health assessment dated on ... indicated that he was diagnosed with Paget's ..... of the bone, ... and ... Review of this resident's health assessment indicated that he had physical limitations of ..... and gait ... and needed ... precautions. Further review of the health assessment's ADL evaluation indicated that the resident needed supervision with ambulation, dressing, ... , toileting and transferring without explanation on how the resident would receive this supervision. Further review of the resident's record did not indicate that the facility addressed his health assessment's incomplete and ambiguous ADL evaluation to adequately extend the physician-prescribed care and services. Review of the resident's physician order dated on ... indicated that he needed a right knee brace due to a diagnosis of ... The resident's record did not contain any further information on this ordered knee brace.

In an observation on ... at 11:15am, resident #21 was walking independently using a rolling walker, without any supervision, from his ... near the facility lobby to the dining ... The administrator was present during this observation and he stated that the resident would normally

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ambulate and transfer independently without any facility staff supervision.

In an observation on at 2:15pm, resident #21 transferred independently from standing to sitting without any supervision, in the patio located on the south end of the facility. In an interview with the resident on at 2:20pm, he stated that he normally walked and transferred independently, that he did not feel physically stable doing those tasks and that the staff did not offer any supervision or precautions due to his physical limitations.

Review of resident #14's health assessment dated on indicated that he was diagnosed with Parkinson's and Review of this resident's health assessment indicated that he had physical limitations that required him to use a walker and wheelchair, needed assistance and supervision with his ADLs, and needed risk precautions. Further review of the health assessment's ADL evaluation indicated that the resident needed assistance with transferring without explanation on how the resident would receive this assistance while using a walker. Further review of the resident's record did not indicate that the facility addressed his health assessment's incomplete and ambiguous ADL evaluation to adequately extend the physician-prescribed care and services.

In an observation on at 11:35am in the dining , resident #14 was transferring independently from sitting to standing using his rolling walker, without any staff assistance. The resident presented to be hunched over and considerably unstable during this transfer.

In an interview with resident #14 on at 11:45am, he stated that he had to transfer independently all the time because the staff is not around to help him.

Review of resident #16's health assessment dated on indicated that she was diagnosed with abnormal gait, severe and leg Review of this resident's health assessment indicated that she had physical limitations of movements in her hips and knees, and needed assistance with ambulation and bathing, and was independent with transferring. Further review of the health assessment's ADL evaluation indicated that the resident used a motorized wheelchair without explanation on how the resident would receive any physical assistance with ambulation, as concurrently assessed. Review of the resident's Medicaid assistive care services (ACS) certificate dated on indicated that the she needed assistance with her ADLs including ambulation, transferring, bathing, dressing, eating, and/or toileting. Further review of the resident's record did not indicate that the facility addressed her health assessment's incomplete and ambiguous ADL evaluation to adequately extend the physician-prescribed care and services.

In an interview with resident #16 on at 12:30pm, she stated that she used her motorized wheelchair independently to ambulate, without any staff assistance or oversight. She stated that she felt unsteady transferring independently from her wheelchair to standing and to sitting on her stationary chair, but the staff did not offer any assistance or escorting relating to her physical limitations.

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Review of resident #20's undated health assessment indicated that she was diagnosed with , and lower extremity . Review of this resident's health assessment indicated that she had physical limitations that required her to use a walker for mobility and needed precautions, and needed assistance with ambulation, bathing, dressing, toileting and transferring. Further review of the health assessment's ADL evaluation indicated that the resident used a walker for mobility without explanation on how the resident would receive assistance with ambulation, as concurrently assessed. Further review of the resident's record did not indicate that the facility addressed her undated health assessment which was represented to be the resident's most current and up-to-date health assessment.

In an observation on at 12:40pm, resident #20 was walking independently using a rolling walker, without any facility staff assistance in the first floor hallway behind the west elevator.

In an interview with the administrator on at 3:30pm, he stated that the facility had a similar amount of residents as when it was last inspected by the Agency in 2014 and that it had not hired additional direct care staff to significantly increase the amount of direct care time each staff member spends with any given resident. He stated that the average number of direct care staff hours per admitted resident had remained similar from to based on the payroll analysis, as attached.

Review of the facility paroll analysis form dated from to indicated that the direct care staff accrued a total of 3,324 hours worked in and 3,408 hours worked on , based on the same 165 admitted residents.

Class III

RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

, 2015

Administrator
Grand Villa Of Delray East
14555 Sims Road
Delray Beach, FL 33484

RE: CCR #2014007823, CCR #2014007531, CCR #2014006798, CCR #2014008836, CCR #2014008637, CCR #2014007413

Dear Administrator:

This letter reports the findings of complaint survey revisits that were conducted on 29, 2014 by representatives of this office.

Attached is the provider's copy of the State (5000-3547) Form, which indicates the previously cited deficiencies that were found corrected and the uncorrected deficiencies that were identified on the day of the revisit. 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 representatives. Should you have any questions please call this office at (561) 381-5840.

Sincerely,

Arlene Mayo-Davis
Field Office Manager

AMD
Enclosure

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