STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11911017	05/14/2015
NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE	
BROOKDALE MARGATE	5600 LAKESIDE DRIVE NORTH MARGATE, FL 33063	

SUMMARY STATEMENT OF DEFICIENCIES
(FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION)

0000 - Initial Comments

An unannounced complaint survey, CCR#2015001541 and CCR#2015001599, was conducted through and The facility had a deficiency identified at the time of the visit.

The complaint survey was conducted in conjunction to Relicensure survey on the same date. See separate report for findings.

Deficient practice was identified at CCR#2015001599.

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

Based on record review and interview, the facility failed to demonstrate that their policy for receiving and responding to resident or family complaints were implemented and followed.

The findings include:

A review of the Facility ' s Grievance Policy and Procedure conducted on reveals the following:
Upon hearing a concern, the staff member who has knowledge of the issue is to bring it to the immediate attention of their supervisor or the Executive Director.
The Executive Director or other manager will log the information on the Grievance Log.
The Executive Director, or Designee will speak to the concerned party to gather information. Listen actively and supportively, without becoming defensive or admitting fault.
Appropriate resolution will be identified, implemented and documented on the log.
Executive Director should respond to the family member within 72 hours regarding the resolution or status of the concern.

In an interview conducted on at 10:10 AM with Resident #2, he stated someone is taking his razors and clothes. The staff are polite but they all say the same thing they will look into it. They say they are going to do something but no one ever gets back to me. I have been telling everyone from the top man down. Everyone says the same thing, they will look into it and no one ever does.

In an interview conducted on at 11:44 AM with Resident #8, he stated he recently inquired about the long term care money paid to the facility and what it is used for. He has yet to receive an answer, he stated he had the meeting 2 weeks ago with the Executive Director and the Business Office Manager; he requested a detailed summary of his account and they just told him they could not do it. In an interview conducted on at 3:15 PM with the daughter of Resident #8, , she stated that her father had a meeting with the Executive Director and the Business Office Manager about 2 weeks ago, but they did not tell him what the long term care funds were for.

In an interview conducted on at 11:45 AM with Resident #1, she stated she had an issue in her old

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SUMMARY STATEMENT OF DEFICIENCIES
(FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION)

0030 Continued From page 1

.She had rats (This was in [redacted] - [redacted], her nephew and herself both complained to the Administrator and they kept saying they were going to take care of it. The Administrator never got back to us about the issue.

In an interview conducted on [redacted] at 9:30 AM with Resident #10, she stated on [redacted], she complained about the situation in the dining [redacted], where some residents were being loud, she went to see the Executive Director, but he was not available , so the front desk receptionist stated she sent an email to Executive Director to follow up. She also stated, on [redacted] she was helping another resident to get back in her apartment, she pressed the emergency response button at 9:30 PM and no one responded until 5:00 AM . She spoke to Executive Director about it.

A review of the grievance log conducted on [redacted] revealed the last entry was made in [redacted] 2014, and there was no evidence of a grievance filed for Residents #1, #2,#8, or #10 or any resolutions to any verbal concerns made by residents and/or the legal guardian.

In an interview conducted on [redacted] at 4:11 PM with the Business Office Manager, he states he cannot remember the meeting with Resident #8. He stated that Resident #8 is always inquiring about his long term care funds, but it has never been documented as a grievance.

In an interview conducted on [redacted] at 4:20 PM with the Executive Director, he confirmed that the grievance log had not been updated since [redacted] 2014 and that the facility had no system in place to indicate the facility is following the grievance policy and procedure (including resolution to both verbal and written concerns/complaints.

Class III

RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

, 2015

Administrator
Brookdale Margate
5600 Lakeside Drive North
Margate, FL 33063

RE: CCR #2015001541 and #2015001599

Dear Administrator:

This letter reports the findings of State Licensure Survey that was conducted on , 2015 and , 2015 and , 2015 by a representative from 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 representative. Should you have any questions please call this office at (561) 381 - 5840.

Sincerely,

Arlene Mayo - Davis
Field Office Manager

AMD/jw
Enclosure

XG90

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