

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 04/06/2016
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11964934	(X3) DATE SURVEY COMPLETED 03/30/2016
NAME OF PROVIDER OR SUPPLIER CABOT RESERVE ON THE GREEN	STREET ADDRESS, CITY, STATE, ZIP CODE 4450 8TH STREET SARASOTA, FL 34232	

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

0000 Initial Comments

These are the results of an unannounced Complaint Survey, CCR# 2016001089 and CCR# 2016002083 conducted on _____ and _____ at Cabot Reserve On the Green an Assisted Living Facility (ALF) in Sarasota, Florida.

There were 3 allegations of which 1 was confirmed with a deficiency.

The following is a description of the deficiency.

0030 Resident Care - Rights & Facility Procedures

Based on interview and record review, the facility failed to ensure 2 (Residents #1 and #5) of 7 residents or their family members who filed a grievance, had that grievance documented, fully investigated, and given a response related to the facility's investigation in a timely manner.

The findings included:

1. On _____ at around 9:30 a.m. an interview was conducted with Staff C related to why all the residents in the locked unit clothing closets had _____ locks. She said Resident #1, who resided in the lock unit, would go into other residents' closets, put their clothing in a plastic bag, and put it in her closet. The Administrator (AD) and the Director of Nursing (DON) had locks put on all the residents' closets so Resident #1 would not take their clothing. Resident #1's daughter would complain to Staff C about her mother's missing clothing items. The daughter of Resident #1 would bring the bags of clothing to administration and ask them why they were in her mother's closet and complain that her mother was missing clothing. Resident #1 was discharged in late _____ 2016 and Staff C doesn't know if Resident #1 had received all of her missing clothing.

On _____ at around 11:30 a.m., a phone interview was conducted with Resident #1's daughter. She said her mother had gone into other residents' closets and put their clothes in plastic bags. Every time she visited her mother at the facility she would bring the plastic bags to administration so they could give the clothing back to the correct residents. She told the DON and AD several times her mother was missing clothing and they would always tell her the items missing are in the laundry. She made several complaints about missing clothing items and when she took Resident #1 home on _____ she had not received the missing clothing items. She has called the facility several times about the missing items and no one from the facility and/or the company has called her back as of this time. She further said she doesn't know how clothing items can go missing in a locked unit. Since her mother could not leave the unit and the facility did all of her laundry they should be able to explain what happened to the

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missing clothing items. Review of the facility's grievance log noted the last entry was dated _____ and there was no entry for Resident's #1 missing clothing items. Review of Resident #1's medical records noted no documentation related to Resident #1's daughter's grievance about her mother's missing clothing. 2. Review of the Resident Council meeting minutes noted during the <u> 4 </u> / <u> 3 </u> / <u> 03 </u> meeting Resident #5 said she was missing 8 pieces of underwear and missing a set of towels. On <u> 3/29/16 </u> at 12:15 p.m. conducted an interview with the Director of Activity (DA). She said she attends all the resident council meetings along with the AD and several other department heads. She is responsible to write down the minutes and resolve items from the previous meetings. She remembers Resident #5 complaining of missing underwear and a towel set. She said she tries to resolve the grievances as she gets them, but is unable to resolve all residents' and/or family members' grievances. She said she gets 25 grievances daily and does not write them down. She further said she was unaware the facility had a grievance log and a Resident Complaint form which is done for resident grievances and/or complaints. On <u> 3/29/16 </u> at 12:45 p.m., an interview was conducted with Resident #5. She said she had lost several of her underwear and her favorite towel set. They have not found them yet and no one has told her what happen to them. She further said she doesn't understand how the facility lost her clothing since they do her laundry separate from the other residents. 3. On <u> 3/29/16 </u> at 2:10 p.m., an interview was conducted with Human Resources (HR). She confirmed the facility's policy is to investigate all concerns/grievances and to keep a log of the investigations. She confirmed the last entry into the grievance log is dated _____ and the AD had told her they have not had a grievance since _____. She further said she remembers Resident #1's daughter complaining of missing clothing items but doesn't know if they had received the missing clothing items. On <u> 3/29/16 </u> at around 2:30 p.m., a phone interview was conducted with the Administrator. He said the facility policy is to document and investigate all grievance/concerns and to inform the complainant of their progress and resolution in a timely manner. He confirmed Resident #1's daughter had complained to him of missing clothing items which were not found and/or resolved as of this time. Resident #1's daughter had asked him to pay for the missing items and he had sent the request to the Director of Operations which has not answered him as of this time. He further said there is no documentation of when Resident #1's daughter and Resident #5's complaints/grievances of their missing clothing items, what clothing items are missing, what the facility did to investigate the grievances, and the resolution of each grievance as required.		

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Class III



RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

January 2016

Administrator
Cabot Reserve On The Green
4450 8th Street
Sarasota, FL 34232

RE: CCR #2016002083 & 2016001089

Dear Administrator:

This letter reports the findings of a state licensure survey that was completed on January 2016 by a representative of this office.

Attached is the provider's copy of the State (5000-3547) Form, which indicates the deficiency that was identified on the day of the visit. Section 408.811(4), Florida Statutes, requires that you correct this deficiency within thirty days of the date of this letter unless the Agency has approved another timeframe. **Please attach a summary of your corrective action for each deficiency, including completion dates, on your letterhead. Also include any additional documentation to support correction of identified deficiencies. Submit summary and documents to the Field Office no later than January 2016.** Staff from this office will conduct a review of the provided corrective action and supporting documentation to verify that the necessary corrections are in place to correct the deficiency identified on your survey, which may include a desk review or onsite revisit.

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 this office at (239) 335-1315.

Sincerely,

Jon Seehawer, R.N.
Field Office Manager

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Enclosure: State Form

XG90

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