RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

, 2016

Administrator
Sunshine Gardens Crystal River LLC
311 4th Ave Ne
Citrus Springs, FL 34434

Re: Biennial Licensure & CCR 2016001326

Dear Administrator:

This letter reports the findings of a revisit survey conducted on , 2016 by a representative of this office. Enclosed is the provider's copy of the Statement of Deficiencies (State Form 5000-3547), which references the uncorrected deficiencies and/or new deficiencies identified during the revisit.

You will not receive a copy of this report in the mail; you will only receive this faxed report. **All deficiencies shall be corrected no later than , 2016.**

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 (386) 462-6201.

Sincerely,

Charles Bory for

Kriste J. Mennella
Field Office Manager

KJM/amw
Enclosure

BBT7

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STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11968316	R
NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE	
SUNSHINE GARDENS CRYSTAL RIVER LLC	**311 4TH AVE NE CITRUS SPRINGS, FL 34434**	

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

0000 Initial Comments

A follow up visit to a biennial and a complaint (CCR#2016001326) survey was conducted at Sunshine Gardens Crystal River (License #12230) on . Sunshine Gardens Crystal River had deficiencies at the time of the visit.

0030 Resident Care - Rights & Facility Procedures

Based on observation and interview, the facility failed to maintain the residents' right to privacy for 1 of 1 residents (Resident #1) reviewed related to privacy.

Findings:

Observation on at 7:57 AM with the facility Director of Resident Services of the lock on Resident #1's , revealed that the lock in place on Resident #1's did not engage after attempts by the surveyor and the facility Director of Resident Services to engage the lock. The surveyor attempted to engage the lock by hand and observed the lock did not move. The facility Director of Resident Services attempted to engage the lock with a half key and the surveyor observed that the lock did not move.

During interview on at 8:56 AM, Resident #1 confirmed that his did not lock and demonstrated that he used a shoe horn to jam between the door and wall to prevent unwanted entry into his .

A second observation at 8:56 AM with the facility Administrator of the lock on Resident #1's , revealed that the lock in place on Resident #1's did not engage after attempts by the surveyor and the facility Administrator to engage the lock.

During interview on at 8:57 AM, the facility Administrator confirmed that the lock on Resident #1's did not operate properly.

Class III

0056 Medication - Labeling and Orders

Based on record review and interview, the facility failed to ensure the accuracy of the Medication Observation Record for 1 of 5 residents (Resident #6) observed during assistance with self-administration of medications.

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Findings

During observation of assistance with self-administration of medications on at 8:39 AM, the label on Resident #6's glucometer was reviewed. The label (dated) documented Resident #6 should have her sugar tested before breakfast and at bedtime on alternate days.

Record review of Resident #6's Medication Observation Record revealed a physician's order (start date /) that Resident #6 should have her sugar tested on Monday, Wednesday and Friday morning before breakfast.

Record review of Resident #6's physician's orders revealed a physician's order (dated) that documented that Resident #6 should have her sugar checked on Monday, Wednesday and Friday morning. This physician's order did not specify that Resident #6 should have her sugar checked before the breakfast meal.

During interview on at approximately 9:11 AM, the facility Director of Resident Services confirmed that the physician's order dated was the most recent physician's order related to when Resident #6 should have her sugar checked available in Resident #6's clinical record. She confirmed that Resident #6's glucometer label, Medication Observation Record and most recent physician's order available in Resident #6's clinical record did not match.

Class III

0152 Physical Plant - Safe Living Environ/Other

Based on observation and interview, the facility failed to ensure the was maintained in good working order for 1 of 1 residents (Resident #1) reviewed for physical plant related concerns.

Findings:

Observation on at 7:57 AM with the facility Director of Resident Services of the lock on Resident #1's , revealed that the lock in place on Resident #1's did not engage after attempts by the surveyor and the facility Director of Resident Services to engage the lock. The surveyor attempted to engage the lock by hand and observed the lock did not move. The facility Director of Resident Services attempted to engage the lock with a half key and the surveyor observed that the lock did not move.

During interview on at 8:56 AM, Resident #1 confirmed that his did not lock

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A second observation at 8:56 AM with the facility Administrator of the lock on Resident #1's , revealed that the lock in place on Resident #1's did not engage after attempts by the surveyor and the facility Administrator to engage the lock.

During interview on at 8:57 AM, the facility Administrator confirmed that the lock on Resident #1's did not operate properly.

Class III