

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11968282	(X3) DATE SURVEY COMPLETED 03/07/2017
NAME OF PROVIDER OR SUPPLIER BRENTWOOD AT FORE RANCH	STREET ADDRESS, CITY, STATE, ZIP CODE 4511 SW 48TH AVE OCALA, FL 34474	

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

0000 - Initial Comments

On , 2017, a complaint survey (CCR#2016014126) was conducted at Brentwood At Fore Ranch Assisted Living Facility (facility license number 122340). During the survey deficient practice was identified.

0008 - Admissions - Health Assessment - 429.26(4-6) FS; 58A-5.0181(2) FAC

Based on record review and interview, the facility failed to obtain omitted information on the Resident Health Assessment (AHCA Form 1823) for 1 of 3 residents (Resident #2).

Findings:

On , a record review was conducted on Resident #2's 1823 Resident Health Assessment. During the review it was observed that page 4 had omitted information regarding what type of assistance the resident needed with his medication.

On at approximately 3:07 PM, an interview was conducted with the Administrator regarding the omitted information on Resident #2's 1823 Resident Health Assessment. She stated she did not know why the omitted information was not obtained.

Class III

0028 - Resident Care - Activities of Daily Living - 58A-5.0182(4) FAC

Based on interview, observation and record review, the facility failed to provide assistance with activities of daily living as needed for 1 of 3 residents (Resident #3).

Findings:

On at approximately 1:04 PM, an interview was conducted with Resident #3, who was observed sitting in a wheelchair. During the interview, she stated she needs assistance with using the . She has a call button and when she uses it it takes them sometimes over 30 minutes to respond to assist her. She stated she is suppose to be on two checks but they do not do it. They just come to the door and sign the sheet and leave (2 hour log was observed on the outside of the).

On , a record review was conducted on Resident #3's Resident Health Assessment (AHCA Form 1823), dated . It was observed she uses a wheelchair for ambulation and needs assistance with toileting.

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 03/29/2017
FORM APPROVED

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On at approximately 2:28 PM, an interview was conducted with the Administrator concerning the facility's response times for call buttons. She stated staff are suppose to respond in 15 minutes to call buttons. She stated, "We also have staff do two checks on certain residents." On, a record review was conducted on the call button response times for Resident #3 for the month of, 2017. It was observed the record showed 21 times the resident waited over 20 minutes for a staff member to respond. 12 of those times the resident waited over 30 minutes for staff to respond (photos available). Class III 0093 - Food Service - Dietary Standards - 58A-5.020(2) FAC Based on record review and interview, the facility failed to have annual menus signed by licensed dietician in the facility for 100 of 100 residents. Findings: On, a record review was conducted on the facility dietary approved menus. It was observed that the menus did not contain the signature of the dietary person who reviewed the menus, or the date. When requested, the kitchen manager could not provide any other signed documentation showing that the current menus were reviewed by the licensed dietician. On at approximately 12:15 PM, an interview was conducted with the kitchen director concerning the annual dated signature of the dietary person of current menus. He stated he is trying to get the dietician to send him a copy of the annual signed review of the current menus because he does not have them. Class III		