

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 04/24/2017
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11953368	(X3) DATE SURVEY COMPLETED 02/23/2017
NAME OF PROVIDER OR SUPPLIER HARBORCHASE OF NORTH COLLIER	STREET ADDRESS, CITY, STATE, ZIP CODE 101 CYPRESS WAY EAST NAPLES, FL 34110	

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

0000 - Initial Comments

An unannounced complaint survey for CCR #2016013944 and CCR #2017000998 was conducted on through at Harborchase of North Collier, an assisted living facility (license #8546) in Naples, Florida.

The complaint for CCR #2016013944 contained 1 allegation which was substantiated with deficiency.

The complaint for CCR #201700098 contained 2 allegations which were substantiated with deficiency.

The following is description of deficiencies.

0025 - Resident Care - Supervision - 429.26(7) FS; 58A-5.0182(1) FAC

Based on observation, record review, and staff interview, the facility failed to notify physician for a change in condition and update the health assessment for 1 (Resident #20) of 3 residents sampled. The facility failed to maintain supervision for 2 (Resident #14 and #15) of 3 residents sampled.

The findings included:

1. Closed record review of Resident #20 revealed resident was under care of Hope Pace. Resident #20 developed an unstageable on right heel noted on . Facility progress notes did not include notation regarding and deferred care to Hope Pace. Resident #20 was not discharged until to Hope Hospice. During interview on at 5:05 p.m., the Executive Director she reported the facility failed to obtain an updated 1823 and she was not aware the resident had an unstageable until .

2. Resident #14 was observed on at 11:35 a.m., with open toe sandals on with Velcro straps across each foot placed too tight. Both feet were observed to be . When asked if her feet hurt she replied, "yes."

The Director of Resident Care reported on at 11:40 a.m., she was not aware resident's shoes were tight.

3. On at 9:00 a.m., Resident #15 was observed having difficulty walking from dining common area on a wet floor housekeeping had just cleaned. There were no caregivers in area.

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Resident #15 used a walker and the Executive Director reported at 9:15 a.m., the resident must have left her walker in the dining Record review of her Health Assessment (1823) dated revealed the resident needed supervision with ambulation, eating, toileting, transferring, Assistance with bathing, dressing, During observation of resident there was no supervision of her ambulation. Class III . 0030 - Resident Care - Rights & Facility Procedures - 58A-5.0182(6) FAC; 429.28(1-2) FS Based on record review and interview, the facility failed to refund money and honor resident's contract regarding refund for 1 (Resident #1) of 4 residents sampled. Based on random observations and interview the facility failed to assure a safe and decent living environment for 2 (Resident #12 and #13) residents. The findings included: 1. Record review of Resident #1 revealed facility business ledger listing Resident #1 move out date as During an interview with Resident #1's wife on at 11:00 a.m., she reported she moved her husband's belongings out of the facility on The resident's contract with the facility outlined the time frame for refund after The Executive Director reported on at 11:30 a.m., there was no facility documentation of a move out date of for Resident #1. Resident #1's spouse was owed a 4 day refund based on move-out date of 2. During tour of the facility on at 11:30 a.m., a soiled vinyl lap buddy was observed being used by Resident #13. On at 11:30 a.m., Resident #12 was observed face on dirty soiled vinyl lap buddy. The Director of Resident Care reported on at 11:35 a.m., that the vinyl lap buddies were difficult to clean.		

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Class III • 0031 - Resident Care - Third Party Services - 58A-5.0182(7) FAC Based on record review and staff interview, the facility failed to have facility policies that require the third party to coordinate with the facility regarding resident's condition and services for 1 (Resident #20) of 3 residents sampled. The findings included: Resident #20 was under care of Hope Pace. Resident #20 developed an unstageable , on the right heel noted on . The facility progress notes did not include notation regarding , and deferred care to Hope Pace. Resident #20 wasn't discharged until to Hope Hospice. During interview on at 5:05 p.m., the Executive Director reported the facility failed to obtain an updated 1823 and she was not aware the resident had an unstageable until . She reported she was not aware if facility had a policy regarding coordination of care. Class III • 0092 - Food Service - General Responsibilities - 58A-5.020(1) FAC Based on observation and interview the facility failed to have 1 staff (Staff A) serve food for 2 (Residents #18 and #19) of 2 residents observed in a safe and sanitary manner. The findings included: During dining observation on at 12:05 p.m., Staff A was observed clearing dirty plates on the dining table. Staff A did not sanitize her hands after, and proceeded to give cups of juice to Residents #18 and #19. Staff A stated on at 12:15 p.m., that she did not sanitize her hands after handling dirty plates.		

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