

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11968820	(X3) DATE SURVEY COMPLETED 05/31/2017
NAME OF PROVIDER OR SUPPLIER ARBOR TERRACE PONTE VEDRA LLC	STREET ADDRESS, CITY, STATE, ZIP CODE 5125 PALM VALLEY RD PONTE VEDRA BEACH, FL 32082	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION)		
0000 - Initial Comments On , 2017, a biennial relicensure survey was conducted at Arbor Terrace Ponte Vedra (License #12680). Deficient practice was identified during the survey. 0032 - Resident Care - Elopement Standards - 58A-5.0182(8) FAC Based on record review and interview, the facility failed to ensure that each direct care worker was present at least twice a year for elopement drills. The findings include: On , a review of the sign in sheets for the elopement drills completed by the facility showed that the facility was conducting elopement drills several times a year. Upon further review, the sign in sheets for the drills conducted in 2016 did encompass all direct care staff. There was no evidence at the time of the survey that every direct care staff member was present at least twice for 2016. A review of the policy regarding elopement drills showed that the facility's plan was to have the employees go through an elopement drill at hire, and at least annually, but it did not indicate they were required to participate in 2 drills per year. During an interview with the Administrator at 1:55 PM on , he confirmed the facility's practice up to this point was to have the staff engage in drills , but not twice per year as required, and acknowledged at 2:20 PM that the facility would need to start doing drills with the direct care staff at least twice a year moving forward. Class III		