STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11966519	R 05/24/2017
NAME OF PROVIDER OR SUPPLIER **INDIGO PALMS AT MAITLAND**	STREET ADDRESS, CITY, STATE, ZIP CODE **740 NORTH WYMORE ROAD** **MAITLAND, FL 32751**	

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

0000 - Initial Comments

Revisits for complaint investigations 201613957, 2017003496, 2017000327 and 2016014670 were conducted on 5/22/17, 5/23/17 and 5/24/17. In addition, complaint investigations #2017003523, and #2017003875 and 2017002603 were conducted the same dates.

Indigo Palms at Maitland Assisted Living facility License #10704 had a deficiency pertaining to 201613957 at the time of the visit.

0162 - Records - Resident - 58A-5.024(3) FAC

DEFICIENCY REMAINED UNCORRECTED

Based on record review and interview, the facility failed to ensure resident records included a complete health assessment (AHCA 1823) every 3 years or after a significant change for 2 of 26 sampled residents (#2 and #3).

Findings:

1. A review of Resident #2's record conducted on . . . . revealed AHCA 1823 dated . . . . It was the only current AHCA 1823 found in the record.

On at 12:45 p.m., Staff V (interim resident care coordinator) confirmed there was not an updated health assessment for Resident #2.

2. Review of the record for resident #3 revealed a Health Assessment (1823) dated . No other Health Assessments were available for review.

In an interview with the interim nursing director on . . . . at 12:20 PM, she stated she understood the Health Assessment was to be updated every 3 years or in the event of a significant change, but there were no more recent Health Assessments (1823) for resident #3.

Class III