

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 02/22/2018
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11965945	(X3) DATE SURVEY COMPLETED 02/01/2018
NAME OF PROVIDER OR SUPPLIER PALM TERRACE ALF	STREET ADDRESS, CITY, STATE, ZIP CODE 5121 EAST SERENA DRIVE TAMPA, FL 33617	

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

0000 - Initial Comments

Assisted Living Facility

Three complaint investigations, (CCR# 2017014059, CCR# 2017014630, and CCR# 2018000188), were conducted at Palm Terrace Assisted Living & Adult Day Care on Palm Terrace Assisted Living & Adult Day Care had deficiencies at the time of the investigation.

(License # 10256)

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

Based on interview and record review, the facility failed to obtain a complete documentation of a health assessment (AHCA Form 1823) within 30 days following the admission to the facility for two (Resident #4 and Resident #6) of three records reviewed.

Findings included:

A review of Resident #4's record showed that they were admitted to the facility on The AHCA Form 1823 for Resident #4 showed no date of examination. Additionally, the form did not indicate what kind of help the resident required with medications (photographic evidence obtained).

A review of Resident #6's record showed that they were admitted to the facility on with their most recent AHCA Form 1823 dated Resident #6's AHCA Form 1823 was blank and did not state if their needs could be met in an Assisted Living Facility which is not a medical, nursing, or facility (photographic evidence obtained).

An interview was conducted with the Acting Administrator at 4:17 PM on concerning the missing information on Resident #4's and Resident #6's AHCA Form 1823. The Acting Administrator reviewed the forms and acknowledged the missing information.

Class III

0093 - Food Service - Dietary Standards - 58A-5.020(2) FAC

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Based on observation, interview, and record review, the facility failed to maintain documentation of a menu reviewed annually by a registered dietitian, maintain a six-month file of menu substitutions (Substitution Log), a 6 month file of dated menus, and conspicuously post a planned menu easily available to the residents.

Findings included:

A dining and food service review was conducted on A request was made to review the facility's registered dietitian approved menu, their file of 6 months of dated menus, and their Substitution Log.

The Acting Administrator was interviewed beginning at 11:03 AM on and they presented a menu last approved on and stated that this was their most current menu (photographic evidence obtained). The Acting Administrator was interviewed again at 11:18 AM on and stated that there was no 6 month file of dated menus. They also pointed to an empty cork board outside of the dining stated that they thought the menu was posted there for the residents to see (photographic evidence obtained).

A review of the Substitution Log showed that the last entered substitution was dated This was discussed with the Acting Administrator at approximately 4:30 PM on

Class III

0152 - Physical Plant - Safe Living Environ/Other - 58A-5.023(3) FAC

Based on observation and interview, the facility failed to provide a safe living environment, free of hazards and with all systems in good repair, for two (Resident #1 and Resident #6) of five residents' observed.

Findings included:

Resident #1's observed on at 10:15 AM and they stated that a light by their bed wasn't working properly due to the electrical outlet. The light was observed and any motion to the cord caused the light to flicker. Residents #1 stated that they told the front desk about their concern. Resident #1 also showed a nightlight encased in a metal grill plate that wasn't working.

Resident #6's observed on at 1:21 PM. The wall behind a recliner in the resident's observed to have a hole of approximately one square foot (photographic evidence obtained).

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The resident was asked if they told anyone about this and they stated that they told maintenance about it. A binder of work order request forms was provided during the survey that showed 13 requests for repairs dated from through . The requests ranged from a light in the shower that needed to be fixed to an overflowing toilet. There was no documentation that any of the issues had been resolved. An interview was conducted with the Maintenance Director at 2:09 PM on concerning the issues in Resident #1's and Resident #6's . The Maintenance Director stated that they were not aware of the issues in Resident #1's . They stated that they were aware of the hole in the wall in Resident #6's . The Maintenance Director was also shown the binder of the 13 work order request forms. The Maintenance Director acknowledged that there was no documentation showing that the issues were resolved. Class III 0163 - Records - Resident, Penalties for Alteration - 429.49 FS Based on record review and interview, the facility failed to ensure that residents' records were not fraudulently altered, defaced, or falsified for one (Resident #1) of three resident health assessments (AHCA Form 1823) reviewed. Findings included: A review of Resident #1's AHCA Form 1823 dated showed on page 1 that the resident required assistance with medication administration and self care tasks (photographic evidence obtained). A review of the AHCA Form 1823 showed that a whitening fluid (such as "Wite-Out") was applied to the self care section changing them all from needing assistance to independent (photographic evidence obtained). The AHCA Form 1823 also showed altering in the section concerning assistance with medication, changing it from needing help with taking their medications to not needing help, and altering needs assistance with self-administration of medications to able to administer medications without assistance (photographic evidence obtained). The Acting Administrator was interviewed on at 1:45 PM and was shown Resident #1's AHCA Form 1823. The Acting Administrator reviewed the form and acknowledged that it was altered.		

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