

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11965335	(X3) DATE SURVEY COMPLETED 04/05/2018
NAME OF PROVIDER OR SUPPLIER BROOKDALE PALMER RANCH	STREET ADDRESS, CITY, STATE, ZIP CODE 5111 PALMER RANCH PARKWAY SARASOTA, FL 34238	

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

0000 - Initial Comments

An unannounced complaint survey for CCR #2018000682 was conducted through at Brookdale Palmer Ranch, an assisted living facility (license #9737) in Sarasota, Florida.

The following is a description of the deficiency.

0079 - Staffing Standards - Levels - 58A-5.019(3) FAC

Based on record review, observation, and interview, the facility failed to ensure enough qualified staff to provide resident supervision, provide resident services in accordance with the resident's scheduled service needs, and provide resident services based on standards of care on 1 night shift, out of 2 night shift staffing records sampled, during, 2018.

The finding included:

On at 10:30 a.m., the facility Health and Wellness Director reported that the first floor and third floor combined had 2 residents that required care and 2 residents that required total care including care. She also reported that the second floor (a Memory Care Unit) had 3 residents that required care and 14 residents that required total care including care. This represents a total of 21 residents in the facility requiring care every 2 hours to address bowel/ incontinence and to address the maintenance of skin integrity.

Review of the nursing staff time records revealed that 1 LPN and 1 Resident Caregiver worked the night shift on (starting at 10 p.m. on and ending at 6:00 a.m. on).

Upon interview on at 3:00 p.m., the Health and Wellness Director stated that there was no additional staff sought/obtained/provided on the night shift because of a low census compared to the present census date of

Review of the census records for revealed 78 residents were registered in the facility. The census for was registered as 79 residents.

A comparative census review revealed that 16 residents, requiring /total care, were in the facility on and are still on the census of One of these residents still resides on the first floor and the remaining reside on the Memory Care Unit/2nd floor. It is important to note that this comparative census review does not include the /total care status of the 24 residents

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 04/19/2018
FORM APPROVED

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discharged during the time-period through According to the facility scheduling records and interview of the Health and Wellness Coordinator , the minimum staffing for the night shift is 1 nurse and 2 resident caregivers and the standard staffing (for the night shift) is 2 nurses and 3 Resident Caregivers. The Health and Wellness Director on at 10:00 a.m., did not acknowledge that the anyone was contacted to assist with the below minimum staffing level on When asked why the staffing was only 1 nurse and 1 resident caregiver on the night shift for 78 residents located on 3 floors, the Director simply stated, "Our census was lower." In addition, Staff B upon interview on stated, "It has been rough now because 2 of the care giving staff are out sick." Staff C stated on , "I think it is getting better. There are 2 RAs (Resident Assistants) on the 2nd floor memory unit on nights and 1 nurse and 1 for first and third floor at night." Staff A stated on , "We are getting there. I think the nurses are doing much better since the 12-hour shift for nurses. Now there is a nurse in the building 24 hours." There was no documented plan in place to prevent a reoccurrence of below minimum staff levels , on the night shift, almost 3 months after this below minimum staffing incident. Class III		