

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 05/24/2018
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11966301	(X3) DATE SURVEY COMPLETED 05/03/2018
NAME OF PROVIDER OR SUPPLIER SUN COAST RETREAT	STREET ADDRESS, CITY, STATE, ZIP CODE 8151 TREELET COURT NEW PORT RICHEY, FL 34653	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION)		
0000 - Initial Comments Assisted Living Facility A Complaint Survey (CCR#: 2018005533 and 2018006417) was conducted at Sun Coast Retreat Assisted Living Facility on . Sun Coast Retreat Assisted Living Facility had a deficiency identified during the survey. (License#: 10530) 0160 - Records - Facility - 58A-5.024(1) FAC Based on record review and interview the facility failed to maintain an up-to-date admission and discharge log. Findings Included: A review of the Facility's admission and discharge log conducted on revealed that the admission and discharge log was not up-to-date. The admission and discharge log included names of five discharged Residents (#10, #11, #12, #13, and #14) with no information regarding the date of discharge, the discharge reason, and the place residents discharged to. The admission and discharge log included names of two Residents (#8 and #9) with no date of discharge noted. The admission and discharge log did not include any data for Resident #1 regarding the date and place resident admitted from. During an interview with the Assistant Administrator conducted on at 02:15pm, the Assistant Administrator acknowledged and confirmed that the log was not updated. Class III		