STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11968716	05/01/2018
NAME OF PROVIDER OR SUPPLIER **INSPIRED LIVING AT PALM BAY**	STREET ADDRESS, CITY, STATE, ZIP CODE **350 MALABAR RD SW** **PALM BAY, FL 32907**	

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

0000 - Initial Comments

A complaint investigation #2018001840 was conducted on . Inspired Living at Palm Bay license # 12617 had deficiencies at the time of the visit.

0010 - Admissions - Continued Residency - 429.26(1&9) FS; 58A-5.0181(4) FAC

Based on observations, record review and interview the facility failed to take in consideration the accuracy of the on the Health Assessment Form-AHCA 1823 for 1 of 4 sampled residents (#4) and retained 2 residents (#5 and #6) who exceeded the criteria for a standard assisted living facility.

Findings:

During the facility entrance on at 9:45 AM resident's 4, 5, and 6 were not identified as being under hospice care. Resident #4 was in the hospital.

1. Observations during the facility tour on at 10 AM noted resident #5 sat in a high back wheelchair. A sign on the apartment door of resident #6, indicated use of .

Resident #5 was admitted . Updated health assessment dated listed , high , stoke and . She was non- ambulatory, needed total with ambulation, dressing, and transferring. Supervision was needed with eating, and toileting. A mechanical soft diet, nectar thick fluids was needed. Doctor visit note dated indicated the resident needed a high back chair due to one sided , and inability to transfer independently.

2. Resident #6 was admitted on . The health assessment report 1823 dated listed diagnoses of , , -Hospice care to assist with all activities of daily living and medications, nectar-thickened liquids were needed. A note dated from Advanced Registered Nurse Practitioner (ARNP) indicated he had 's ; was non ambulatory, required a high back chair, was of bowel and was non- verbal and needed to be fed by staff.

Order dated indicated he was discharged from hospice,
Referral dated indicated to Pathways Program evaluation
Facility note: hospice discharge resident from services.

Observations during lunch at 12:15 PM noted that residents #5 and 6 sat a table with two staff. Staff fed both residents. Staff A fed resident # 6, staff B fed resident #5. Resident #6 was

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reached for things that were not there. Staff A kept the resident's plate out of reach because if not he would just reach for eat and spread/spill it all over the table. Staff A said resident #6 needed total help with all Activities of Daily Living (ADLS), and was not able to transfer. Staff B said resident #5 was the same, they had to do all her ADLS and she could not transfer.

3. Resident #4 was admitted on . Updated health assessment report 1823 dated listed diagnoses of /high and . According to the health assessment, she needed total care with ambulation, bathing, and transferring. Assistance was needed with dressing, and toileting. She needed supervision with eating.

In an interview with the administrator on , 4:15 PM who stated resident # 5 had been given a discharge notice but the son, who lived out of state continued to look for palace in which his elderly aunt could easily drive back and forth, when she visited the resident.

Class III

N277 - LNS - Resident Care Standards - 58A-5.031(2) FAC

Based on observations, interviews and record review the facility failed to obtain a healthcare provider's order for 1 of 6 sampled residents (#6), who received Limited Nursing Services.

Findings:

Observations during the facility tour on at 10 AM noted a sign on the apartment door of resident #6, indicated use of .

Resident record review revealed resident #6 was discharged from hospice services on . The health assessment report 1823 dated listed as a diagnosis. He needed nectar-thickened liquids. Advanced Registered Nurse Practitioner (ARNP) visit note dated indicated . He was non-ambulatory, required a high back chair and was of bowel and , was fed by staff and was non- verbal. The continued review revealed no evidence to confirm that a health care provider order was obtained for the use of the including the concentration and frequency.

In an interview with the Health Wellness Director on , 4:15 PM who stated the facility nurses assisted the resident #6 with the . She was unable to locate the healthcare provider's order.

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Class III

N278 - LNS - Records - 58A-5.031(3) FAC

Based on observations, interviews and record review the facility failed to maintain nursing progress notes for 1 of 6 sampled residents (#6), who received Limited Nursing Services.

Findings:

Observations during the facility tour on at 10 AM noted a sign on the apartment door of resident #6, indicated use of .

Resident record review revealed resident #6 was discharged from hospice services on . The health assessment report 1823 dated listed as a diagnosis. He needed nectar-thickened liquids. Advanced Registered Nurse Practitioner (ARNP) visit note dated indicated . He was non-ambulatory, required a high back chair and was of bowel and , was fed by staff and was non- verbal. The continued review revealed no evidence to confirm that a health care provider order was obtained for the use of the including the concentration and frequency.

In an interview with the Health Wellness Director on , 4:15 PM who stated the facility nurses assisted the resident #6 with the and needed to be identified as LNS.

Class III

Z821 - Reporting Requirements; Electronic Submission - 59A-35.110 FAC

Based on record review and interview the facility failed to submit an adverse report for 1 of 6 sampled residents (2).

Findings:

Resident # 2 was admitted to the facility on and discharged on . The health assessment report dated listed , and failure. The resident needed continuously. He was not under the care of hospice. A facility note dated during the 7-3 shift indicated assisted resident to , staff called for assistance. Resident was unresponsive. Was unresponsive to rub. Laid on left side agonal (gasping) breathing, 911 called at 2:07 PM. Arrived at 2:17 PM, pronounced . The local police called arrived at 2:29 PM, family/doctor and

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funeral home informed. The body left the building at 4:23 PM.

In an interview with the administrator on , 4:15 PM who stated an adverse report was not submitted when the local police department came to the facility when resident #2 .

Class III