STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11965897	07/26/2018
NAME OF PROVIDER OR SUPPLIER **SUNNY HILLS OF HOMESTEAD**	STREET ADDRESS, CITY, STATE, ZIP CODE **25268 SW 134th Avenue** **PRINCETON, FL 33032**	

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

0000 - Initial Comments

A Standard Biennial Survey was conducted on , 2018 and concluded on , 2018. Sunny Hills of Homestead, Inc with limited nursing services component (license number 10203) had the following deficiency identified at the time of the survey:

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

Based on observation, record review, and interview, the Assisted Living Facility failed to have accurate health assessment for two (#8 and #12) out of 12 sampled residents. The facility also failed to have a complete health assessment for one (#9) out of 12 sampled residents.

Findings included:

1) On at 9:21 AM observed Resident #8 resting in bed with half-bed rail up, on via nasal cannula at 2 liters per minutes, and a Licensed Practical Nurse (LPN) from hospice at bed side.

On at 9:22 AM LPN from hospice revealed Resident #8 received continuous care with hospice since .

On at 11:56 AM a certified nursing assistance (CNA) from hospice revealed that the resident count not get out of bed. The CNA fed the resident and bathed her in the bath. The resident needed total assistance.

On at 12:00 PM Resident #8's family member revealed that the resident was fed by the Hospice CNA.

Review of Resident #8's record revealed the health assessment dated , had medical history and diagnoses of ( ), Accident ( ), poor appetite, , protein , Functional decline, Chronic Kidney ( ). The resident needed assistance with ambulation, bathing, dressing, eating, toileting and transferring; needed supervision with self- care and used wheelchair.

Review of Resident #8's hospice record showed that admission date to hospice was on for generalized . The resident received continuous care since then.

On at 1:07 PM the Administrator revealed that when Resident #8 was discharged from the

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hospital, the resident was able to pick up the brush and lipstick. "I don't think she could brush her hair. She has been going up and down."

2) Review of Resident #12's record showed the health assessment dated, had a medical history and diagnoses of obstruction, essential , and Collapse, , History of , . The resident needed assistance with activities with daily livings, assist with medications, hospice to follow. It did not show that the resident had a , , 3 or 4.

Review of Resident #12's hospice record showed that admission date to hospice was . Review of plan of care on ; it showed care to sacrum three times a week and as needed. Doctor order for care received on .

On at 1 PM the Administrator revealed that the doctor was aware that Resident #12 had a , but did not document it the health assessment.

3. Review of Resident #9's record showed that the health assessment in record did not have the examination date.

On at 1:04 PM the Administrator revealed the doctor saw Resident #9 when the resident was admitted to hospice.

Review of Resident #9's hospice record showed that admission date was on .

Class III