STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11969083	**09/04/2018**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
HC GOLDEN AGE ALF, CORP	**15295 PALMETTO LAKE DR** **MIAMI, FL 33157**

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

0000 - Initial Comments

A Complaint Survey (CCR# 2018009598) was conducted on . HC Golden Age ALF Corp. License 12915 had the following deficiencies identified at the time of survey:

0032 - Resident Care - Elopement Standards - 58A-5.0182(8) FAC

Based on observation, record review and interview the facility failed to follow its own policies and procedures when responding to elopement for two out of two sampled residents that had been identified as at risk (Resident #3 and Resident #6).

Findings included:

A review of the facility's policies and procedures on Elopement revealed the facility will assess all residents at risk for elopement or with a history of elopement shall be identified so staff can be alerted to their needs for support and supervision. The facility developed a protocol of care, a wandering resident management elopement prevention: All residents will be assessed for risk of elopement upon admission or when a significant change in condition and/or behavior is noted. The facility will uses multi-faceted approaches to assure resident safety: Alarmed doors, color-coded bracelets, and resident photographs.

1) A review of Resident #3's record showed the resident was admitted on . A health assessment dated showed medical history and diagnoses of high , , , , , , , and . Physical or sensory limitations were lack of coordination and muscle . or behavior status was: alert to person, time, and place. Per health assessment the resident was not an elopement risk. The resident needed assistance with ambulation, bathing, and transferring. The resident was independent with dressing, eating, and self-care , and needed supervision with toileting. The resident needed assistance with self-administration of medications. A photo of the resident was on file. There was no documentation the facility completed an elopement risk assessment.

On at 9:40 AM observed Resident #3 and the resident was not wearing a color-coded bracelet with the address of the facility.

On at 12:27 PM the Administrator stated "Resident #3 eloped when she first got to the facility. She was missing for about minutes before I contacted the police. I found out she was missing because she was not in the facility. This occurred around of 2018. I contacted her son and explained to him that the facility would need to lock the front door. I did not know she was an elopement

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risk when she was admitted to the facility. Another state agency placed the resident here because there was an incident where Resident #3 did not recognize her husband and . . . . . him."

On . . . . . at 12:27 PM the Owner stated "When she first came to the facility, she wanted to go outside and her son told us it was okay. Well, apparently that day she got and could not find her way back to the house. I went back to look for her and I did not find her, she was gone for about minutes when I called the police."

On at 1:46 PM interviewed Resident #3's son, who stated "those incidents happened twice, the first time the facility called me and the second time I was notified by law enforcement, and they told me that my mom gets out just by opening the door. There was an additional one, I do not recall when it happened about two weeks of the first incident and she was found a lot quicker than the first time. No, she has not made any other attempts of leaving. No, I am very happy with her care, but we are moving her to another assisted living facility and it is because my father is in a multi-story facility close by and we would like to have them to be close so we have time to spend with him."

A review of Resident #3's last profess note was dated and documented her son brought her because she could not continue live alone anymore. The resident was physically active, but . . . . . , sometimes agitated as per son. she has adapted well, helpful around the house, likes to walk outside but we have notice that she sometimes forgets how to return to the house. . . . . spoke with her son and we will let her go outside in the back area in order to avoid her getting lost, converses a lot. . . . . she is doing well, her son brings his dad (her husband) to see her and even takes them out on the weekends. There was no documentation of any of the incidents where the resident eloped from the facility.

2) A review of Resident #6's file revealed the resident was admitted on . . . . A health assessment dated showed medical history and diagnoses: high , , Parkinson's . . . . . , ... , chronic kidney . . . . . , ... without behavioral disturbance, ... Physical or sensory limitations: Patient with tremors and . . or behavioral status: Forgetful. Nursing/treatment/ . . . . service requirements: Medications administrations. Per health assessment the resident was an elopement risk. The resident is independent with ambulation, bathing, eating, toileting, and transferring. The resident needs supervision with dressing and self-care (. .). Per health assessment the resident needed medication administration. A photo of the resident was not in the file. There was no documentation the facility completed an elopement risk assessment.

On at 9:44 AM observed the Resident #6 was not wearing a color-coded bracelet with the

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address of the facility.

Class III

0165 - Risk Mgmt & QA; Adverse Incident Report - 429.23(1-4 & 6-10) FS; 58A-5.0241 FAC

Based on record review and interview, the facility failed to submit the incident report within one business day after the incident and within 15 days of the incident to AHCA for one out of two sampled residents (Resident #3)

Findings Included:

A review of the AHCA adverse incident report database showed there were no adverse incidents reported to the agency.

On at 1:46 PM interviewed Resident #3's son stated those incidents happened twice, the first time the facility called me and the second time I was notified by law enforcement, and they told me that my mom gets out just by opening the door. There was an additional one, I do not recall when it happened about two weeks of the first incident and she was found a lot quicker than the first time. No, she has not made any other attempts of leaving. No, I am very happy with her care, but we are moving her to another assisted living facility and it is because my father is in a multi-story facility close by and we would like to have them to be close so we have time to spend with him. I am pleased with the facility and the care that they have provided to my mother."

On at 12:27 PM the Administrator stated "Resident #3 eloped when she first got to the facility. She was missing for about minutes before I contacted the police. I found out she was missing because she was not in the facility. This occurred around of 2018. I contacted her son and explained to him that the facility would need to lock the front door. I did not know she was an elopement risk when she was admitted to the facility. Another state agency placed the resident here because there was an incident where Resident #3 did not recognize her husband and him."

On at 12:27 PM the owner stated "When she first came to the facility, she wanted to go outside and her son told us it was okay. Well, apparently that day she got and could not find her way back to the house. I went back to look for her and I did not find her, she was gone for about minutes when I called the police. No, I did not complete an incident report."

A review of Resident #3's progress note in file revealed there was no documentation of any of the

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incidents where the resident eloped from the facility.

Class III

0200 - Emergency Environmental Control - 58A-5.036 FAC

Based on interview and record review, the facility failed to develop written policies and procedures or a plan and to notify each resident or resident representative, documenting implementation of the plan to ensure the safety of the residents in case of a declared emergency.

Findings Include:

A review of the resident records showed there was no documentation of a written policies and procedures notifying each resident or resident representative of the plan.

On at 2:00 PM the owner stated "No, we have the policies in procedures in writing, and we would have to contact the resident's family to have them sign it."

Class III