STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11968942	**07/17/2018**
NAME OF PROVIDER OR SUPPLIER **THE FOUNTAINS OF HOPE**	STREET ADDRESS, CITY, STATE, ZIP CODE **2250 JESUS WAY** **SARASOTA, FL 34240**	

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

0000 - Initial Comments

An unannounced extended congregate care survey was conducted on . . . at The Fountains of Hope, an assisted living facility (license #12784) located in Sarasota, Florida.

The following is description of the deficiencies.

E205 - ECC - Health Assessment - 58A-5.030(5) FAC

Based on a review of 1 (Resident #3) of 3 residents receiving extended congregate care (ECC) and an interview with the administrator, the facility failed to ensure annual health assessments were performed.

The findings included:

A review of Resident #3's record revealed the last health assessment for Resident #3 was done on . There was no assessment done annually as required for residents receiving ECC care.

On , at 11:00 a.m., the administrator agreed they had no health assessment done for Resident #3 for this year as required.

Class III

E206 - ECC - Service Plans - 58A-5.030(6) FAC

Based on a review of 3 (Residents #1, #2, and #3) of 3 residents receiving extended congregate care (ECC), and interview with staff, the facility failed to ensure the service plans for the residents showed how the facility planned to meet their needs.

The findings included:

The service plans for Resident's #1, #2, and #3 were last reviewed on . The only thing on the service plan was which service was to be provided. Resident's #1, #2, and #3, all received assistance with the application of a , or brace in the morning and removal of the , or brace in the evening for bed. There was no plan in place for health monitoring, assistance with personal care services, if the resident required nursing services, what supervision was necessary for the resident, whether the resident required a special diet, ancillary services, and if they needed transportation or supportive services, if outside service providers were necessary for these 3 resident's.

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On , at 11:00 a.m., the administrator agreed they were only putting whatever ECC services were on the service plan. She said she didn't realize they had to address the other issues for each resident.

Class III

E208 - ECC - Records - 58A-5.030(8) FAC

Based on a review of 3 (Residents #1, #2, and #3) of 3 residents' records who were receiving extended congregate care (ECC) services and interview with the administrator, the facility failed to ensure there were progress notes about the ECC care provided.

The findings included:

A review of Resident #1, #2, and #3's records revealed there were no progress notes documented about the ECC services the facility was providing. In each resident file it was documented that they were receiving care for the application in the morning and removal at bedtime of a , or brace to the lower extremity.

During an interview on , at 11:00 a.m., the administrator provided documentation of the care in a document called "Administration history" for Resident's #1, #2 and #3. It further identified itself by including the resident's name.

For Resident #1 and #2 it included: to apply right leg brace each morning and remove right leg brace each evening. For Resident #3 it included "apply leg brace in the AM and remove in the PM." There were no notes for either of these residents, although there was space in the form for notes. There were no observations of the skin or whether the resident was tolerating the braces. Continued interview with the administrator agreed their documentation did not include a progress note and did not show any observations about the residents' legs.

Further review of this documentation revealed Resident #1 had no documentation on about the application of the brace in the morning and no documentation about the application of the brace on .

Resident #2 had documentation on the following days for refusal of the application of the brace : , , , , . There was no additional documentation to explain the reason the resident was refusing nor was there notification of the physician about the resident's continued

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refusal to use the brace.

Resident #3 had no documentation of the application and removal of the brace on: , , , , or the removal of the brace for the period of through , (a total of 30 days). There was no application of the brace documented on .

Class III