STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11910644	**10/09/2018**
NAME OF PROVIDER OR SUPPLIER **APOLLO GARDENS RETIREMENT RESIDENCE**	STREET ADDRESS, CITY, STATE, ZIP CODE **2718 JOHNSON STREET HOLLYWOOD, FL 33020**	

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

0000 - Initial Comments

An unannounced licensure Complaint Survey CCR# 2018010553 was conducted on [redacted] at Apollo Gardens Retirement Residence Care Assisted Living Facility, License #7341. The facility had deficiencies identified at the time of the survey.

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

Based on observation, record review, and interview, the facility failed to have all residents reassessed to ensure that all residents met the criteria for continued residency at an Assisted Living Facility (ALF) and that the residents Health Assessment Form (AHCA form 1823) was accurate and reflective of their current care needs and services, for 3 of 3 sampled residents (Resident #1, Resident #2, and Resident #3).

The findings Included:

A) Review of the facility's Hospice file for Resident #3 on [redacted] revealed that Resident #3 has three [redacted] that the resident has been receiving treatment for since [redacted] of 2018. Observations of the notes documented revealed no indication that the wounds have been healing or if the wounds have resolved.

During an interview with the Facility's Nurse on [redacted] at 11:50 AM, it was stated that the resident has had the [redacted] longer than 20 days for sure. When asked is the residents wounds healing? She stated from her observations it goes back and forth it will start healing, and then it would stop, which is why the [redacted] consult from the doctor was ordered yesterday. When asked to see the [redacted] measurements, no measurements was documented in the file, no documentation was ever provided. The facility nurse asked if the surveyor would like to speak with the Hospice nurse. An interview was requested.

During an interview with the Hospice Nurse on [redacted] at 12:23 PM, it was stated the [redacted] to the left elbow is healing, the one to the left side of the foot that is coming along, and its healing. It was stated that it will get better to where they are almost healed then she would press or rub on it and it would open back up again. It was further stated that some days, I will walk away and her wounds would be good and healing then some days it's a bit worse than what it was before. It was also stated that she comes on the weekdays and on weekends, there are different nurses providing the [redacted] care. The [redacted] measurements were provided for the month of [redacted]. The Hospice Nurse was unable to provide current measurements from this current week or initially from back in [redacted].

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Review of the Hospice notes provided by the Hospice Nurse treating Resident #3 revealed that both parties only have care measurements documented for 3 days in , , , 24th,26th, and 28th. Further review of the notes revealed that the resident started care for all three wounds in the beginning of . Almost 60 days has passed and there is no documentation that any of the wounds are healed. Review of the most current Health Assessment (AHCA 1823 form) on for the Resident #3 dated for revealed that the form is not reflective of the residents current care needs. There is no documentation of any of the wounds that Resident #3 has or the treatment for the care that the resident is getting from Hospice. Further observations revealed that the file for Resident #3 has documentation that the resident requires pureed meals with honey-thickened liquids. The AHCA 1823 form states that the resident requires mechanical soft. On the section that asks does the resident has any , 3, or 4 wounds it is documented "N" for no, and the resident is currently being for treated for three wounds by Hospice.

An additional interview with the Hospice Nurse at 12:40 pm on revealed that it was stated again that the wounds begin to heal and then they get worse then begin to heal again. It was stated that due to her poor skin integrity she is going to continue to be at risk for wounds. The Nurse could not state for sure that any of the wounds for Resident #3 is completely healing at any given time without getting worse. The nurse also could not state that once healed, the wounds will not reopen again. The facility lacked documentation of the care and service provided.

B) Review of the file for Residents #1 that was also documented to have a revealed the same findings as Resident #3. It was revealed that both residents had wounds and was put on Hospice for care treatment. Documentation from the facility on the progression of the wounds were not documented for both Resident #1 and Resident #3. It was determined that due to the amount of care required for each resident required to promote the healing of the wounds, both residents required a higher level of care then what the facility could provide. The facility retained the residents, resulting in ongoing wounds for both residents.

C) Review of the file for Resident #2 admitted to the facility on , discharged on revealed a note documented for from the neurologist. The noted revealed the resident was under medications for aggression. Review of the progress notes revealed that on the resident hit another resident in his . On the resident was give an 45-day notice due to him pushing another resident on .

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Review of the AHCA 1823 form dated for revealed under physical and sensory limitations that the resident would do well in quiet environment free from unnecessary stimuli. Under and behavior status it is stated that occasionally the resident can get upset and become combative. Controlled well on 50 mg (twice a day). Under nursing it states adult supervision, and that the resident is an elopement risk. On page 2 it states the individual needs /nursing supervision. Observations of the layout of the facility revealed the facility is not secured and locked. The residents are able to come in and out as often as they would like.

During an interview with the Administrator at 3:30 PM it was stated that the AHCA 1823 form for Resident #2 was not reviewed prior to him being admitted to the facility, it was stated that she had seen the resident prior and the resident wasn't aggressive or anything. It was further stated that her and the the Facility Nurse did not know that he was an elopement risk because he always seemed to be just fine.

During this time, the findings regarding admitting and retaining inappropriate residents was discussed with the Administrator, no further information was provided for review.

Class III

Class III

0181 - Emergency Plan Approval - 58A-5.026(2) FAC

Based on observation, interview and record review, the facility failed to have a Comprehensive Emergency Management Plan (CEMP) approved by the local emergency management agency.

The findings included:

Upon request of documentation from the local Emergency Management Division of an approved CEMP for the year 2018 through 2019 on from the Administrator, no current documentation was provided. Upon review of the CEMP letter provided, it was revealed the letter dated for revealed that the plan was reviewed and approved up until .

During an interview with the Administrator and her Assistant at 12:00 PM, she stated that she has it, she

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just have to find it. The Assistant and the Administrator was given the opportunity to locate the documentation, the documentation was never located and no further documentation was provided for review.

Class III