

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 11/19/2018
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11911215	(X3) DATE SURVEY COMPLETED 10/30/2018
NAME OF PROVIDER OR SUPPLIER HARBOUR TERRACE	STREET ADDRESS, CITY, STATE, ZIP CODE 23013 WESTCHESTER BLVD PORT CHARLOTTE, FL 33980	

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

0000 - Initial Comments

An unannounced complaint survey for CCR#2018013688 was conducted at Harbour Terrace, an assisted living facility (license # 5075) in Port Charlotte, Florida.

The complaints contained 3 allegations, of which 2 were unsubstantiated.

One allegation was substantiated with deficiencies.

The following is description of the deficiencies found at the time of the visit.

0009 - Admissions - Admission Package - 58A-5.0181(3) FAC; 400.0078(2)

Based on record review and interview, the facility failed to ensure a complete admission packet was available for new admissions to the facility. Failure to provide a complete admission packet leads to a lack of necessary information and may lead to misunderstanding between the resident or their representative and the facility.

The findings included:

Record review for Resident #8 and #9 found that the following was excluded from facility's admission package:

The facility must have a written statement of it's house rules and procedures that must be included in the admission package provided pursuant to rule 58 A-5.0181, D.A. The rules and procedures must, at a minimum, address the facility's policies regarding:

1. Reporting resident , neglect, and ;
2. Administrative and housekeeping schedules and requirements;
3. The requirements for coordinating the delivery of services to residents by third party providers.
4. Admission package did not include language specific to resident requirement to perform any work in the facility. Residents may be required to clean their own sleeping areas or apartments if the facility rules or the facility contract includes such a requirement. If a resident is employed by the facility, the resident must be compensated in compliance with state and federal wage laws.

On at 5:00 p.m., the Administrator confirmed the findings. She said she was aware of the regulatory changes. She said she has been in the facility for only a short time and had not modified the

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admission package yet. Class III 0025 - Resident Care - Supervision - 429.26(7) FS; 58A-5.0182(1) FAC Based on record review and staff interview, the facility failed to provide care and services according to resident needs for 1 (Resident #9) out of 3 resident records reviewed. The findings included: Record review for Resident #9 found that she had a skin , , on her lower left leg on . Resident #9 had a diagnosis of skin Record review found a written order dated for Ointment to lower left leg every other day (QOD) for 7 visits. Per note on record the facility was to send out a referral to Home Health Agency (HHA). Per the Health and Wellness Director on at 3:00 p.m., the Home Health Agency (HHA) came to the facility and assessed the resident. The HHA did not qualify the visit as skilled nursing. Subsequently, they did not accept Resident #9. No documentation found on record of the facility's referral to Home Health. No documentation found on record of HHA's refusal to accept the resident as a patient. Treatment review for Resident #9 found that she began receiving treatments on, ten days after the original order. On at 5:00 p.m., the Administrator said the incident took place before she started working in the facility and had no further information to provide. She could not provide explanation as to why there was a ten day gap from the date of order to the actual treatment. Class III		