

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 01/08/2019
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11967905	(X3) DATE SURVEY COMPLETED 11/26/2018
NAME OF PROVIDER OR SUPPLIER BAYSHORE GUEST HOME	STREET ADDRESS, CITY, STATE, ZIP CODE 512 BAYSHORE RD NOKOMIS, FL 34275	

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

0000 - Initial Comments

An unannounced complaint survey for CCR #2018016176 was conducted on at Bayshore Guest Home and Gardens, an assisted living facility (license #11852) located in Nokomis, Florida.

The complaint contained 2 allegations, both of which were unsubstantiated.

The following is description of the deficiencies.

0160 - Records - Facility - 58A-5.024(1) FAC

Based on observation and interview, the facility failed to ensure the admission discharge log was present and in use.

The findings included:

At the start of the complaint investigation, the admission/discharge log was requested. The staff present in the facility, the Medication tech. and the Assistant Administrator, both agreed they do not have the admission and discharge log.

On at 11:10 a.m., the Administrator agreed they do not have an admission discharge log.

Class

0168 - Resident Refund Policy - 429.24(3)(a) FS; 429.27(7), FS

Based on record review and staff interview the facility failed to provide a refund to 1 (Resident #1) of 1 resident who was discharged.

The findings included:

Resident #1 was admitted to the facility on The resident was discharged on, but the resident's physical belongings were removed from the facility on The rate of \$2100 per month was paid through There was no evidence of a refund being provided to the power of attorney.

On at 1:15 p.m., the owner indicated she was the person who handles all of the refunds for the

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facility. She said she was unsure but thought the Administrator had told her the resident did not get a refund as she was not paying the full amount of \$4000. The owner acknowledged the resident's contract was for \$2100 as dated on . The owner agreed she had not sent a refund. Class III		