

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 03/20/2019
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11965121	(X3) DATE SURVEY COMPLETED 02/26/2019
NAME OF PROVIDER OR SUPPLIER BROOKDALE NAPLES	STREET ADDRESS, CITY, STATE, ZIP CODE 770 GOODLETTE ROAD, NORTH NAPLES, FL 34102	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION)		
0000 - Initial Comments An unannounced relicensure and emergency power plan monitoring survey was conducted through at Brookdale Naples, an assisted living facility (license #9584) in Naples, Florida. The following deficiencies were found at the time of the visit. 0008 - Admissions - Health Assessment - 429.26() FS; 58A-5.0181(2) FAC Based on record review, resident and staff interview, the facility failed to ensure resident Agency for Health Administration (AHCA) Health Assessment (1823) was complete for 1 (Resident #8) of 2 residents records reviewed. The findings included: On at 11:08 a.m., Resident #8 said they give her medication. They bring her a cup full of pills twice a day. She would like to take her own but they said they give everyone their pills and she is not allowed. She also said she knows all her pills and what they are for and feels bad she is not allowed to handle her own medications. Record review on for Resident #8 revealed a Health Assessment, AHCA Form 1823, that was dated . The section for nursing, treatment, and , service requirements documented medication administration and section 2-B referring to "does the individual need help with taking his or her medications?" This was left blank by the provider Medical Doctor (MD) or Advanced Registered Nurse Practitioner (ARNP). In the next section it asks what type of help the resident needs and it was clearly documented Resident #8 was able to administer without assistance. It was also noted on the Health Assessment form there were 3 areas of documentation that were changed by the use of white out and answers were covered up. On at 11:15 a.m., the Health & Wellness Director acknowledged the form was incorrectly completed and it had white out on it and the answers were covered or changed from the original document. She also said Resident #8 has never been allowed to take her own medication since she was admitted and she did not get any additional order for the resident to get assistance with self-administration. Class III		

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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 of the facility's admission packet revealed the following information was not included: 1. Personal care services that the facility is prepared to provide to residents and additional costs to the resident, if any. 2. Nursing services that the facility is prepared to provide to residents and additional costs to the resident, if any. 3. The facility's resident elopement response policies and procedures. 4. Admission and retention policy; 5. . . . policy; 6. Medication storage policy; 7. Elopement policy; 8. Reporting , neglect and , policy; 9. Administration scheduled availability;housekeeping availability. 10. . . . control, sanitation, and universal precaution policy; 11. Social and leisure activities generally offered by the facility; 12. Any services that the facility does not provide but will arrange for the resident and additional cost, if any. The facility's contract review found that the following was excluded: 1. A written bed hold policy and provisions for terminating a bed hold agreement if a facility agrees in writing to reserve a bed for a resident who is admitted to a nursing home, health care facility, or . . . facility. The resident or responsible party must notify the facility in writing of any change in status that would prevent the resident from returning to the facility. Until such written notice is received, the agreed upon daily, weekly, or monthly rate may be charged by the facility unless the resident's medical condition prevents the resident from giving written notification, such as when a resident is comatose, and the resident does not have a responsible party to act on the resident's behalf; 2. A provision stating whether the facility is affiliated with any religious organization and , if so, which		

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organization and its relationship to the facility; 3. The facility's policies and procedures for self-administration, assistance with self-administration, and administration of medications, if applicable, pursuant to Rule 58A-5.0185, F.A.C. This also includes provisions regarding over-the-counter (OTC) products pursuant to subsection (8) of that rule; and 4. The facility's policies in regard to third party to coordination with the facility regarding the resident's condition and the services being provided as indicated by 58.50182(7) FAC. 5. Exhibit C -Pharmacy services agreement indicated the following: "Participation with our community's preferred provider is strongly encouraged. Should not to use the community's pharmacy provider,you may incur fees as set forth in Exhibit X. Exhibit X was not found in the contract. On at 12:45 p.m., the administrator provided exhibit X. The pharmacy fee still was not included at the document provided. The Administrator said on at 12:49 p.m., Exhibit X was utilized by all Brookdale facilities around the country. It was a generic form for all campuses. The Administrator explained that ancillary charges had to be included and to be applicable to the , campus. 6. Addendum to the residency agreement basic services stated that basic cable/satellite, premium cable channels and telephone was not included in the basic service rate. Fee was not disclosed. 7. A provision stating whether the facility is affiliated with any religious organization and , if so, which organization and its relationship to the facility; 8. No reference was made in relation to residents not being required to perform any work in the facility without compensation, except that facility rules or the facility contract may include a requirement that residents are responsible for cleaning their own sleeping areas or apartments. If a resident is employed by the facility, the resident shall be compensated at a minimum, at an hourly wage consistent with the federal minimum wage law. 9. The facility has a memory unit. No written description of special services for individuals with and related as required in section 429.177, F.S. were found in the contract. 10. Page #14 of the contract under other related materials, #4 was Emergency Evacuation Plan. The document was not found in the contract. Administrator acknowledged the lack of documentation on at 2:30 p.m. Class III 0025 - Resident Care - Supervision - 429.26(7) FS; 58A-5.0182(1) FAC . Based on record review and interview, the facility failed to ensure the physicians orders were followed according to the Agency for Healthcare Administration (AHCA) Health Assessment (1823) that was		

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completed on admission or to notify the doctor of changes in resident ability to administer their own medications for 1 (Resident #8) of 2 resident's records reviewed. The findings included: On at 11:08 a.m., Resident #8 said they give her medication. They bring her a cup full of pills twice a day. She would like to take her own but they said they give everyone their pills and she is not allowed. She also said that she knows what all her pills are and what they are for and feels bad she is not allowed to handle her own medications. Record review on for Resident #8 revealed a Health Assessment, AHCA Form 1823, that was dated The section for nursing, treatment and service requirements documented medication administration and section 2-B referring to does the individual need help with taking his or her medications? This was left blank by the provider Medical Doctor (MD) or Advance Registered Nurse Practitioner (ARNP). In the next section it asks what type of help the resident needs and it was clearly documented that Resident #8 was able to administer without assistance. It was also noted on this Health Assessment form there were 3 areas of documentation that were changed by the use of white out and answers were covered up. On at 11:15 a.m., the Health & Wellness Director acknowledged the form was incorrectly completed and the answers were covered or changed from the original document with white out. She also said Resident #8 has never been allowed to take her own medication since she was admitted and she did not get an additional order to change the order for Resident #8 to get assistance with self-administration. Class III 0167 - Resident Contracts - 58A-5.025 FAC; 429.24 FS Based on record review and interview, the facility failed to ensure a complete and accurate duplicate original contract was in each resident's file for 2 (Residents #8 and #12) of 2 resident records reviewed. The facility failed to ensure the contracts contained all required information. Failure to maintain contracts including addendums may lead to billing irregularities. The findings included: Record review reveled the following information was excluded from Resident #8's and #12's contract:		

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1. A written bed hold policy and provisions for terminating a bed hold agreement if a facility agrees in writing to reserve a bed for a resident who is admitted to a nursing home, health care facility, or _____ facility. The resident or responsible party must notify the facility in writing of any change in status that would prevent the resident from returning to the facility. Until such written notice is received, the agreed upon daily, weekly, or monthly rate may be charged by the facility unless the resident's medical condition prevents the resident from giving written notification, such as when a resident is comatose, and the resident does not have a responsible party to act on the resident's behalf; 2. A provision stating whether the facility is affiliated with any religious organization and, if so, which organization and its relationship to the facility; 3. The facility's policies and procedures for self-administration, assistance with self-administration, and administration of medications, if applicable, pursuant to Rule 58A-5.0185, F.A.C. This also includes provisions regarding over-the-counter (OTC) products pursuant to subsection (8) of that rule; and 4. The facility's policies in regard to third party coordination with the facility regarding the resident's condition and the services being provided as indicated by 58.50182(7) FAC. 5. Exhibit C -Pharmacy services agreement indicated the following: "Participation with our community's preferred provider is strongly encouraged. Should not to use the community's pharmacy provider, you may incur fees as set forth in Exhibit X." Exhibit X was not found in the contract. On _____ at 12:45 p.m. the administrator provided Exhibit X. The pharmacy fee still was not included in the document provided, the Administrator said on _____ at 12:49 p.m. 6. Addendum to the residency agreement basic services stated that basic cable/satellite, premium cable channels and telephone were not included in the Basic Service rate. Fee was not disclosed. 7. A provision stating whether the facility is affiliated with any religious organization and, if so, which organization and its relationship to the facility; 8. No reference was made in relation to residents not being required to perform any work in the facility without compensation, except that facility rules or the facility contract may include a requirement that residents be responsible for cleaning their own sleeping areas or apartments. If a resident is employed by the facility, the resident shall be compensated at a minimum, at an hourly wage consistent with the federal minimum wage law. 9. The facility has a memory unit. No written description of special services for individuals with _____ and related _____ as required in section 429.177, F.S. was found in the contract. 10. Page #14 of the contract under other related materials was #4 Emergency Evacuation Plan. The document was not found in the contract. The Administrator acknowledged on _____ at 2:30 p.m., the facility's contract was incomplete.		

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