

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11911900	(X3) DATE SURVEY COMPLETED R 04/15/2019
NAME OF PROVIDER OR SUPPLIER BEAR LAKE RETIREMENT HOME	STREET ADDRESS, CITY, STATE, ZIP CODE 1525 BEAR LAKE ROAD APOPKA, FL 32703	

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

0000 - Initial Comments

A revisit to the re-licensure survey was conducted on Bear Lake Retirement Home Assisted Living Facility, License# 8413, had deficiencies at the time of the visit.

D162 - Records - Resident - 58A-5.024(3) FAC

Based on resident record review and interview, the facility failed to record semi-annually for 1 of 3 sampled residents (#6) who required assistance with Activities of Daily Living.

Findings:

Review of the record for resident #6, admitted on, revealed 2 recorded in 2015. No other were available for review.

On at 11:30 AM, the administrator's assistant confirmed the findings.

Class III

D167 - Resident Contracts - 58A-5.025 FAC; 429.24 FS

Based on contract review and interview, the facility failed to ensure a residency contract contained all of the required information for 2 of 2 sampled residents' contracts (#1 and #2).

Findings:

The contracts previously cited for residents #1 and #2 were not corrected and remain in place. The draft of the revised contract was presented for review, but had not been signed by any residents or responsible parties as of the date of the revisit.

Review of the revised contract intended for the facility's residents revealed the following declarations:

"Medical information must be on the Health Assessment for Adult Congregate Living Facilities form ..."
"The administrator will decide on the appropriateness of resident"
"If the resident's declining condition demonstrates ...the resident will be transferred to an ECC program."

The refund policy contained the name of a different assisted living facility to charge for storage of

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

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belongings after a discharge. On at 10:30AM, the administrator's assistant confirmed the findings. Class		