Agency for Health Care Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	AL11969174	A. BUILDING: _____ B. WING _____	08/14/2020

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
NEW ERA COMMUNITY HEALTH CENTER LLC	1351 N KROME AVE HOMESTEAD, FL 33030

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
A 000	Initial Comments A complaint investigation (complaint numbers 2020013217 and 2020013250), COVID-19 control and generator survey was conducted at New Era Community Health Center on through . Deficiencies were identified at the time of the survey.	A 000		
A 025 SS=D	429.26(7) FS; 59A-36.007(1) FAC Resident Care - Supervision 429.26 (7) The facility must notify a licensed physician when a resident exhibits signs of or , or has a change of condition in order to rule out the presence of an underlying physiological condition that may be contributing to such or . The notification must occur within 30 days after the acknowledgment of such signs by facility staff. If an underlying condition is determined to exist, the facility shall arrange, with the appropriate health care provider, the necessary care and services to treat the condition. 59A-36.007 An assisted living facility must provide care and services appropriate to the needs of residents accepted for admission to the facility. (1) SUPERVISION. Facilities must offer personal supervision as appropriate for each resident, including the following: (a) Monitoring of the quantity and quality of resident diets in accordance with rule 59A-36.012, F.A.C. (b) Daily observation by designated staff of the activities of the resident while on the premises, and awareness of the general health, safety, and physical and emotional well-being of the resident. (c) Maintaining a general awareness of the	A 025		

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A 025	Continued From page 1 resident's whereabouts. The resident may travel independently in the community. (d) Contacting the resident's health care provider and other appropriate party such as the resident's family, guardian, health care surrogate, or case manager if the resident exhibits a significant change. (e) Contacting the resident's family, guardian, health care surrogate, or case manager if the resident is discharged or moves out. (f) Maintaining a written record, updated as needed, of any significant changes, any illnesses that resulted in medical attention, changes in the method of medication administration, or other changes that resulted in the provision of additional services. This Statute or Rule is not met as evidenced by: Based on record review and interview, the facility failed to provide adequate supervision and maintain a general awareness of the resident whereabouts (Resident #1). The facility failed to maintain a written record, updated as needed for one out of three sampled residents (Resident #1). Findings include: Review of Resident #1's record showed the resident's admission date was on . The resident had diagnosis of . Type. During an interview on at 7:04 AM, Staff C stated that she worked as caretaker/team leader during the night shift. The staff saw Resident #1 on when she conducted rounds between 2:30 AM-3:00 AM and the resident was in his room. During the 4:00 AM round, the staff noted Resident #1 missed from	A 025		

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A 025	Continued From page 2 his room. A review of the Resident Observation Log dated , showed the staff on duty saw Resident #1 at 4:00 AM but not at 6:00 AM. Review of progress notes for Resident #1 dated , revealed the resident had a habit of jumping the fence and went to the store to buy energy drinks. There was no other documentation in the resident's record indicating the resident "jumped the fence" or that the facility notified the resident's health care provider. The progress note dated on showed that the facility's owner found the resident on at 7:10 AM. The facility transferred the resident to a local hospital, then the facility's owner notified the resident legal guardian, Attending Physician, and Attending Psychiatrist about finding the resident and his transfer to a local hospital. During an interview on at 9:50 AM, the facility owner stated, "The resident has jumped the fence before, but he comes right . He tends to do that often, when he does, we call the family and the primary care physician, and he does not do it again for another two weeks or so." The owner further stated there is no documentation of all the times he jumped the fence to go to the store, but the doctor was notified." During an interview on at 9:51 AM, the owner stated that he assumed Resident #1 "jumped two fences" when he eloped from the facility on . The resident went up the stairs and then jumped the first fence. Then he climbed a second fence in order to elope from the facility. The Owner also stated that Resident #1 had jump the fence in the past in order to go to	A 025		

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A 025	Continued From page 3 the store to buy energy drinks, but he came . . . to the facility after each instance. During an interview on at 3:07 PM, Resident #1's legal guardian stated that the resident has eloped on two prior occasions, ... and . . . . . . The facility administrator notified her of both incidents. A review of the agency incident reporting system showed no documentation of Resident #1 eloping from the facility prior to . During an interview on at 1:51 PM, Resident #1's legal guardian stated that the facility owner nor administrator have notified her about her son's behavior and frequently jumping the fence. She further states that Resident #1 informed her he always goes out to the store, but she thought this behavior was permissible since she never received any notification from the facility. During an interview on at 11:44 AM, Resident #1's primary care physician stated "I don't remember being told anything about the resident having a habit of jumping the fence. They may have told me about it, but I don't have anything written down about it." A review of the facility's elopement policy showed that an elopement risk assessment form will be completed "when a significant change occurs". Review of Resident#1's record showed that there was no documentation indicating the facility completed a recent new elopement risk assessment. Review of the facility's record showed that the	A 025		

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A 025	Continued From page 4 facility did not include Resident #1 on the residents' elopement roster. Class III	A 025		
A 030 SS=D	59A-36.007(6) FAC; 429.28( ) FS 429.27 Resident Care - Rights & Facility Procedures 59A-36.007 (6) RESIDENT RIGHTS AND FACILITY PROCEDURES. (a) A copy of the Resident Bill of Rights as described in section 429.28, F.S., or a summary provided by the Long-Term Care Ombudsman Program must be posted in full view in a freely accessible resident area, and included in the admission package provided pursuant to rule 59A-36.006, F.A.C. (b) In accordance with section 429.28, F.S., the facility must have a written grievance procedure for receiving and responding to resident complaints and a written procedure to allow residents to recommend changes to facility policies and procedures. The facility must be able to demonstrate that such procedure is implemented upon receipt of a complaint. (c) The telephone number for lodging complaints against a facility or facility staff must be posted in full view in a common area accessible to all residents. The telephone numbers are: the Long-Term Care Ombudsman Program, 1(888)831-0404; , Rights Florida, 1(800)342-0823; the Agency Consumer Hotline 1(888)419-3456, and the statewide toll-free telephone number of the Florida Hotline, 1(800)96- or 1(800)962-2873. The telephone numbers must be posted in close proximity to a telephone accessible by residents	A 030		

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A 030	Continued From page 5 and the text must be a minimum of 14-point font. (d) The facility must have a written statement of its house rules and procedures that must be included in the admission package provided pursuant to rule 59A-36.006, F.A.C. The rules and procedures must at a minimum address the facility's policies regarding: 1. Resident responsibilities; 2. [illegible] and tobacco use; 3. Medication storage; 4. Resident elopement; 5. Reporting resident , neglect, and [illegible]; 6. Administrative and housekeeping schedules and requirements; 7. control, sanitation, and universal precautions; and, 8. The requirements for coordinating the delivery of services to residents by third party providers. (e) Residents may not be required to perform any work in the facility without compensation. 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. (f) The facility must provide residents with convenient access to a telephone to facilitate the resident's right to unrestricted and private communication, pursuant to section 429.28(1)(d), F.S. The facility must allow unidentified telephone calls to residents. For facilities with a licensed capacity of 17 or more residents in which residents do not have private telephones, there must be, at a minimum, a readily accessible telephone on each floor of each building where residents reside. (g) In addition to the requirements of section	A 030		

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A 030	Continued From page 6 429.41(1)(k), F.S., the use of physical . . . . . by a facility on a resident must be reviewed by the resident's physician annually. Any device, including half-bed rails, which the resident chooses to use and can remove or avoid without assistance, is not considered a physical . 429.28 Resident bill of rights.- (1) No resident of a facility shall be deprived of any civil or legal rights, benefits, or privileges guaranteed by law, the Constitution of the State of Florida, or the Constitution of the United States as a resident of a facility. Every resident of a facility shall have the right to: (a) Live in a safe and decent living environment, free from and neglect. (b) Be treated with consideration and respect and with due recognition of personal dignity, individuality, and the need for privacy. (c) Retain and use his or her own clothes and other personal property in his or her immediate living quarters, so as to maintain individuality and personal dignity, except when the facility can demonstrate that such would be unsafe, impractical, or an infringement upon the rights of other residents. (d) Unrestricted private communication, including receiving and sending unopened correspondence, access to a telephone, and visiting with any person of his or her choice, at any time between the hours of 9 a.m. and 9 p.m. at a minimum. Upon request, the facility shall make provisions to extend visiting hours for caregivers and out-of-town guests, and in other similar situations. (e) Freedom to participate in and benefit from community services and activities and to pursue the highest possible level of independence, autonomy, and interaction within the community.	A 030		

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A 030	Continued From page 7 (f) Manage his or her financial affairs unless the resident or, if applicable, the resident's representative, designee, surrogate, guardian, or attorney in fact authorizes the administrator of the facility to provide safekeeping for funds as provided in s. 429.27. (g) Share a room with his or her spouse if both are residents of the facility. (h) Reasonable opportunity for regular exercise several times a week and to be outdoors at regular and frequent intervals except when prevented by inclement weather. (i) Exercise civil and religious liberties, including the right to independent personal decisions. No religious beliefs or practices, nor any attendance at religious services, shall be imposed upon any resident. (j) Assistance with obtaining access to adequate and appropriate health care. For purposes of this paragraph, the term "adequate and appropriate health care" means the management of medications, assistance in making , , for health care services, the provision of or arrangement of transportation to health care ., and the performance of health care services in accordance with s. 429.255 which are consistent with established and recognized standards within the community. (k) At least 45 days' notice of relocation or termination of residency from the facility unless, for medical reasons, the resident is certified by a physician to require an emergency relocation to a facility providing a more skilled level of care or the resident engages in a pattern of conduct that is harmful or offensive to other residents. In the case of a resident who has been adjudicated mentally ., the guardian shall be given at least 45 days' notice of a nonemergency relocation or residency termination. Reasons for	A 030		

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A 030	Continued From page 8 relocation shall be set forth in writing. In order for a facility to terminate the residency of an individual without notice as provided herein, the facility shall show good cause in a court of competent jurisdiction. (l) Present grievances and recommend changes in policies, procedures, and services to the staff of the facility, governing officials, or any other person without , interference, coercion, discrimination, or reprisal. Each facility shall establish a grievance procedure to facilitate the residents' exercise of this right. This right includes access to ombudsman volunteers and advocates and the right to be a member of, to be active in, and to associate with advocacy or special interest groups. (2) The administrator of a facility shall ensure that a written notice of the rights, , and prohibitions set forth in this part is posted in a prominent place in each facility and read or explained to residents who cannot read. The notice must include the statewide toll-free telephone number and e-mail address of the State Long-Term Care Ombudsman Program and the telephone number of the local ombudsman council, the Elder Hotline operated by the Department of Children and Families, and, if applicable, , Rights Florida, where complaints may be lodged. The notice must state that a complaint made to the Office of State Long-Term Care Ombudsman or a local long-term care ombudsman council, the names and identities of the residents involved in the complaint, and the identity of complainants are kept confidential pursuant to s. 400.0077 and that retaliatory action cannot be taken against a resident for presenting grievances or for exercising any other resident right. The facility must ensure a resident's access to a telephone to	A 030		

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A 030	Continued From page 9 call the State Long-Term Care Ombudsman Program or local ombudsman council, the Elder [illegible] Hotline operated by the Department of Children and Families, and [illegible], Rights Florida. 429.27 Property and personal affairs of residents.- (1)(a) A resident shall be given the option of using his or her own belongings, as space permits; choosing his or her roommate; and, whenever possible, unless the resident is adjudicated [illegible] or [illegible] under state law, managing his or her own affairs. (b) The admission of a resident to a facility and his or her presence therein shall not confer on the facility or its owner, administrator, employees, or representatives any authority to manage, use, or dispose of any property of the resident; nor shall such admission or presence confer on any of such persons any authority or responsibility for the personal affairs of the resident, except that which may be necessary for the safe management of the facility or for the safety of the resident. This Statute or Rule is not met as evidenced by: Based on record review and interview, the facility failed to provide a 45-day notice of discharge prior to being discharged from the facility for one out of three sampled residents (Resident #1). Findings included: A review of the facility's admission and discharge log revealed Resident #1's admission date was on [illegible] while discharge date was on [illegible]. The documentation revealed the facility discharged Resident #1 due to not complying with facility rules.	A 030		

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A 030	Continued From page 10 A review of Resident #1's record revealed a notice of discharge to the resident's representative dated . During an interview on at 10:00 AM the owner stated that "the resident has a pattern of elopement and jumping the fence to leave the facility. The documentation in his file works as a 45-day notice because the resident was putting other residents at risk of harm by constantly leaving the facility." Staff A further stated that "based on their regulations they did not need to give the resident a 45-day notice since he was putting other residents at harm." The owner further acknowledged that he did not have a note from the resident's health care provider stating he needed to be removed from the facility. During an interview on at 1:51 PM Resident #1's guardian stated that she received the Notice of discharge from the facility, but it did not have a 45-day notice. It was effective immediately. A review of Resident #1's hospital record revealed the case manager was notified on that the resident would not be accepted to the facility upon discharge from the hospital. A review of Resident #1's record showed no evidence of a 45-day notice being given to the residents or the resident's family member/legal guardian. Review of the documentation provided by the administrator on at 4:44 PM showed a statement dated from Resident #1's psychiatrist stating that Resident #1 is an	A 030		

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A 030	Continued From page 11 inappropriate resident for the facility. During an interview on [redacted] at 3:34 PM the administrator stated he received that documentation from Resident #1's psychiatrist on [redacted] and he did not have it in the resident's file because the psychiatrist had not been in the facility for his monthly visit until that day. Class III	A 030		