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
	AL11964990	A. BUILDING: _____ B. WING _____	R 12/22/2022

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
EMERALD PARK OF HOLLYWOOD	5770 STIRLING ROAD HOLLYWOOD, FL 33021

(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 An unannounced Revisit to Complaint (#2022014802) survey was conducted from 12-19-22 to 12-22-22 at Emerald Park of Hollywood. The facility had an uncorrected deficiency identified at the time of the survey.	{A 000}		
{A 030}	59A-36.007(5) FAC; 429.28( ) FS 429.27 Resident Care - Rights & Facility Procedures 59A-36.007 (5) 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 1 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 standard precautions; 8. The requirements for coordinating the delivery of services to residents by third party providers; 9. Assistive devices; and 10. Physical [illegible]. (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	{A 030}		

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{A 030}	Continued From page 2 residents reside. 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 [redacted] 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. (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	{A 030}		

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{A 030}	Continued From page 3 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 relocation must be set forth in writing and provided to the resident or the resident's legal representative. The notice must state that the resident may contact the State Long-Term Care Ombudsman Program for assistance with	{A 030}		

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{A 030}	Continued From page 4	{A 030}		

relocation and must include the statewide toll-free telephone number of the program. 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

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{A 030}	Continued From page 5 must ensure a resident's access to a telephone to call the State Long-Term Care Ombudsman Program or local ombudsman council, the Elder Hotline operated by the Department of Children and Families, and . . . . , 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 , or , 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 observation, interview and record review the facility failed to ensure 1 out of 5 sampled residents' (Resident #16) right to live in a safe and decent environment. This was evidenced by the facility's failure to implement the necessary interventions to prevent recurring accidents which involved Resident #16 initially injuring her on . The findings included:	{A 030}		

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{A 030}	Continued From page 6 In an interview conducted with Resident #16 on [redacted] at 12:50 PM, she stated that she injured her left ankle about a week ago, when she was transferring from her bed to standing. She stated that this injury happened because whenever she got in and out of bed, her [redacted] came close to the metal bed frame which protruded out of the surface of the box spring. She stated that for this reason, she'd like to purchase a new bed, but no facility staff member has discussed with her how her injury happened and that she wanted to replace her bed. She stated that she felt that getting a new bed which did not have a metal frame will be safer for her since she is used to getting in and out of her bed on her own. She stated that her husband's nurse was in their room at the time this happened and she treated her [redacted] after this happened. In an observation at this time, the resident's metal bed frame, which supported the spring box and mattress, protruded approximately 0.75" towards the end of the resident's bed. In an interview conducted with the Administrator on at 1:30 PM, she did not know anything about Resident #16's accident which led to the resident receiving a on her left ankle. She stated that since this incident was not documented in any of the facility communication logs or resident records, she did not know who was presently treating the resident's at this present time. In an interview conducted with the Administrator on at 1:45 PM, she stated that she recently found out that Resident #16 injured herself on her bed frame on or [redacted], while her husband's nurse was also in the room. She stated that this nurse treated the	{A 030}		

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{A 030}	Continued From page 7 resident's [redacted] immediately after it happened and this incident was not reported to Administration by any staff member. She stated that the facility did not develop an incident report for this event. She stated that the direct care staff members who were caring for the resident must have known and reported this immediately to her, so the facility can follow through with the resident's care and treatment. Review of Resident #16's medical examination dated on [redacted], revealed that she was diagnosed with [redacted], Graves [redacted] and [redacted]. Review of this medical examination indicated that she needed supervision with her activities of daily living (ADLs) and needed special precautions due to [redacted] and [redacted] risks. Review of this medical examination indicated that she needed supervision with ambulation, bathing, [redacted] and transferring, and assistance with toileting and with self-administration of her daily medications. Review of the resident notes from [redacted] to [redacted] revealed that the injury to the resident's left ankle was not documented with any detail. (Photographic evidence was obtained). Review of the facility's undated "Employee policies - HHA (Home Health Aide)/CNA (Certified Nursing Assistant)" revealed that all direct care staff were required to assist residents who needed help, document everything in the communication log and report any issues to the office immediately." (Photographic evidence was obtained). In an interview conducted with the Administrator on [redacted] at 2:25 PM, she stated that Resident #16's accident happened on [redacted] just before	{A 030}		

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{A 030}	Continued From page 8 5 PM when she was being dropped . . . off from the hospital by 3rd party medical transportation personnel. She stated that while they were transferring her onto her bed, the resident scraped her left _, and caused an open . . . . She stated that the resident's husband's Physician was onsite at that time and treated the resident's the same day. She stated that the Physician ordered . . . care and the resident was presently receiving this care from a Home Health agency nurse. She stated that Caregiver Staff J was the staff member responsible for the resident's care at the time of the injury and Caregiver Staff J did not immediately report this to Administration or any other staff member to create an incident report.. She stated that the staff member was required to report this and any of the 3rd party providers who were present as well, since the facility had established policies and procedures for this. She stated that not knowing exactly what happened to the resident during this injury hinders the facility from implementing further interventions to prevent similar occurrences or accidents for the resident. She stated that she was in process of completing the incident report and gathering the Physician's Order for Resident #16's event on . In an interview conducted with the Administrator on . . . . . at 9:45 AM, she stated that she held a staff meeting on at 2:00 PM which related to continual checking of the residents, incident reporting, communications with residents and to keep residents calm. She stated that there were some staff members who did not attend this meeting/inservice, including Caregiver Staff J. She stated that she did not have anything else documented to represent the facility's further efforts to ensure that all of its staff members were	{A 030}		

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{A 030}	Continued From page 9 trained in the subject matter that was presented on . Review of the staff meeting log dated on revealed that there were a total of 17 current staff members who attended this meeting/inservice. Further review of the facility's staff roster indicated that there were approximately 60 staff members who presently worked in the facility. (Photographic evidence was obtained). In an interview conducted with Caregiver Staff J on at 11:45 AM, she stated that she was familiar with Resident #16 and she was caring for her during her shift on . She stated that on at approximately 5:00 PM, she became aware that Resident #16 injured herself with the bed frame of her bed. She stated that she did not know that the resident required staff supervision while ambulating or transferring. She stated that on this day, the resident received a on her left ankle and it was , and the Physician who was in her room was treating this . She stated that she did not know exactly how the resident injured herself. She stated that she did not think to report this to the front office/Administration or to document it on the resident's record/communication log. She stated that she had been working at the facility for over 5 years and she had not received any recent training on incident reporting, resident care interventions, communication or emergency procedures. Class III	{A 030}		