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
	AL11953616	A. BUILDING: _____ B. WING _____	09/05/2023

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
FIVE STAR PREMIER RESIDENCES OF HOLLYWOOD	2480 NORTH PARK 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 Complaint (#2022000495 and #2023007976) and Generator Monitoring survey was conducted on at Five Star Premier Residences of Hollywood. The facility had a deficiency identified related to Complaint #2023007976 at the time of the survey.	A 000		
A 165	429.23(&) FS Risk Mgmt & QA 429.23 Internal risk management and quality assurance program; adverse incidents and reporting requirements.- (1) Every facility licensed under this part may, as part of its administrative functions, voluntarily establish a risk management and quality assurance program, the purpose of which is to assess resident care practices, facility incident reports, deficiencies cited by the agency, adverse incident reports, and resident grievances and develop plans of action to correct and respond quickly to identify quality differences. (2) Every facility licensed under this part is required to maintain adverse incident reports. For purposes of this section, the term, "adverse incident" means: (a) An event over which facility personnel could exercise control rather than as a result of the resident's condition and results in: 1. ; 2. or , damage; 3. Permanent ; 4. or of bones or joints; 5. Any condition that required medical attention to which the resident has not given his or her consent, including failure to honor advanced directives; 6. Any condition that requires the transfer of the resident from the facility to a unit providing more acute care due to the incident rather than the	A 165		

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A 165	Continued From page 1 resident's condition before the incident; or 7. An event that is reported to law enforcement or its personnel for investigation; or (b) Resident elopement, if the elopement places the resident at risk of harm or injury. (3) Licensed facilities shall provide within 1 business day after the occurrence of an adverse incident, through the agency's online portal, or if the portal is offline, by electronic mail, a preliminary report to the agency on all adverse incidents specified under this section. The report must include information regarding the identity of the affected resident, the type of adverse incident, and the status of the facility's investigation of the incident. (4) Licensed facilities shall provide within 15 days, through the agency's online portal, or if the portal is offline, by electronic mail, a full report to the agency on all adverse incidents specified in this section. The report must include the results of the facility's investigation into the adverse incident. (6) [illegible], neglect, or [illegible] must be reported to the Department of Children and Families as required under chapter 415. (7) The information reported to the agency pursuant to subsection (3) which relates to persons licensed under chapter 458, chapter 459, chapter 461, chapter 464, or chapter 465 shall be reviewed by the agency. The agency shall determine whether any of the incidents potentially involved conduct by a health care professional who is subject to disciplinary action, in which case the provisions of s. 456.073 apply. The agency may investigate, as it deems appropriate, any such incident and prescribe measures that must or may be taken in response to the incident. The agency shall review each incident and determine whether it potentially involved conduct	A 165		

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A 165	Continued From page 2 by a health care professional who is subject to disciplinary action, in which case the provisions of s. 456.073 apply. (8) If the agency, through its receipt of the adverse incident reports prescribed in this part or through any investigation, has reasonable belief that conduct by a staff member or employee of a licensed facility is grounds for disciplinary action by the appropriate board, the agency shall report this fact to such regulatory board. (9) The adverse incident reports and preliminary adverse incident reports required under this section are confidential as provided by law and are not discoverable or admissible in any civil or administrative action, except in disciplinary proceedings by the agency or appropriate regulatory board. (10) The agency may adopt rules necessary to administer this section. This Statute or Rule is not met as evidenced by: Based on interview and record review, the facility failed to submit a preliminary Adverse Incident Report within 1 business day after being made aware of a reportable incident to the Agency for Health Care Administration (AHCA) for 1 of 2 sampled residents, Resident #2 who was determined to have suffered a [redacted]. The findings included: Resident #2 was admitted to the facility on [redacted] and resided in the Memory Care Unit. Review of the Resident Health Assessment (AHCA form 1823) dated [redacted], documented Resident #2 had diagnoses to include [redacted], and unsteady gait. Her [redacted] status was	A 165		

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A 165	Continued From page 3 documented as forgetful at times. For her activities of daily living she required supervision with [redacted], bathing and grooming. She was independent with ambulation, eating and transferring. Under Special Precautions is documented Resident #2 required Precautions. Review of the resident record revealed on [redacted] at approximately 6:45 AM, Resident #2 complained to Licensed Practical Nurse Staff D of [redacted] in her left [redacted], which was reported to the Memory Care Director. On [redacted] at 10:00 AM, the Nurse Practitioner examined Resident #2 and an ultra sound and left [redacted], were ordered. On [redacted] at 4:30 PM, Resident #2's Physician notified the facility the left [redacted] revealed a left [redacted]. Resident #2 was subsequently transferred to the hospital for evaluation and treatment. Resident #2 underwent surgery on [redacted] for repair of the left [redacted]. On [redacted] at 12:40 PM, during an interview conducted with the Administrator and Assistant Administrator, it was stated the one day Adverse Incident Report was not filed due to no one witnessed what happened to Resident #2 and they had no proof her injury came from a [redacted]. They further stated when it was reported, it was reported as an injury of unknown origin. Review of the Adverse Incident Report filed revealed it was submitted on [redacted] and not within one business day of being advised Resident #2 had a left [redacted] diagnosed by [redacted], on [redacted].	A 165		

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A 165	Continued From page 4 On . . . . . at 4:30 PM, during an interview conducted with the Administrator and Assistant Administrator, they acknowledged the finding and no additional documentation was provided for review. Class III	A 165		