AHCA
FLORIDA AGENCY FOR HEALTH CARE ADMINISTRATION

RICK SCOTT
GOVERNOR

*Better Health Care for all Floridians*

ELIZABETH DUDEK
SECRETARY

2013

Administrator
Quiet Oaks
11311 SW 95th Circle
Ocala, FL 34481

Dear Administrator:

Re: CCR #2013002136

This letter reports the findings of a complaint survey that was conducted on 2013 by a representative of this office.

Enclosed is the provider's copy of the State (3020) Form, which indicates the deficiencies that were identified on the day of the visit. Section 408.811(4), Florida Statutes, requires that you correct these deficiencies within thirty days of the date of this letter unless the Agency has approved another timeframe. Staff from this office will conduct a review after 2013 to verify that the necessary corrections are in place to correct the deficiencies identified on your survey.

The Quality Assurance Questionnaire has long been employed to obtain your feedback following survey activity. This form has been placed on the Agency's website at http://ahca.myflorida.com/Publications/Forms.shtml as a first step in providing a web-based interactive consumer satisfaction survey system. You may access the questionnaire through the link under Health Facilities and Providers on this page. Your feedback is encouraged and valued, as our goal is to ensure the professional and consistent application of the survey process.

Thank you for the assistance provided to the surveyor. Should you have any questions please call this office at (386) 462-6201.

Sincerely,

Stephen Burgin for,

Kriste J. Mennella
Field Office Manager

KJM/amw

Enclosure
XG90

Headquarters
2727 Mahan Drive
Tallahassee, FL 32308
http://ahca.myflorida.com

Alachua Field Office
14101 N W Hwy 441, Suite 800
Alachua, FL 32615-5669
Phone (386) 462-6201; Fax (386) 418-5300

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 |
|---|---|---|---|
| | AL11964742 | A. BUILDING: _____ B. WING _____ | |

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| QUIET OAKS | 11311 SW 95TH CIRCLE OCALA, FL 34481 |

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| A 000 | Initial Comments<br><br>An unannounced visit to conduct a Complaint investigation for # 2013002136 at Quiet Oaks on . Deficiencies were identified in regards to Chapter 429.01-429.54, 58A-5.0131 F.A.C. | A 000 | | |
| A 030 SS=D | 58A-5.0182(6) FAC; 429.28 FS Resident Care - Rights & Facility Procedures<br><br>(6) RESIDENT RIGHTS AND FACILITY PROCEDURES.<br>(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 Council shall be posted in full view in a freely accessible resident area, and included in the admission package provided pursuant to Rule 58A-5.0181, F.A.C.<br>(b) In accordance with Section 429.28, F.S., the facility shall have a written grievance procedure for receiving and responding to resident complaints, and for 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.<br>(c) The address and telephone number for lodging complaints against a facility or facility staff shall be posted in full view in a common area accessible to all residents. The addresses and telephone numbers are: the District Long-Term Care Ombudsman Council, 1(888)831-0404; the Advocacy Center for Persons with 1(800)342-0823; the Florida Local Advocacy Council, 1(800)342-0825; and the Agency Consumer Hotline 1(888)419-3456.<br>(d) The statewide toll-free telephone number of the Florida Hotline " 1(800)9€ or 1(800)962-2873 " shall be posted in full view in a common area accessible to all residents. | A 030 | | |

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| A 030 | Continued From page 1<br>(e) The facility shall have a written statement of its house rules and procedures which shall be included in the admission package provided pursuant to Rule 58A-5.0181, F.A.C. The rules and procedures shall address the facility ' s policies with respect to such issues, for example, as resident responsibilities, the facility ' s ..... and tobacco policy, medication storage, the delivery of services to residents by third party providers, resident elopement, and other administrative and housekeeping practices, schedules, and requirements.<br>(f) Residents may not be 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.<br>(g) The facility shall 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 shall not prohibit 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 shall be, at a minimum, an accessible telephone on each floor of each building where residents reside.<br>(h) Pursuant to Section 429.41, F.S., the use of physical ..... shall be limited to half-bed rails, and only upon the written order of the resident ' s physician, who shall review the order biannually, and the consent of the resident or the resident ' s representative. Any device, including half-bed rails, which the resident chooses to use and can remove or avoid without assistance shall | A 030 | | |

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| A 030 | Continued From page 2<br>not be considered a physical<br><br>429.28 Resident bill of rights.-<br>(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:<br>(a) Live in a safe and decent living environment, free from and neglect.<br>(b) Be treated with consideration and respect and with due recognition of personal dignity, individuality, and the need for privacy.<br>(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.<br>(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.<br>(e) Freedom to participate in and benefit from community services and activities and to achieve the highest possible level of independence, autonomy, and interaction within the community.<br>(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. | A 030 | | |

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| A 030 | Continued From page 3<br>(g) Share a [redacted] his or her spouse if both are residents of the facility.<br>(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.<br>(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.<br>(j) Access to adequate and appropriate health care consistent with established and recognized standards within the community.<br>(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 [redacted], the guardian shall be given at least 45 days ' notice of a nonemergency relocation or residency termination. Reasons for 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.<br>(l) Present grievances and recommend changes in policies, procedures, and services to the staff of the facility, governing officials, or any other person without [redacted] 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 | A 030 | | |

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| A 030 | Continued From page 4<br>special interest groups.<br><br>This Statute or Rule is not met as evidenced by:<br>Based on observation record review and interview the facility failed to honor resident Rights for 1 of 3 residents (#1) specific to resolving grievances regarding staff relations and<br><br>Findings:<br><br>During an observation /interview with Resident #1 on : at approximately 8:10 AM, she reported there was 1 staff she did not like, Staff A. She stated she told her family and the staff member she did not want to work with her. She stated she could not understand what Staff A says because of her thick accent. She described an incident " last week " where she /slid off the bed because Staff A told her to put her shoes on and she cannot do that but tried anyway. She showed 2 nickel sized on her right knee from the In addition, she complained the facility has never given her a key to her ! they were recently locked out. She stated there was no one in the building with a key and they opened the door with a credit card. She stated she still did not have a key to the She stated every staff mamber in the facility knew about the lock out and none of them had a key either. She stated no one from the facility has discussed the matter with her since that incident even though she mentions it to the staff daily. She had no further information.<br><br>During an interview with Resident #1 and her 2 daughters, one in person as she comes to the facility daily and the other was on the phone | A 030 | | |

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| A 030 | Continued From page 5 | A 030 | | |

during this same interview about 9:30 AM. They complained they have never been given a key to the So when they took Resident #1 to the hospital emergency on as the facility had asked them for an examination of a , they locked the door behind them when they left. Upon return they did not have a key and no staff in the facility had a key. They opened the door with a credit card. They state no one from the facility has discussed the matter with them at all. They complained they have still not received a key to the door.

They complained they went to the Director of Nursing in (not sure of the day) and told her very bluntly they did not want the Direct Care Staff A to work with their mother as there was a communication problem. They believe the on was due to miscommunication between Staff A and the resident. They stated the same staff member works with their mother every evening. They stated there was no offer or request for them to put their concern in writing. So they did not. They stated the DON told them they would take care of the situation. They report there has been no subsequent communication regarding their complaint.

Review of the Facility's policies on Resident Grievance revised states: Obtain Grievance Form, fill out and sign and date. Give the form to Department Head or Administrative Office with a report back to the resident within 10 days.

Review of the complaint log revealed there had been no complaints from anyone since

Review of Resident #1's record revealed Nurses Notes dated "Late Entry from 3-11 shift", Staff A had reported to the DON Resident #1 was

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| A 030 | Continued From page 6<br><br>observed on the floor, next to her bed. " Per resident , she was sitting on the bed trying to get her shoe, bent forward, lost balance and landed on floor." Emergency services were called but the daughters chose not to have their mother taken to the hospital. X rays were completed the next day with no . No further information documented about staff /resident interaction during that incident.<br><br>During an interview with the Administrator on at approximately 11:30 AM he stated he had hear from staff Resident #1 and her family did not want the resident working with Staff A. He stated they had not filled out a form and they did not speak to him personally. He stated he does not use the Grievance forms or Log. He had no further information regarding the complaint . Further he stated he does not know where the key to Resident #1 ' s but he thought staff had provided a key after they were locked out. He had no documentation regarding that incident.<br><br>An interview with the Director of Nursing and the Administrator on at approximately 12:30 PM revealed the daughters of Resident #1 made a verbal complaint to the Director of Nursing within the past couple of weeks. She stated they told her there was a communication gap between their mother and Staff A, that the situation was not working out. The DON stated she did not document the conversation or ask them to make the complaint in writing. There was no information provided regarding an investigation or resolutions to either of the complaints.<br><br>Class III | A 030 | | |

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| A 152 | Continued From page 7 | A 152 | | |
| A 152 SS=D | 58A-5.023(3) FAC Physical Plant - Safe Living Environ/Other<br><br>(3) OTHER REQUIREMENTS.<br>(a) All facilities must:<br>1. Provide a safe living environment pursuant to Section 429.28(1)(a), F.S.; and<br>2. Must be maintained free of hazards; and<br>3. Must ensure that all existing architectural, mechanical, electrical and structural systems and appurtenances are maintained in good working order.<br>(b) Pursuant to Section 429.27, F.S., residents shall be given the option of using their own belongings as space permits. When the facility supplies the furnishings, each resident sleeping area must have at least the following furnishings:<br>1. A clean, comfortable bed with a mattress no less than 36 inches wide and 72 inches long, with the top surface of the mattress a comfortable height to ensure easy access by the resident;<br>2. A closet or wardrobe space for hanging clothes;<br>3. A dresser, chest or other furniture designed for storage of personal effects;<br>4. A table, bedside lamp or floor lamp, and waste basket; and<br>5. A comfortable chair, if requested.<br>(c) The facility must maintain master or duplicate keys to resident to be used in the event of an emergency.<br>(d) Residents who use portable bedside commodes must be provided with privacy during use.<br>(e) Facilities must make available linens and personal laundry services for residents who require such services. Linens provided by a facility shall be free of tears, stains and not be | A 152 | | |

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| A 152 | Continued From page 8<br><br>This Statute or Rule is not met as evidenced by:<br>Based on observation record review and interview the facility failed to ensure 1 of 3 residents (#1) had a key to the door locks in her .....<br><br>Findings:<br><br>During an observation/interview with Resident #1 on at approximately 8:10 AM, she complained the facility has never given her a key to her ..... they were recently locked out. She stated there was no one in the building with a key and they opened the door with a credit card. She stated she still did not have a key to the ..... She stated every staff mamber in the facility knew about the lock out and none of them had a key either. She had no further information.<br><br>During an interview with Resident #1 's 2 daughters, one in person as she comes to the facility daily and the other was on the phone during this same interview about 9:30 AM. They complained they have never been given a key to the ..... So when they took Resident #1 to the hospital emergency on , as the facility had asked them for an examination of a ..... they locked the door behind them when they left. Upon return they did not have a key and no staff in the facility had a key. They opened the door with a credit card. They complained they have still not received a key to the door.<br><br>During an interview with the Administrator on at approximately 11:30 AM , he stated he does not know where the key to Resident #1 's | A 152 | | |

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| A 152 | Continued From page 9<br>. . . . . but he thought staff had provided a key after they were locked out. He had no documentation regarding that incident.<br><br>Class III | A 152 | | |