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
	AL11966600	A. BUILDING: _____ B. WING _____	R 11/18/2019

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
TRANSFORMATION ASSISTED LIVING	1963 BLVD ORLANDO, FL 32808

(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 revisit to the biennial re-licensure survey with Limited Nursing Service was conducted at Transformation Assisted Living Facility on . . . . . . Deficiencies were identified at the time of the survey.	{A 000}		
{A 054} SS=B	58A-5.0185(5) FAC Medication - Records (5) MEDICATION RECORDS. (a) For residents who use a pill organizer managed in subsection (2), the facility must keep either the original labeled medication container; or a medication listing with the prescription number, the name and address of the issuing pharmacy, the health care provider's name, the resident's name, the date dispensed, the name and strength of the drug, and the directions for use. (b) The facility must maintain a daily medication observation record for each resident who receives assistance with self-administration of medications or medication administration. A medication observation record must be immediately updated each time the medication is offered or administered and include: 1. The name of the resident and any known ˽ the resident may have; 2. The name of the resident's health care provider and the health care provider's telephone number; 3. The name, strength, and directions for use of each medication; and, 4. A chart for recording each time the medication is taken, any missed dosages, refusals to take medication as prescribed, or medication errors. (c) For medications that serve as chemical ˽ , the facility must, pursuant to section 429.41, F.S., maintain a record of the prescribing physician's annual evaluation of the use of the	{A 054}		

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{A 054}	Continued From page 1 medication. This Statute or Rule is not met as evidenced by: DEFICIENCY REMAINED UNCORRECTED Based on record reviews and interview, the facility failed to ensure the Medication Observation Record (MOR) for 3 of 5 sampled residents (#3, #4 and #5) was properly updated. Findings: Review of the MORs for Resident's #3, #4 and #5 revealed they received assistance with the self-administration of their medications and there were blank spaces on their MORs and there were no explanations noted on their MORs that noted if the resident's received or did not receive their medications as follows: 1. Review of the MORs on at 8 AM for resident #3 revealed blank spaces for , 10 milligrams (mg) one daily; , 81 mg one daily; , 1 gram(gm) one every 12 hours; 12.5 mg-one twice daily and , IR 50 mg one twice daily. 2. Review of the MORs on at 8 PM for resident #4 revealed blank spaces for , 100 mg 1 twice daily; 8.6 mg take 2 at bedtime 3. Review of the MORs on at 8 AM for resident #5 revealed blank spaces for , 5 milligrams (mg) one daily and on at 8 PM for softener 100 mg-1 at bedtime. On at 2:45 PM, the administrator reviewed the MORs, confirmed the findings and	{A 054}		

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{A 054}	Continued From page 2 called the staff who worked on 11/19/19. The administrator said at the time, the staff said she did not update the MOR after giving the residents their medications. Class	{A 054}		
{A 082} SS=D	58A-5.0191(4) FAC Training - / (4) / (/). Pursuant to section 381.0035, F.S., all facility employees, with the exception of employees subject to the requirements of section 456.033, F.S., must complete a one-time education course on and , including the topics prescribed in the section 381.0035, F.S. New facility staff must obtain the training within 30 days of employment. Documentation of compliance must be maintained in accordance with subsection (12), of this rule. This Statute or Rule is not met as evidenced by: DEFICIENCY REMAINED UNCORRECTED Based on personnel record review and interview, the facility failed to ensure that 1 of 1 sampled direct care staff (A) had evidence of the completion of a one-time education course on ( ) and (Acquired -Deficiency ,), including the topics prescribed in the Section 381.0035, F.S. within 30 days of employment. Findings: Review of the personnel record for staff A, a caregiver hired , revealed there was no	{A 082}		

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{A 082}	Continued From page 3 evidence to confirmed she had completed a one-time education course on and . On at 2:30 PM, the administrator provided a certificate for the borne , training, review of the certificate provided revealed there was no documentation to confirm the training included topics on . The administrator said at the time, that she thought the training was the same as . She could not provide evidence to confirm that staff a, had received a one-time education course on including the topics prescribed in the Section 381.0035, F.S. within 30 days of employment. Class III	{A 082}		