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
	AL11966928	A. BUILDING: _____ B. WING _____	10/25/2019

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
NORWOOD ASSISTED LIVING, INC	325 NORWOOD ST MERRITT ISLAND, FL 32953

(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 Change of Ownership (CHOW) survey was conducted on . . . . . Norwood Assisted Living Inc. had deficiencies at the time of visit.	A 000		
A 025 SS=D	429.26(7) FS; 58A-5.0182(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. 58A-5.0182 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 58A-5.020, 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 resident's whereabouts. The resident may travel independently in the community. (d) Contacting the resident's health care provider	A 025		

AHCA Form 3020-0001

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE | (X6) DATE

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A 025	Continued From page 1 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 observation, resident record review and interview, the facility failed to provide appropriate supervision with care and services to meet the needs for 2 of 3 sampled residents as required in an assisted living facility (#3 & 5). Findings: 1. Observation on at 9:50 AM found a small prefilled Dixie cup with 3 pills found unattended, that had written on the small cup as "Hos 8am" along with some keys found to the med cart located on the top of the medication cart. Picture evidence obtained. The medication cart was unlocked, not secured. On at 9:55 AM, staff E was asked whose medications were in the cup and why were they were not secured in the medication cart. Staff E answered that the small cup of medications belonged to resident #3. Staff E did not answer why the pills were left prefilled unattended or keys left on top of the medication cart.	A 025		

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A 025	Continued From page 2 Resident #3's record review revealed admission date . An 1823 Health Assessment dated reflected that the resident required assistance with all Activities of Daily Living (ADLs) except for eating and needs assistance with self-administration of medications. The Medication Observation Record (MOR) and resident #3's medication prescription bubble pack revealed the three unidentified pills in the small Dixie cup found on top of the medication cart were , 2.5 milligrams (mg), 75 mg. and over the counter . Photographic evidence obtained. 2. Observation on at 10:50 AM found a small prefilled Dixie cup with 2 pills found inside the toilet paper roll in resident #5's room located on top of the meal tray table. Photographic evidence obtained. On at 10:52 AM, resident #5 stated that staff E left the cup of pills there this morning when he asleep, and he thought he had taken all his morning medications. Resident #5 then picked the cup up and took the medication. Resident #5 stated that staff E usually leaves his medications on top of the meal tray table for him to take once he wakes up from sleeping because staff E did not want to wake him up or disturb him. On at 11 AM, the owner arrived at the facility and the Administrator explained that medications were found in resident #5's room. At 11:10 AM, the owner was shown the photographic evidence of resident #3's medications, and the keys found unattended on the medication cart and the medications found in resident #5's room.	A 025		

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A 025	Continued From page 3 At 11:20 AM, the owner spoke with staff E who admitted that she left the unattended prefilled cup of medications on top of the med cart for resident #3 and left unattended prefilled cup of medications in resident #5's room. Resident #5's record review revealed admission date . An 1823 Health Assessment dated . . . . . documented that assistance with all Activities of Daily Living (ADLs) except for eating and needs assistance with self-administration of medications. In further review, the . . . . . Medication Observation Record (MORs) and resident #5's medication prescription bubble pack revealed the two unidentified pills in the small Dixie cup found in his room were . . 20 milligrams (mg.), and , 15 mg. Photographic evidence obtained. On . . . . . at 5:30 PM during the exit conference, the Owner confirmed the findings. Class III	A 025		
A 055 SS=D	58A-5.0185(6) FAC Medication - Storage and Disposal (6) MEDICATION STORAGE AND DISPOSAL. (a) In order to accommodate the needs and preferences of residents and to encourage residents to remain as independent as possible, residents may keep their medications, both prescription and over-the-counter, in their possession both on or off the facility premises. Residents may also store their medication in their rooms or apartments if either the room is kept locked when residents are absent or the medication is stored in a secure place that is out	A 055		

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A 055	Continued From page 4 of sight of other residents. (b) Both prescription and over-the-counter medications for residents must be centrally stored if: 1. The facility administers the medication; 2. The resident requests central storage. The facility must maintain a list of all medications being stored pursuant to such a request; 3. The medication is determined and documented by the health care provider to be hazardous if kept in the personal possession of the person for whom it is prescribed; 4. The resident fails to maintain the medication in a safe manner as described in this paragraph; 5. The facility determines that, because of physical arrangements and the conditions or habits of residents, the personal possession of medication by a resident poses a safety hazard to other residents, or 6. The facility's rules and regulations require central storage of medication and that policy has been provided to the resident before admission as required in rule 58A-5.0181, F.A.C. (c) Centrally stored medications must be: 1. Kept in a locked cabinet; locked cart; or other locked storage receptacle, room, or area at all times; 2. Located in an area free of dampness and abnormal temperature, except that a medication requiring refrigeration must be kept refrigerated. Refrigerated medications must be secured by being kept in a locked container within the refrigerator, by keeping the refrigerator locked, or by keeping the area in which the refrigerator is located locked; 3. Accessible to staff responsible for filling pill-organizers, assisting with self-administration of medication, or administering medication. Such staff must have ready access to keys or codes to	A 055		

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A 055	Continued From page 5 the medication storage areas at all times; and, 4. Kept separately from the medications of other residents and properly closed or sealed. (d) Medication that has been discontinued but has not expired must be returned to the resident or the resident's representative, as appropriate, or may be centrally stored by the facility for future use by the resident at the resident's request. If centrally stored by the facility, the discontinued medication must be stored separately from medication in current use, and the area in which it is stored must be marked "discontinued medication." Such medication may be reused if prescribed by the resident's health care provider. (e) When a resident's stay in the facility has ended, the administrator must return all medications to the resident, the resident's family, or the resident's guardian unless otherwise prohibited by law. If, after notification and waiting at least 15 days, the resident's medications are still at the facility, the medications are considered abandoned and may disposed of in accordance with paragraph (f). (f) Medications that have been abandoned or have expired must be disposed of within 30 days of being determined abandoned or expired and the disposal must be documented in the resident's record. The medication may be taken to a pharmacist for disposal or may be destroyed by the administrator or designee with one witness. (g) Facilities that hold a Special-ALF permit issued by the Board of Pharmacy may return dispensed medicinal drugs to the dispensing pharmacy pursuant to rule 64B16-28.870, F.A.C. This Statute or Rule is not met as evidenced by: Based on observation, resident record review and interview, the facility failed to maintain medications for 2 of 3 sampled residents (#3 and	A 055		

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A	Continued From page 6 #5) in a safe manner in being kept in a locked cabinet; locked cart; or other locked storage receptable, room or area at all times as required. Findings: 1. Observation on [redacted] at 9:50 AM, a small prefilled Dixie cup with 3 pills found unattended, that had written on the small cup as "Hos 8am" along with some keys found to the med cart located on the top of the medication cart. "Picture evidence obtained". Furthermore, the medication cart was unlocked, not secured. On [redacted] at 9:55 AM, it was asked to staff E who these medications belong too and why were they not secured in the medication cart? Staff E answered that the small cup of medications belongs to resident #3. Staff E did not answer why the pills were left prefilled unattended or keys left on top of the medication cart. Resident #3's record review revealed admission date [redacted]. An 1823 Health Assessment dated [redacted] documented that assistance was needed with self-administration of medications. In further review, the [redacted] Medication Observation Record (MORs) and resident #3's medication prescription bubble pack revealed the three unidentified pills in the small Dixie cup found on top of the med cart were: [redacted] 2.5 milligrams (mg); [redacted] 75mg; and over the counter [redacted] were not locked or not secured. "Photographic evidence obtained" 2. Observation on [redacted] at 10:50 AM, a small prefilled Dixie cup with 2 pills found inside the toilet paper roll in resident #5's room located on top of the meal tray table. "Picture evidence obtained".	A 055		

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A 055	Continued From page 7 An interview on at 10:52 AM with resident #5 and asked him about the two pills left in the small Dixie cup inside the toilet paper roll. Resident #5 stated that the staff E left it there this morning when he asleep and he thought he had taken all his morning medications. Resident #5 picked the cup up and took the medication. Furthermore, resident #5 stated that staff E usually always leave his medications on top of the meal tray table for him to take once he wakes up from sleeping. Staff E did not want to wake him up or disturb him and at this time Administrator came to the room and observed. At 11:20 AM, the Owner spoke with staff E who admitted that she left the unattended prefilled cup of medications on top of the med cart for resident #3 and left unattended prefilled cup of medications in resident #5's room. The owner terminated staff E immediately and told her to leave the facility. Resident #5's record review revealed admission date . An 1823 Health Assessment dated documented that assistance was needed with self-administration of medications. In further review, the Medication Observation Record (MORs) and resident #5's medication prescription bubble pack revealed the two unidentified pills in the small Dixie cup found in his room were: 20 milligrams (mg); and , 15mg were not locked or not secured. "Photographic evidence obtained" On at 5:30 PM during the exit conference, the Owner confirmed the findings.	A 055		

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A 055	Continued From page 8 Class III	A 055		
A 081 SS=D	58A-5.0191( ) FAC Training - Staff In-Service (2) STAFF PRESERVICE ORIENTATION. (a) Facilities must provide a preservice orientation of at least 2 hours to all new assisted living facility employees who have not previously completed core training as detailed in subsection (1). (b) New staff must complete the preservice orientation prior to interacting with residents. (c) Once complete, the employee and the facility administrator must sign a statement that the employee completed the preservice orientation which must be kept in the employee's personnel record. (d) In addition to topics that may be chosen by the facility administrator, the preservice orientation must cover: 1. Resident's rights; and, 2. The facility's license type and services offered by the facility. (3) STAFF IN-SERVICE TRAINING. Facility administrators or managers shall provide or arrange for the following in-service training to facility staff: (a) Staff who provide direct care to residents, other than nurses, certified nursing assistants, or home health aides trained in accordance with rule 59A-8.0095, F.A.C., must receive a minimum of 1 hour in-service training in control, including universal precautions and facility sanitation procedures, before providing personal care to residents. The facility must use its control policies and procedures when offering this training. Documentation of compliance with the staff training requirements of	A 081		

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A 081	Continued From page 9 29 CFR 1910.1030, relating to . . . . borne , . . , may be used to meet this requirement. (b) Staff who provide direct care to residents must receive a minimum of 1 hour in-service training within 30 days of employment that covers the following subjects: 1. Reporting adverse incidents. 2. Facility emergency procedures including chain-of-command and staff roles relating to emergency evacuation. (c) Staff who provide direct care to residents, who have not taken the core training program, shall receive a minimum of 1 hour in-service training within 30 days of employment that covers the following subjects: 1. Resident rights in an assisted living facility. 2. Recognizing and reporting resident , neglect, and , ... The facility must use its prevention policies and procedures when offering this training. (d) Staff who provide direct care to residents, other than nurses, CNAs, or home health aides trained in accordance with rule 59A-8.0095, F.A.C., must receive 3 hours of in-service training within 30 days of employment that covers the following subjects: 1. Resident behavior and needs. 2. Providing assistance with the activities of daily living. (e) Staff who prepare or serve food, who have not taken the assisted living facility core training must receive a minimum of 1-hour-in-service training within 30 days of employment in safe food handling practices. (f) All facility staff shall receive in-service training regarding the facility's resident elopement response policies and procedures within thirty (30) days of employment.	A 081		

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A 081	Continued From page 10 1. All facility staff shall be provided with a copy of the facility's resident elopement response policies and procedures. 2. All facility staff shall demonstrate an understanding and competency in the implementation of the elopement response policies and procedures. This Statute or Rule is not met as evidenced by: Based on observation, personnel record review and interview, the facility failed to provide the 2-hour preservice orientation training for 2 of 4 sampled direct care staff (A and B) before interacting with the residents as required. Findings: 1. Staff A's personnel record review revealed hire date . There was no documented evidence of the 2-hour preservice orientation training was completed including the following topics: a. Resident rights; and b. Facility's license type and services offered by the facility. Observation on at 9:50 AM, staff A was working, interacting and assisting with all the residents Activities of Daily Living (ADLs) and reviewed listed to work today from 7am-7pm on the staff work schedule. 2. Staff B's personnel record review revealed hire date . There was no documented evidence of the 2-hour preservice orientation training was completed including the following topics: a. Resident rights; and b. Facility's license type and services offered by	A 081		

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A 081	Continued From page 11 the facility. Further review revealed that staff B was listed to work tonight at 7pm-7am on staff work schedule. On at 4:30 PM, an interview with the Owner confirmed the findings. Class III	A 081		
A 084 SS=D	58A-5.0191(6) FAC 429.52 (6), FS Training - Assis Self-Admin Meds & Med Mgmt 58A-5.0191 (6) ASSISTANCE WITH THE SELF-ADMINISTRATION OF MEDICATION AND MEDICATION MANAGEMENT. Unlicensed persons who will be providing assistance with the self-administration of medications as described in rule 58A-5.0185, F.A.C., must meet the training requirements pursuant to section 429.52(6), F.S., prior to assuming this responsibility. Courses provided in fulfilment of this requirement must meet the following criteria: (a) Training must cover state law and rule requirements with respect to the supervision, assistance, administration, and management of medications in assisted living facilities; procedures and techniques for assisting the resident with self-administration of medication including how to read a prescription label; providing the right medications to the right resident; common medications; the importance of taking medications as prescribed; recognition of side effects and adverse reactions and procedures to follow when residents appear to be experiencing side effects and adverse reactions; documentation and record keeping; and medication storage and disposal. Training shall	A 084		

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A 084	Continued From page 12 include demonstrations of proper techniques, including techniques for control, and ensure unlicensed staff have adequately demonstrated that they have acquired the skills necessary to provide such assistance. (b) The training must be provided by a registered nurse or licensed pharmacist who shall issue a training certificate to a trainee who demonstrates, in person and both physically and verbally, the ability to: 1. Read and understand a prescription label; 2. Provide assistance with self-administration in accordance with section 429.256, F.S., and rule 58A-5.0185, F.A.C., including: a. Assist with oral dosage forms, dosage forms, and and dosage forms; b. Measure liquid medications, break scored tablets, and crush tablets in accordance with prescription directions; c. Recognize the need to obtain clarification of an "as needed" prescription order; d. Recognize a medication order which requires judgment or discretion, and to advise the resident, resident's health care provider or facility employer of inability to assist in the administration of such orders; e. Complete a medication observation record; f. Retrieve and store medication; g. Recognize the general signs of adverse reactions to medications and report such reactions; h. Assist residents with syringes that are prefilled with the proper dosage by a pharmacist and that are prefilled by the manufacturer by taking the medication, in its previously dispensed, properly labeled container, from where it is stored, and bringing it to the resident for self-injection;	A 084		

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A 084	Continued From page 13 i. Assist with [illegible]; j. Use a [illegible] to perform [illegible] testing; k. Assist residents with [illegible] and continuous positive airway pressure (CPAP) devices, excluding the titration of the [illegible] levels; l. Apply and remove [illegible] stockings and hosiery; m. Placement and removal of [illegible] bags, excluding the removal of the [illegible] or manipulation of the [illegible] site; and, n. Measurement of [illegible] rate, temperature, and [illegible] rate. (c) Unlicensed persons, as defined in section 429.256(1)(b), F.S., who provide assistance with self-administered medications and have successfully completed the initial 6 hour training, must obtain, annually, a minimum of 2 hours of continuing education training on providing assistance with self-administered medications and safe medication practices in an assisted living facility. The 2 hours of continuing education training may be provided online. (d) Trained unlicensed staff who, prior to the effective date of this rule, assist with the self-administration of medication and have successfully completed 4 hours of assistance with self-administration of medication training must complete an additional 2 hours of training that focuses on the topics listed in sub-subparagraphs (6)(b)2.h.-n. of this section, before assisting with the self-administration of medication procedures listed in sub-subparagraphs (6)(b)2.h.-n. 429.52 (6), FS (6) Staff involved with the management of medications and assisting with the	A 084		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	AL11966928	A. BUILDING: _____ B. WING _____	10/25/2019

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
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A 084	Continued From page 14 self-administration of medications under s. 429.256 must complete a minimum of 6 additional hours of training provided by a registered nurse, licensed pharmacist, or department staff. The department shall establish by rule the minimum requirements of this additional training. This Statute or Rule is not met as evidenced by: Based on personnel record review and interview, the facility failed to obtain the initial 6 hours required training in assistance self-administration of medications for 2 of 4 sampled unlicensed staff (A and B) had successfully completed. Findings: 1. Staff A's personnel record review revealed hire date . There was documentation for only 4-hour initial training completed in assistance with self-administration of medications dated , missing the additional 2 hours required for all unlicensed staff hired after . "Photographic evidence obtained" On at 10:10 AM, interviewed staff A who confirmed she assist with self-administration of medications to the residents sometimes. 2. Staff B's personnel record review revealed hire date . There was documentation for only 4 hours initial training completed in assistance with self-administration of medications dated , missing the additional 2 hours required for all unlicensed staff hired after . "Photographic evidence obtained" On at 3:30 PM, interviewed staff B who stated that she assists with	A 084		

Agency for Health Care Administration

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A 084	Continued From page 15 self-administration of medications to the residents. On at 4:30 PM, an interview with the owner confirmed the findings. Class III	A 084		