

Agency for Health Care Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11969264	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 09/02/2020
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NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE

PARKSIDE ASSISTED LIVING AND MEMORY COTTAGE

**2595 HARBOR BLVD
PORT CHARLOTTE, FL 33952**

(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 survey for complaint #2020000467 and #2020013662, focused control visit and emergency power plan monitoring survey was conducted ... through at Parkside Assisted Living and Memorial Cottage, an assisted living facility in Port Charlotte, Florida. Complaint #2020013662 was substantiated without citation. Complaint #2020000467 was substantiated without citation. An additional concern was identified with citation. The following is the description of the deficiency.	A 000		
A 055	59A-36.008(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 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	A 055		

AHCA Form 3020-0001

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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A 055	Continued From page 1 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 59A-36.006, 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 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	A 055			

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A 055	Continued From page 2 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 be 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 staff and resident interview and record review, the facility failed to return all medications to the resident or legal representative upon discharge for 1 (Resident #1) of 3 residents reviewed for discharge procedures as required. The findings included: On review of Resident #1's medical record revealed he was sent to the emergency room for	A 055			

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A 055	Continued From page 3 ... changes on ... and was subsequently admitted to the hospital for deteriorating ...'s ... with frequent ... A nursing progress note dated ... at 10:41 a.m. reported Resident #1's wife was at the front desk telling them Resident #1 would not be coming to the facility and she was there to pick-up his personal items and medications. The nursing progress note listed all the medications given to Resident #1's wife. A Medication Disposition Log noted 35.5 tablets of 0.5 milligram (mg) were destroyed by the Wellness and Nursing Director (WND) at 10:37 a.m. on ... On ... at 11:30 a.m., in an interview with Medical Technician Staff C, she said when a resident is discharged home or to the hospital their medications are returned to the resident or their family except the ... medications. She said they are required to call the WND, who then takes the ... medication they cannot return to the resident and destroys the medication with a witness. On ... at 10:20 a.m., in an interview with Resident #1's wife, she said her husband was admitted to the hospital on ... related to change. She went to the facility on ... and informed the facility her husband would not be returning to the facility and she was there to collect his personal items and medications. The wife said the WND informed her she can return all of Resident #1's medications except his medication ... 0.5 mg which she would need to destroy because the pharmacy does not except open ... medication ... for credit. She said the WND told her she cannot give her	A 055		

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A 055	Continued From page 4 Resident #1's medication because it is against state law to return medication to the family. On at 2:15 p.m., in an interview with the WND, she said she started at the facility and became the Wellness and Nursing Director in . She was taught at other facilities they (administration) cannot return medications to the resident and/or legal representative. She confirmed Resident #1's wife came to the facility on to inform the facility Resident #1 would not be coming to the facility and she wanted to take home his personal items to include all his medication. She said she was unaware the state law states that facilities are required to return all medications to the resident or the legal representative. She confirmed she destroyed Resident #1's 0.5 mg on /20 instead of giving the medication to Resident #1's wife. On at 2:30 p.m., in an interview with the Executive Director (ED), she said when Resident #1 went to the hospital on he was on a bed-hold when his wife came to the facility on and told them he would not be coming to the facility. She confirmed Resident #1's wife received all his personal belongs including his medications except the 0.5 mg which was destroyed by the WND on . She confirmed Resident #1 did not receive all his medications as required by state law. Class III	A 055		