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
	AL11963878	A. BUILDING: _____ B. WING _____	11/24/2020

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
BRADENTON OAKS	1015 7TH AVENUE EAST BRADENTON, FL 34208

(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 complaint investigation (Complaint Numbers 2020012714, 2020011317, 2020011801, 2020009444, 2020006005, 2020014461, and 2020018872) was conducted at Bradenton Oaks Assisted Living Facility on and . Deficiencies were identified at the time of survey.	A 000		
A 052 SS=D	429.256( ); 59A-36.008(3) Medication - Assistance with Self-Admin 429.256 (3) Assistance with self-administration of medication includes: (a) Taking the medication, in its previously dispensed, properly labeled container, including an syringe that is prefilled with the proper dosage by a pharmacist and an , that is prefilled by the manufacturer, from where it is stored, and bringing it to the resident. (b) In the presence of the resident, confirming that the medication is intended for that resident, orally advising the resident of the medication name and dosage, opening the container, removing a prescribed amount of medication from the container, and closing the container. The resident may sign a written waiver to opt out of being orally advised of the medication name and dosage. The waiver must identify all of the medications intended for the resident, including names and dosages of such medications, and must immediately be updated each time the resident ' s medications or dosages change. (c) Placing an oral dosage in the resident ' s or placing the dosage in another container and helping the resident by lifting the container to his or her . (d) Applying , medications. (e) Returning the medication container to proper	A 052		

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A 052	Continued From page 1 storage. (f) Keeping a record of when a resident receives assistance with self-administration under this section. (g) Assisting with the use of a [illegible], including removing the cap of a [illegible], opening the unit dose of [illegible] solution, and pouring the prescribed premeasured dose of medication into the dispensing cup of the [illegible]. (h) Using a [illegible] to perform [illegible] level checks. (i) Assisting with putting on and taking off [illegible] stockings. (j) Assisting with applying and removing an [illegible] but not with titrating the prescribed [illegible] settings. (k) Assisting with the use of a continuous positive airway pressure device but not with titrating the prescribed setting of the device. (l) Assisting with measuring vital signs. (m) Assisting with [illegible] bags. (4) Assistance with self-administration does not include: (a) Mixing, [illegible], converting, or [illegible] medication doses, except for measuring a prescribed amount of liquid medication or breaking a scored tablet or crushing a tablet as prescribed. (b) The preparation of syringes for injection or the administration of medications by any injectable route. (c) Administration of medications by way of a tube inserted in a [illegible] of the body. (d) Administration of [illegible] preparations. (e) The use of irrigations or debriding agents used in the treatment of a skin condition. (f) Assisting with [illegible], or [illegible] preparations. (g) Assisting with medications ordered by the	A 052		

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A 052	Continued From page 2 physician or health care professional with prescriptive authority to be given "as needed," unless the order is written with specific parameters that preclude independent judgment on the part of the unlicensed person, and the resident requesting the medication is aware of his or her need for the medication and understands the purpose for taking the medication. (h) Medications for which the time of administration, the amount, the strength of dosage, the method of administration, or the reason for administration requires judgment or discretion on the part of the unlicensed person. (5) Assistance with the self-administration of medication by an unlicensed person as described in this section shall not be considered administration as defined in s. 465.003. 59A-36.008 (3) ASSISTANCE WITH SELF-ADMINISTRATION. (a) Any unlicensed person providing assistance with self-administration of medication must be [illegible] or older, trained to assist with self administered medication pursuant to the training requirements of rule 59A-36.011, F.A.C., and must be available to assist residents with self-administered medications in accordance with procedures described in section 429.256, F.S. and this rule. (b) In addition to the specifications of section 429.256(3), F.S., assistance with self-administration of medication includes, in the presence of the resident, reading the medication label aloud and verbally prompting a resident to take medications as prescribed. (c) In order to facilitate assistance with self-administration, trained staff may prepare and make available such items as water, juice, cups, and spoons. Trained staff may also return unused	A 052		

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A 052	Continued From page 3	A 052		

doses to the medication container. Medication, which appears to have been contaminated, must not be returned to the container.
(d) Trained staff must observe the resident take the medication. Any concerns about the resident's reaction to the medication or suspected noncompliance must be reported to the resident's health care provider and documented in the resident's record.
(e) When a resident who receives assistance with medication is away from the facility and from facility staff, the following options are available to enable the resident to take medication as prescribed:
1. The health care provider may prescribe a medication schedule that coincides with the resident's presence in the facility,
2. The medication container may be given to the resident, a friend, or family member upon leaving the facility, with this fact noted in the resident's medication record,
3. The medication may be transferred to a pill organizer pursuant to the requirements of subsection (2), and given to the resident, a friend, or family member upon leaving the facility, with this fact noted in the resident's medication record, or
4. Medications may be separately prescribed and dispensed in an easier to use form, such as unit dose packaging.
(f) Assistance with self-administration of medication does not include the activities detailed in section 429.256(4), F.S.
1. As used in section 429.256(4)(g), F.S., the term "competent resident" means that the resident is cognizant of when a medication is required and understands the purpose for taking the medication.
2. As used in section 429.256(4)(h), F.S., the

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A 052	Continued From page 4 terms "judgment" and "discretion" mean interpreting vital signs and evaluating or assessing a resident's condition. (g) All trained staff must adhere to the facility's . . . . control policy and procedures when assisting with the self-administration of medication. This Statute or Rule is not met as evidenced by: Based on observation, interview and record review, the facility failed to provide supervision to observe resident take medication for 1 (Resident #9) of four residents sampled. Findings included: During an observation on at 2:00 p.m. Resident # 9 allowed entrance to room and continued to nap. A medication cup was observed tipped over with loose pills scattered on table (12 pills), a pill organizer was observed to contain 4 round dark pink pills in one compartment and 5 round dark pink pills in another compartment. A single round dark pink pill was observed under the table. A total of 22 pills were observed in the resident's room. Resident #9 stated they were his pills and "I haven't taken them yet, go away." During an interview on at 2:10 p.m. with Staff C, she stated she follows all the steps of self-administration of medication training. During an interview and observation on . . . . . at 2:25 p.m. with the Regional Nurse and Regional Director, they confirmed the findings of the pills and removed pills from Resident #9's room. Regional Nurse stated her	A 052		

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A 052	Continued From page 5 expectation is for the Medication Technicians to ensure residents take their medication and follow procedures. Record Review conducted on revealed resident # 9 had a history of diagnosis that included but limited to , Failure, DM2, , sleep , Sensory limitation, , failure, , and . Review of Medication Observation Record on for morning medications revealed resident had received one tablet of 75 mg prescribed to prevent and , one capsule of 100mg for , two tablets of 20mg for fluid retention and high , one tablet of 5mg, for high , one tablet of 25mg for fluid retention, one tablet of 5mg for high , one tablet of 7.5mg for , one tablet of 1000mg, for high , one tablet of 40mg for , one tablet of , 20MEQ for high , one tablet of SM relief max strength for and one tablet of vit used to prevent . An interview on at 8:00 a.m. with nurse at a local doctor's office stated Resident # 9 frequently visits her office with his medications in his pocket. She stated he said," the med tech give me all these pills and I don't know what they are I don't want to take them." An interview on at 8:10 a.m. with advanced registered nurse practitioner (ARNP)	A 052		

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A 052	Continued From page 6 he stated if Resident # 9 does not take his medications as prescribed the consequences are the exacerbation of all his underlying conditions his High , high , , resulting in hospitalization and can even be fatal, he is a very sick man. Class III	A 052		
A 054 SS=G	59A-36.008(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	A 054		

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A 054	Continued From page 7 , 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 medication. This Statute or Rule is not met as evidenced by: Based on record review and interview, the facility failed to ensure that the Medication Observation Record (MOR) were immediately updated each time a medication was offered to three Residents (#9, #10, and #11) of four sampled, who needed assistance with self-administration of medication. Findings included: A MOR review for conducted for Resident # 10 on , revealed that the following medications were not signed as given or a reason for not being given or held: - 500 milligrams to be given at 8:00am, 4:00pm and 8:00pm. The MOR was not updated on for the 4:00pm dose and on , 13, 15 and 19/20 for the 8:00pm dose. This medication may be prescribed for temporary relief of minor aches and pains and . - , 0.25 milligrams to be given at 6:00am, 2:00pm and 10:00pm. The MOR was not updated on10/11 or for the 6:00am dose, and for the 2:00pm dose and , 08, 12, 17, 19, 23, and for the 10:00pm dose. This medication may be prescribed for short-term relief of , . - 25 milligram 1 tab to be given at 8:00pm. The MOR was not updated on , 13, 15, and for the 8:00pm dose. This medication may be prescribed for high and .	A 054		

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A 054	Continued From page 8 - 20 milligram to be given 8:00pm. The MOR was not updated on , 13, 15, and 20/19. This medication may be prescribed for lowering of total . - 100 mg at 8 pm. The MOR was not updated on , 12, 15, and . This medication may be prescribed . - , 1 milligram tab at 8:00pm. The MOR was not updated on , 13, and . This medication may be prescribed for treatment of , , bi-polar and other issues. - 1000 milligrams at 8:00am and 4:00pm. The MOR was not updated on for the 4:00pm dose. This medication is prescribed to help lower . - , 30 milligrams at 8:00pm. The MOR was not updated on , 13, 15, and . This medication may be prescribed as a . During a phone interview conducted on at 2:10pm with Resident #10 's nurse practitioner she stated that missing one or two doses of won't hurt the resident however, missing the , , , and , could increase his inability to get his , under control and contribute to his . A MOR review for conducted on for Resident #11, revealed that the following medications were not signed as given or a reason for not being given or held:	A 054		

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A 054	Continued From page 9 - 20 milligrams take one tablet at 7:00pm. The MOR was not updated on , 05,10,12,13,15,19,24,28 and . This medication is prescribed for high . - , DR 20 milligrams taken daily. The MOR was not updated on . This medication is prescribed for treatment of an . - 50 milligrams tablet 1 tab at 6:00am, 2:00pm and 10:00pm. The MOR was not updated on for the 6:00am dose, and , , , 10,23 and . This medication is prescribed for , relief. - 50 milligrams at 7:00pm. The MOR was not updated , , , , , , and . This medication is prescribed for , . A MOR review for conducted on for Resident #11, revealed that the following medications were not signed as given or a reason for not being given or held: -Ferrex 150 milligrams taken daily. The MOR was not updated on . This medication is prescribed as an iron supplement. - , , 200 milligram 1 tab at 8:00am and 4:00pm (,) for . The MOR was not updated on for the 8:am dose and 11/0920 for the 4:00pm dose. This medication is prescribed for multiple uses. - , - HHCTZ 20 -12.5 milligrams 8:00am. The MOR was not updated on . This medication is prescribed for high , .	A 054		

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A 054	Continued From page 10 - 20 milligrams take one tablet at 7:00pm. The MOR was not updated on , 07, 08, 10, and . This medication is prescribed for high . - 15 milligrams daily 8:00am. The MOR was not updated on . This medication is prescribed for . - , ER 100 milligrams daily 8:00am. The MOR was not updated on . This medication is prescribed for high . - , DR 20 milligrams taken daily. The MOR was not updated on , 16, 22, and . This medication is prescribed for treatment of an . -Polyethylene , 3350 daily 8:00am. The MOR was not updated on and . This medication is prescribed for , . - 50 milligrams tablet 1 tab at 6:00am, 2:00pm and 10:00pm. The MOR was not updated on , 16, 22 and for the 6:00am dose, and for the 2:00pm dose and , 05,09, 13, 19, and . This medication is prescribed for , relief. - 50 milligrams at 7:00pm. The MOR was not updated , 07, 08, 10, 21, and . This medication is prescribed for . - D-3 daily at 8:00 am. The MOR was not updated and . This medication is prescribed for D-3 deficiency.	A 054		

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A 054	Continued From page 11 - 15 milligrams daily at 5:00 pm ( ) . The MOR was not updated , and . This medication is prescribed for people with . An interview with the Regional Corporate Nurse conducted on at 5:05 pm verified that Resident #10 and #11's MOR's had unsigned spaces on them. During a phone interview conducted on at 10:15 am with Resident #11's primary care physician he stated that missing doses of may leave the resident with . Missing the doses of may leave the resident with for that night. His concern was with the missed doses of . The medication is prescribed for people with and missing doses could result in a . Class II	A 054		
A 160 SS=D	59A-36.015(1) FAC Records - Facility The facility must maintain required records in a manner that makes such records readily available at the licensee's physical address for review by a legally authorized entity. If records are maintained in an electronic format, facility staff must be readily available to access the data and produce the requested information. For purposes of this section, "readily available" means the ability to immediately produce documents, records, or other such data, either in electronic or paper format, upon request. (1) FACILITY RECORDS. Facility records must include:	A 160		

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A 160	Continued From page 12 (a) The facility's license displayed in a conspicuous and public place within the facility. (b) An up-to-date admission and discharge log listing the names of all residents and each resident's: 1. Date of admission, the facility or place from which the resident was admitted, and if applicable, a notation indicating that the resident was admitted with a [illegible]; and, 2. Date of discharge, reason for discharge, and identification of the facility or home address to which the resident was discharged. Readmission of a resident to the facility after discharge requires a new entry in the log. Discharge of a resident is not required if the facility is holding a bed for a resident who is out of the facility but intending to return pursuant to rule 59A-36.018, F.A.C. If the resident dies while in the care of the facility, the log must indicate the date of [illegible]. (c) A log listing the names of all temporary emergency placement and respite care residents if not included on the log described in paragraph (b). (d) The facility's emergency management plan, with documentation of review and approval by the county emergency management agency, as described in rule 59A-36.019, F.A.C., that must be readily available by facility staff. (e) The facility's liability insurance policy required in rule 59A-36.013, F.A.C. (f) For facilities that have a surety bond, a copy of the surety bond currently in effect as required by rule 59A-36.013, F.A.C. (g) The admission package presented to new or prospective residents (less the resident's contract) described in rule 59A-36.006, F.A.C. (h) If the facility advertises that it provides special care for persons with [illegible]'s [illegible] or related [illegible], a copy of all such facility	A 160		

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A 160	Continued From page 13 advertisements as required by section 429.177, F.S. (i) A grievance procedure for receiving and responding to resident complaints and recommendations as described in rule 59A-36.007, F.A.C. (j) All food service records required in rule 59A-36.012, F.A.C., including menus planned and served and county health department inspection reports. Facilities that contract for food services, must include a copy of the contract for food services and the food service contractor's license or certificate to operate. (k) All fire safety inspection reports issued by the local authority or the State Fire Marshal pursuant to section 429.41, F.S., and rule chapter 69A-40, F.A.C., issued within the last 2 years. (l) All sanitation inspection reports issued by the county health department pursuant to section 381.031, F.S., and chapter 64E-12, F.A.C., issued within the last 2 years. (m) Pursuant to section 429.35, F.S., all completed survey, inspection and complaint investigation reports, and notices of sanctions and moratoriums issued by the agency within the last 5 years. (n) The facility's resident elopement response policies and procedures. (o) The facility's documented resident elopement response drills. (p) For facilities licensed as limited mental health, extended congregate care, or limited nursing services, records required as stated in rules 59A-36.020, 59A-36.021 and 59A-36.022, F.A.C., respectively. This Statute or Rule is not met as evidenced by: Based on interview and record review, the facility	A 160		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	AL11963878	A. BUILDING: _____ B. WING _____	11/24/2020

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
BRADENTON OAKS	1015 7TH AVENUE EAST BRADENTON, FL 34208

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A 160	Continued From page 14 failed to maintain an up to date admission and discharged log for 3 of 3 (Residents #2, #3, and #8) resident sampled. Additionally, the facility failed to maintain an updated grievance log. Findings included: During entrance conference conducted on [redacted] at 9:30a.m the Admission and Discharged log was requested. Record review of the facility's admission and discharge log conducted on [redacted] revealed incomplete information for Residents #2, #3, and #8 A record review of the facility's grievance log was conducted on [redacted] revealed the following: -there was no evidence of grievances prior to [redacted] - two incomplete grievances were found in the grievance log dated [redacted] for $100 missing and - for $23 dollars missing An interview on [redacted] at 3:40 p.m. with Regional Director, she stated she does not have any records of grievances prior to [redacted]. They are taken at the front desk and brought to her. She expects the staff to report it immediately to her or the manager on duty. An interview on [redacted] at 11:20am with the Executive Director, she confirmed the admission and discharge log was incomplete and not updated, she stated the grievance log is maintained by the front desk. Class III	A 160		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	AL11963878	A. BUILDING: _____ B. WING _____	11/24/2020

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A 164	Continued From page 15	A 164		
A 164 SS=D	59A-36.015(4) FAC; 429.35(1) & (3) FS Records - Inspection Availability 59A-36.015 (4) RECORD INSPECTION. (a) The resident's records must be available to the resident; the resident's legal representative, designee, surrogate, guardian, attorney in fact, or case manager; or the resident's estate, and such additional parties as authorized in writing or by law. (b) Pursuant to Section 429.35, F.S., agency reports that pertain to any agency survey, inspection, or monitoring visit must be available to the residents and the public. In facilities that are co-located with a licensed nursing home, the inspection of record for all common areas is the nursing home inspection report. 429.35 Maintenance of records; reports.- (1) Every facility shall maintain, as public information available for public inspection under such conditions as the agency shall prescribe, records containing copies of all inspection reports pertaining to the facility that have been issued by the agency to the facility. Copies of inspection reports shall be retained in the records for 5 years from the date the reports are filed or issued. (3) Every facility shall post a copy of the last inspection report of the agency for that facility in a prominent location within the facility so as to be accessible to all residents and to the public. Upon request, the facility shall also provide a copy of the report to any resident of the facility or to an applicant for admission to the facility. This Statute or Rule is not met as evidenced by:	A 164		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	AL11963878	A. BUILDING: _____ B. WING _____	11/24/2020

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A 164	Continued From page 16 Based on attempted closed record review and interviews, the facility failed to maintain records for one (Resident #1) of six residents sampled. Findings Included: On . . . . . at 10:00 a. m. a request to the Administrator for residents that had been discharged from the facility including the record for Resident # 1. On at 2:30 p. m. the Wellness Director stated, "I can't find his closed record anywhere, I looked in all the old records on the fourth floor. I am unable to find Resident # 1's record." On at 9:45 a. m., another request to the Administrator and Regional Director for Resident # 1's record was made. On at 11:30 a. m., the Regional Director stated we are unable to locate Resident # 1's record. Class III	A 164		