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
	AL11910711	A. BUILDING: _____ B. WING _____	12/01/2020

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
MIDTOWN MANOR	2001 POLK STREET HOLLYWOOD, FL 33020

(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 Relicensure, Focused Control and Generator Monitoring survey was conducted on through at Midtown Manor. The facility had deficiencies at the time of the survey.	A 000		
A 084	59A-36.011(6) FAC 429.52(6), FS Training - Assis Self-Admin Meds & Med Mgmt 59A-36.011 (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 59A-36.008, 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 include demonstrations of proper techniques, including techniques for control, and ensure unlicensed staff have adequately demonstrated that they have acquired the skills	A 084		

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A 084	Continued From page 1 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 59A-36.008, F.A.C., including: a. Assist with oral dosage forms, [illegible] dosage forms, and [illegible] 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 [illegible] syringes that are prefilled with the proper dosage by a pharmacist and [illegible] 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; i. Assist with [illegible]; j. Use a [illegible] to perform [illegible] testing; k. Assist residents with [illegible]	A 084		

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A 084	Continued From page 2 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) Staff assisting with the self-administration of medications under s. 429.256 must complete a minimum of 6 additional hours of training provided by a registered nurse or a licensed pharmacist before providing assistance. Two hours of continuing education are required	A 084		

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A 084	Continued From page 3 annually thereafter. The agency shall establish by rule the minimum requirements of this training This Statute or Rule is not met as evidenced by: Based on interview and record review, the facility failed to ensure that all trained unlicensed staff who, assist with the self-administration of medication and have successfully completed 4 hours of assistance with self-administration of medication training and additional 2 hours of training that focuses on the topics annually, for 2 of 4 sampled employee personnel records reviewed (Staff A and B). The findings included: A review of the employee personnel record was conducted for Staff A, hired on . She is a Home Health Aide (HHA). She works on the 06:00 AM - 02:00 PM shift, as an unlicensed staff She assists residents with self-administration of medication, as Medication Technician (Med Tech). It was revealed that the last 2 hour update on assistance with self-administration of medication certificate was dated . . No further documentation available indicating continuing education updates for 2020. A review of the employee personnel record was conducted for Staff B, hired on . She is a Caregiver, whom also works as a Medication Technician (Med Tech). She works on the 02:00 PM - 10:00 PM shift. She is an Unlicensed staff, assisting residents with self-administration of medication. A review of the employee personnel record revealed that the last 2 hour update training certificate was also dated . . No further documentation available indicating continuing education updates for 2020.	A 084		

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A 084	Continued From page 4 On [illegible] an interview was conducted with the Administrator. She acknowledged the findings. Class III	A 084		
A 152	59A-36.014(3) FAC Physical Plant - Safe Living Environ/Other (3) OTHER REQUIREMENTS. (a) All facilities must: 1. Provide a safe living environment pursuant to section 429.28(1)(a), F.S.; 2. Be maintained free of hazards; and, 3. Ensure that all existing architectural, mechanical, electrical and structural systems, and appurtenances are maintained in good working order. (b) Pursuant to section 429.27, F.S., residents must be given the option of using their own belongings as space permits. When the facility supplies the furnishings, each resident bedroom or sleeping area must have at least the following furnishings: 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 at a comfortable [illegible] to ensure easy access by the resident, 2. A closet or wardrobe space for hanging clothes, 3. A dresser, [illegible] or other furniture designed for storage of clothing or personal effects, 4. A table or nightstand, bedside lamp or floor lamp, and waste basket; and, 5. A comfortable chair, if requested. (c) The facility must maintain master or duplicate keys to resident bedrooms to be used in the event of an emergency. (d) Residents who use portable bedside	A 152		

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A 152	Continued From page 5 commodes must be provided with privacy during use. (e) Facilities must make available linens and personal laundry services for residents who require such services. Linens provided by a facility must be free of tears, stains and must not be . . . . . . This Statute or Rule is not met as evidenced by: Based on observation, interview and record review, the facility failed to provide a safe, clean living environment for all residents. The facility failed to ensure that the facility is free of hazards. The findings included: On . . . . . at 10:20 AM, a tour was conducted of the facility. A tour of the first floor East Wing revealed environmental hazards in the following areas: 1). The glass was broken in the area where the facility fire extinguisher was kept. 2). . # revealed the ceiling tile was broken, and there were large brown spots in the ceiling. 3). # revealed the ceiling had a large brown stain near the light fixture. The plaster was broken and peeling. 4). # revealed bugs on the floor. (Photos attached). On at 10:00 AM, a tour was conducted of the facility. A tour of the second floor East Wing revealed environmental hazards in the following areas: 1). The window was broken out on the end of the hallway on the second floor. A board was placed	A 152		

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A 152	Continued From page 6 inside of the window, unsecured. 2). There were 4 broken ceiling panels in the hallway of the second floor. The ceiling was exposed. 3). # revealed bugs on the floor. 4). The floor near the elevator was covered with wonderboard cardboard. 5). # , blinds were broken. On at 04:00 PM, an interview was conducted with the Administrator. She acknowledged the findings. Class III	A 152		
AL243	429.075(1) FS; 59A-36.011(9) FAC LMH - Training 429.075 (1) To obtain a limited mental health license, a facility must hold a standard license as an assisted living facility, must not have any current uncorrected violations, and must ensure that, within 6 months after receiving a limited mental health license, the facility administrator and the staff of the facility who are in direct contact with mental health residents must complete training of no less than 6 hours related to their duties. This designation may be made at the time of initial licensure or relicensure or upon request in writing by a licensee under this part and part II of chapter 408. Notification of approval or denial of such request shall be made in accordance with this part, part II of chapter 408, and applicable rules. This training must be provided by or approved by the Department of Children and Families. 59A-36.011 (9) LIMITED MENTAL HEALTH TRAINING.	AL243		

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AL243	Continued From page 7 (a) Pursuant to section 429.075, F.S., the administrator, managers and staff, who have direct contact with mental health residents in a licensed limited mental health facility, must receive the following training: 1. A minimum of 6 hours of specialized training in working with individuals with mental health diagnoses. a. The training must be provided or approved by the Department of Children and Families and must be taken within 6 months of the facility's receiving a limited mental health license or within 6 months of employment in a limited mental health facility. b. Training received under this subparagraph may count once for 6 of the 12 hours of continuing education required for administrators and managers pursuant to section 429.52(5), F.S., and subsection (1) of this rule. 2. A minimum of 3 hours of continuing education, which may be provided by the ALF administrator, online, or through distance learning, biennially thereafter in subjects dealing with one or more of the following topics: a. Mental health diagnoses; and, b. Mental health treatment such as: (I) Mental health needs, services, behaviors and appropriate interventions; (II) Resident progress in achieving treatment goals; (III) How to recognize changes in the resident's status or condition that may affect other services received or may require intervention; and, ( ) Crisis services and the procedures. 3. For administrators and managers, the continuing education requirement under this subsection will satisfy 3 of the 12 hours of continuing education required biennially pursuant	AL243		

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AL243	Continued From page 8 to section 429.52(5), F.S., and subsection (1) of this rule. 4. Administrators, managers and direct contact staff affected by the continuing education requirement under this subsection shall have up to 6 months after the effective date of this rule to meet the training requirement. (b) Administrators, managers and staff do not have to repeat the initial training should they change employers provided they present a copy of their training certificate to the current employer for retention in the facility's personnel files. They must also ensure that copies of the continuing education training certificates, pursuant to subparagraph (a)2. of this subsection, are retained in their personnel files. This Statute or Rule is not met as evidenced by: Based on interview and record review, the facility failed to ensure that staff who have direct contact with Limited Mental Health (LMH) residents, complete no less than 6 hours of training education related to their duties, approved by the approved licensing state agency; within 6 months of employment, for 2 of 4 sampled employee records reviewed (Staff A and Staff C). The findings included: On . . . . . at 10:30 AM, a tour of the facility was conducted. A tour of the lobby area revealed the facility had posted their license on the bulletin board. The license indicated that the facility holds a specialty license for Limited Mental Health servicea, effective since . On a review of the employee personnel record was conducted. It was revealed that Staff A was hired on . She is a	AL243		

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AL243	Continued From page 9 Home Health Aide, (HHA), providing direct care to Limited Mental Health Residents in the facility. Further review of the employee personnel record revealed that the file didn't contain the initial minimum 6 hours of LMH education training.. On . . . . . a review of the employee personnel record was conducted. It was revealed that Staff C was hired on . . . . She is a Home Health Aide, (HHA), providing direct care to Limited Mental Health Residents in the facility. Further review of the employee personnel record revealed that the file didn't contain the initial minimum 6 hours of LMH education training.. On at 04:00 PM, an interview was conducted with the Administrator. She acknowledged the findings. Class III	AL243		