

Agency for Health Care Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11922334	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 02/05/2021
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NAME OF PROVIDER OR SUPPLIER

STREET ADDRESS, CITY, STATE, ZIP CODE

SPRING HAVEN RETIREMENT COMMUNITY

**1225 HAVENDALE BLVD NW
WINTER HAVEN, FL 33881**

(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 (CCR #2020018097, #2020018928, #2021001036) was conducted at Spring Haven Retirement Community on Deficient practice was found.	A 000		
A 056 SS=D	59A-36.008(7) FAC Medication - Labeling and Orders (7) MEDICATION LABELING AND ORDERS. (a) The facility may not store prescription drugs for self-administration, assistance with self-administration, or administration unless they are properly labeled and dispensed in accordance with chapters 465 and 499, F.S., and rule 64B16-28.108, F.A.C. If a customized patient medication package is prepared for a resident, and separated into individual medicinal drug containers, then the following information must be recorded on each individual container: 1. The resident's name; and, 2. The identification of each medicinal drug in the container. (b) Except with respect to the use of pill organizers as described in subsection (2), no individual other than a pharmacist may transfer medications from one storage container to another. (c) If the directions for use are "as needed" or "as directed," the health care provider must be contacted and requested to provide revised instructions. For an "as needed" prescription, the circumstances under which it would be appropriate for the resident to request the medication and any limitations must be specified; for example, "as needed for , , not to exceed 4 tablets per day." The revised instructions, including the date they were obtained from the health care provider and the signature of the health care provider, must be noted in the	A 056		

AHCA Form 3020-0001

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

TITLE

(X6) DATE

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A 056	Continued From page 1 medication record, or a revised label must be obtained from the pharmacist. (d) Any change in directions for use of a medication that the facility is administering or providing assistance with self-administration must be accompanied by a written, faxed, or electronic copy of a medication order issued and signed by the resident's health care provider. The new directions must promptly be recorded in the resident's medication observation record. The facility may then obtain a revised label from the pharmacist or place an "alert" label on the medication container that directs staff to examine the revised directions for use in the medication observation record. (e) A nurse may take a medication order by telephone. Such order must be promptly documented in the resident's medication observation record. The facility must obtain a written medication order from the health care provider within 10 working days. A faxed or electronic copy of a signed order is acceptable. (f) The facility must make every reasonable effort to ensure that prescriptions for residents who receive assistance with self-administration of medication or medication administration are filled or refilled in a timely manner. (g) Pursuant to section 465.0276(5), F.S., and rule 61N-1.006, F.A.C., sample or complimentary prescription drugs that are dispensed by a health care provider, must be kept in their original manufacturer's packaging, which must include the practitioner's name, the resident's name for whom they were dispensed, and the date they were dispensed. If the sample or complimentary prescription drugs are not dispensed in the manufacturer's labeled package, they must be kept in a container that bears a label containing the following:	A 056		

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A 056	Continued From page 2 1. Practitioner's name, 2. Resident's name, 3. Date dispensed, 4. Name and strength of the drug, 5. Directions for use; and, 6. Expiration date. (h) Pursuant to section 465.0276(2)(c), F.S., before dispensing any sample or complimentary prescription drug, the resident's health care provider must provide the resident with a written prescription, or a faxed or electronic copy of such order. This Statute or Rule is not met as evidenced by: Based on record reviews and interviews, the facility failed to ensure a prescribe medication was refilled in a timely manner for 1 (Resident #3) of 3 sampled residents. Findings included: A review of Resident #3 medical record conducted on _____ revealed that she was admitted on _____ with diagnoses of _____ and _____ failure. During an interview with Resident #3 on at 11: 25 AM she stated, "I'm out of one of my medications right now. I have a hard time with my breathing, and they know about me missing my _____. I've been asking them about it every day. 4 days it's beenno meds." A record review of the Resident #3 Medication Observation Record (MOR) revealed a physician order for _____. The physician orders stated for the resident to be given 1-Tab of _____ by _____ daily at 8pm. A further review of the resident MAR revealed that the	A 056		

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A 056	Continued From page 3 ... was not given as ordered on ..., 2021, ... and ... The MOR provided the following rationale for each of the dates the ... was not given: Not given due to Med not in cart. Recorded exception: Awaiting pharmacy Delivery. An interview was conducted with Staff E on at 11:40 AM. During this interview, Staff E confirmed the ... was missing and stated, "She has been missing that for a few days now. I know for at least 3 days. Oh yes, I told [the Wellness Director] she is aware, but we called the pharmacy and it just hasn't come in yet. I don't know what else to do." These findings were reviewed and discussed during an interview with the facility's Wellness Director on at 3:52 PM. During this interview the Wellness Director reviewed Resident #3 MAR and stated, " If medications are not in the cart Med Techs can request the company card and go to the pharmacy and pick up the med. I'm not sure what happened with this. It's my expectation that there will be some sort of documentation of attempts to notify the pharmacy, family, MD or documentation of the resident refusal [...] something [...] and I'm not seeing anything in the chart. I don't know why this happened." Class III	A 056		