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
	AL11968693	A. BUILDING: _____ B. WING _____	08/26/2021

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
LILY'S PROMISE, LLC	1958 ROLLING GREEN CIRCLE SARASOTA, FL 34240

(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 2021005230 was conducted on . . . . . at Lily's Promise LLC, an assisted living facility in Sarasota, Florida. Complaint 2021005230 was substantiated at A0053. The following is a description of the deficiency.	A 000		
A 053	59A-36.008(4) FAC Medication - Administration (4) MEDICATION ADMINISTRATION. (a) For facilities that provide medication administration, a staff member licensed to administer medications must be available to administer medications in accordance with a health care provider's order or prescription label. (b) Unusual reactions to the medication or a significant change in the resident's health or behavior that may be caused by the medication must be documented in the resident's record and reported immediately to the resident's health care provider. The contact with the health care provider must also be documented in the resident's record. (c) Medication administration includes conducting any examination or other procedure necessary for the proper administration of medication that the resident cannot conduct personally and that can be performed by licensed staff. (d) A facility that performs clinical laboratory tests for residents, including ␣ testing, must be in compliance with the federal Clinical Laboratory Improvement Amendments of 1988 (CLIA) and chapter 483, part I, F.S. A valid copy of the State Clinical Laboratory License, if required, and the federal CLIA Certificate must be maintained in the facility. A state license or	A 053		

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A 053	Continued From page 1 federal CLIA certificate is not required if residents perform the test themselves or if a third party assists residents in performing the test. The facility is not required to maintain a State Clinical Laboratory License or a federal CLIA Certificate if facility staff assist residents in performing clinical laboratory testing with the residents' equipment. Information about the State Clinical Laboratory License and federal CLIA Certificate is available from the Laboratory Unit, Agency for Health Care Administration, 2727 Mahan Drive, Mail Stop 32, Tallahassee, FL 32308; telephone (850)412-4500. This Statute or Rule is not met as evidenced by: Based on observation, interviews, and record reviews, the facility failed to ensure a licensed nurse administered medications for one of one resident (Resident #5) who requires administration of her . The findings included: 1. Observation on at 12:00 p.m. of Resident #5 receiving her , revealed LPN Staff A tried to assist Resident #5 to receive her injection. Resident #5 was unable to participate in that activity. Staff A said she would have to administer the to Resident #5. Observation showed Staff A administered the to Resident #5. 2. Record review of Resident #5's Medication Observation Records (MOR) showed Resident #5 receives Flextouch 100unit/ML (milileter) Injection 20 mls (under the skin) once a day at 6:00 p.m. and 100unit/ml Injection 6 units 3 three times a day at 7:30 a.m., 12:30 p.m., and 5:30 p.m.	A 053		

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A 053	Continued From page 2 Review of the MOR for revealed: A. Unlicensed Staff D gave the Flextouch 20 units at 6:00 p.m. on and B. Unlicensed Staff E gave the Flextouch 20 units at 6:00 p.m. on , , , and . C. Unlicensed Staff D gave the 6 units on at 7:30 a.m. and 12:30 p.m.; on at 7:30 a.m., 12:30 p.m. and 5:30 p.m.; on at 7:30 a.m., 12:30 p.m. and 5:30 p.m.; on at 5:30 p.m.; on at 5:30 p.m.; on at 5:30 p.m.; on at 5:30 p.m.; on at 7:30 a.m., 12:30 p.m. and 5:30 p.m.; on at 7:30 a.m., 12:30 p.m. and 5:30 p.m.; and on at 5:30 p.m. D. Unlicensed Staff E gave the 6 units on at 7:30 a.m., 12:30 p.m. and 5:30 p.m.; on at 7:30 a.m., and 12:30 p.m.; on at 5:30 p.m.; on at 5:30 p.m.; on at 5:30 p.m.; and on at 7:30 a.m., 12:30 p.m. and 5:30 p.m. Flextouch 20 units was administered by unlicensed staff 7 of 25 times in , while , 6 units was administered by unlicensed staff 30 of 76 times in to the time of the survey. 3. Interview on at 10:40 a.m., licensed practical nurse (LPN) Staff A said she works from 7:00 a.m. to 7:00 p.m. five days a week. She does the for Resident #5. A review of Resident #5's MOR showed LPN Staff A's initials beginning on ; however, there were two unlicensed staff initials on the MOR for .	A 053		

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A 053	Continued From page 3 Interview on at 10:40 a.m., Supervisor Staff B identified these two initials as Staff D and Staff E. She said they are both med techs. A review of both their records showed they are med techs and are not licensed nurses. Interview on at 11:45 a.m., Compliance Nurse Staff C confirmed Staff D and Staff E are med techs and not licensed nurses who administered to Resident #5. She explained there was a staff shortage at the facility. Class III	A 053		