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 |
|---|---|---|---|
| | AL11953519 | A. BUILDING: _____ B. WING _____ | 01/31/2022 |

| NAME OF PROVIDER OR SUPPLIER | STREET ADDRESS, CITY, STATE, ZIP CODE |
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| PARADISE CARE COTTAGE | 2277 S.E. LENNARD ROAD PORT SAINT LUCIE, FL 34952 |

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| A 000 | Initial Comments<br><br>An unannounced Relicensure, Complaint survey (#2020019300) and Generator Monitoring survey was conducted on at Paradise Care Cottage. The facility had a deficiencies identified related to the Relicensure at the time of the survey. | A 000 | | |
| A 056 | 59A-36.008(7) FAC Medication - Labeling and Orders<br><br>(7) MEDICATION LABELING AND ORDERS.<br>(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:<br>1. The resident's name; and,<br>2. The identification of each medicinal drug in the container.<br>(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.<br>(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 | A 056 | | |

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| A 056 | Continued From page 1<br>health care provider and the signature of the staff who obtained them, must be noted in the medication record, or a revised label must be obtained from the pharmacist.<br>(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, faxes, 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.<br>(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.<br>(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.<br>(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, | A 056 | | |

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| A 056 | Continued From page 2<br><br>they must be kept in a container that bears a label containing the following:<br>1. Practitioner's name,<br>2. Resident's name,<br>3. Date dispensed,<br>4. Name and strength of the drug,<br>5. Directions for use; and,<br>6. Expiration date.<br>(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.<br><br>This Statute or Rule is not met as evidenced by:<br>Based on observation, record review and interviews, the facility failed to ensure new directions for use of a medication were accompanied by an order signed by the resident's health care provider (HCP) and promptly recorded on the resident's Medication Observation Record (MOR), for 1 out of 3 sampled residents (Resident #1).<br><br>The findings included:<br><br>On . . . . . at 9:25 AM, Resident #1 was assisted with self-administration of medication by Staff A(Med Tech). Staff A provided the resident with two (2) pills of Meformin, 500 mg and 1000 mg. Review of the medication labels for four (4) separate bubble packages revealed two labels for . . . . 500 mg to be given "twice a day with meals, morning" and two labels for 1000 mg to be given "twice a day with meals, evening". The labels indicated the resident was to receive a total of 1500 mg of . . . twice a day. | A 056 | | |

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| A 056 | Continued From page 3<br><br>Review of the resident's [illegible] MOR revealed the resident was receiving 500 mg of [illegible] twice daily on [illegible] and [illegible]. There were no addional entries to show the resident had received the additional 1000 mg of [illegible] on these dates.<br><br>During interview with Staff A(Med Tech) on [illegible] at 10:15 AM, she stated that the resident was receiving the additional 1000 mg of [illegible] since delivery of the new medication bubble packs on [illegible] and [illegible]. The 1000 mg bubble packaged medication shows three pills removed, indicating that the resident received the additional 1000 mg on [illegible] in the morning and evening, and again on [illegible] in the morning. The added 1000 mg pills were not documented as given on the MOR as of [illegible] at 10:15 AM.<br><br>During interview with the Administrator on [illegible] at 12:00 PM, she acknowledged that she received a copy of the new order today from a HCP showing that the resident was to take an additional 1000 mg of [illegible] twice a day. She confirmed that the medication was delivered and provided to the resident prior to having a copy of the order, and had not yet been added to the resident's MOR. The facility provided no additional information for review at this time.<br><br>Class III | A 056 | | |
| A 077 | 429.176 FS; 429.52( ),59A-36.01(1) FAC Staffing Standards - Administrators<br><br>429.176 Notice of change of administrator.-If, during the period for which a license is issued, the owner changes administrators, the owner | A 077 | | |

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| A 077 | Continued From page 4<br><br>must notify the agency of the change within 10 days and provide documentation within 90 days that the new administrator meets educational requirements and has completed the applicable core educational requirements under s. 429.52. A facility may not be operated for more than 120 consecutive days without an administrator who has completed the core educational requirements.<br><br>429.52<br>(4) A facility administrator must complete the required core training, including the competency test, within 90 days after the date of employment as an administrator. Failure to do so is a violation of this part and subjects the violator to an administrative fine as prescribed in s. 429.19. Administrators licensed in accordance with part II of chapter 468 are exempt from this requirement. Other licensed professionals may be exempted, as determined by the agency by rule.<br>(5) Administrators are required to participate in continuing education for a minimum of 12 contact hours every 2 years.<br><br>59A-36.010<br>(1) ADMINISTRATORS. Every facility must be under the supervision of an administrator who is responsible for the operation and maintenance of the facility including the management of all staff and the provision of appropriate care to all residents as required by chapters 408, part II, 429, part I, F.S., and rule chapter 59A-35, F.A.C., and this rule chapter.<br>(a) An administrator must:<br>1. Be at least , ;<br>2. If employed on or after , , have, at a minimum, a high school diploma or G.E.D.; | A 077 | | |

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| A 077 | Continued From page 5<br><br>3. Be in compliance with Level 2 background screening requirements pursuant to sections 408.809 and 429.174, F.S.;<br>4. Complete the core training and core competency test requirements pursuant to rule 59A-36.011, F.A.C., no later than 90 days after becoming employed as a facility administrator. Administrators who attended core training prior to , are not required to take the competency test unless specified elsewhere in this rule; and,<br>5. Satisfy the continuing education requirements pursuant to rule 59A-36.011, F.A.C. Administrators who are not in compliance with these requirements must retake the core training and core competency test requirements in effect on the date the non-compliance is discovered by the agency or the department.<br>(b) In the event of extenuating circumstances, such as the of a facility administrator, the agency may permit an individual who otherwise has not satisfied the training requirements of subparagraph (1)(a)4. of this rule, to temporarily serve as the facility administrator for a period not to exceed 90 days. During the 90 day period, the individual temporarily serving as facility administrator must:<br>1. Complete the core training and core competency test requirements pursuant to rule 59A-36.011, F.A.C.; and,<br>2. Complete all additional training requirements if the facility maintains licensure as an extended congregate care or limited mental health facility.<br>(c) Administrators may supervise a maximum of either three assisted living facilities or a group of facilities on a single campus providing housing and health care Administrators who supervise more than one facility must appoint in writing a separate manager for each facility. However, an | A 077 | | |

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| A 077 | Continued From page 6<br><br>administrator supervising a maximum of three assisted living facilities, each licensed for 16 or fewer beds and all within a 15 mile . . . . . of each other, is only required to appoint two managers to assist in the operation and maintenance of those facilities.<br>(d) An individual serving as a manager must satisfy the same qualifications, background screening, core training and competency test requirements, and continuing education requirements as an administrator pursuant to paragraph (1)(a) of this rule. Managers who attended the core training program prior to , . . , are not required to take the competency test unless specified elsewhere in this rule. In addition, a manager may not serve as a manager of more than a single facility, except as provided in paragraph (1)(c) of this rule, and may not . . . . . , serve as an administrator of any other facility.<br>(e) Pursuant to section 429.176, F.S., facility owners must notify the Agency Central Office within 10 days of a change in facility administrator on the Notification of Change of Administrator form, AHCA Form 3180-1006, . . . . . , which is incorporated by reference and available online at:<br>http://www.flrules.org/Gateway/reference.asp?No=Ref-09393.<br><br>This Statute or Rule is not met as evidenced by:<br>Based on record review and staff interview, the facility failed to ensure that the individual serving as facility Manager satisfied the same qualification requirements (Core training and competency test) as an Administrator (Staff C).<br><br>The findings included: | A 077 | | |

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| A 077 | Continued From page 7<br><br>During review of the facility properties in FloridaHealthFinder.gov, it was discovered that the Administrator of this facility is also named as Administrator of another facility located in a different city. Both facilities have more than 16 residents. State regulations state that Administrators who supervise more than one facility must appoint in writing a separate manager for each facility, and that the person serving as Manager must have the same qualifications as an Administrator.<br><br>On at approximately 10:30 AM, the Administrator stated that Staff C was the appointed Manager for this facility. During review of Staff C's employee record, no evidence could be found to show completion of the 26 hour Assisted Living Core Training or successful completion of Core Training Competency Test.<br><br>On at 12:45 PM, the Manager was asked if she had completed Core Training; she responded that she had not. The Administrator and Manager both stated they were unaware that the Manager had to satisfy the same qualification requirements as an Administrator.<br><br>Class III | A 077 | | |
| A 084 | 59A-36.011(6) FAC 429.52(6), FS Training - Assis Self-Admin Meds & Med Mgmt<br><br>59A-36.011<br>(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 | A 084 | | |

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| A 084 | Continued From page 8<br>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:<br>(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 necessary to provide such assistance.<br>(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:<br>1. Read and understand a prescription label;<br>2. Provide assistance with self-administration in accordance with section 429.256, F.S., and rule 59A-36.008, F.A.C., including:<br>a. Assist with oral dosage forms, , , dosage forms, and , , , and dosage forms;<br>b. Measure liquid medications, break scored tablets, and crush tablets in accordance with | A 084 | | |

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| A 084 | Continued From page 9<br>prescription directions;<br>c. Recognize the need to obtain clarification of an "as needed" prescription order;<br>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;<br>e. Complete a medication observation record;<br>f. Retrieve and store medication;<br>g. Recognize the general signs of adverse reactions to medications and report such reactions;<br>h. Assist residents with syringes that are prefilled with the proper dosage by a pharmacist and , 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;<br>i. Assist with ;<br>j. Use a to perform testing;<br>k. Assist residents with and continuous positive airway pressure (CPAP) devices, excluding the titration of the levels;<br>l. Apply and remove stockings and hosiery;<br>m. Placement and removal of , bags, excluding the removal of the , or manipulation of the site; and,<br>n. Measurement of rate, temperature, and , rate.<br>(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 | A 084 | | |

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| A 084 | Continued From page 10<br><br>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.<br>(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.<br><br>429.52<br>(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 annually thereafter. The agency shall establish by rule the minimum requirements of this training<br><br>This Statute or Rule is not met as evidenced by:<br>Based on record review and staff interview, 1 of 3 care staff assisting with self-administered medications failed to complete 2 hours of continuing education on providing assistance with self-administered medications and safe medication practices in an assisted living facility, annually (Staff B).<br><br>The findings included:<br><br>During employee record review for Staff B, a | A 084 | | |

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| A 084 | Continued From page 11<br><br>direct care staff who assists residents with self-administered medications, documentation could not be found showing evidence that Staff B completed her 2 hours of continuing education on assistance with self-administered medications for the year 2020.<br><br>On at approximately 12:45 PM, the facility Manager and Administrator were informed of Staff B's missing continuing education training certificate for 2020. They were asked to provide proof that Staff B had completed the required 2 hours of continuing education training at any time during the year 2020. As of at 3:30 PM, no 2020 training documentation for Staff B was received.<br><br>Class III | A 084 | | |