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
	AL11965718	A. BUILDING: _____ B. WING _____	04/12/2022

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
TERRACINA GRAND	6825 DAVIS BLVD NAPLES, FL 34104

(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 re-licensure, limited nursing services, emergency power plan monitoring and complaint survey for complaint #2021016258 was conducted on through at Terracina Grand, an assisted living facility in Naples, Florida. Complaint #2021016258 was not substantiated. The following is a description of the deficiencies found at the time of the visit.	A 000		
A 052	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	A 052		

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A 052	Continued From page 1 helping the resident by lifting the container to his or her . (d) Applying , medications. (e) Returning the medication container to proper storage. (f) Keeping a record of when a resident receives assistance with self-administration under this section. (g) Assisting with the use of a , including removing the cap of a , opening the unit dose of solution, and pouring the prescribed premeasured dose of medication into the dispensing cup of the . (h) Using a to perform - level checks. (i) Assisting with putting on and taking off stockings. (j) Assisting with applying and removing an but not with titrating the prescribed 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 bags. (4) Assistance with self-administration does not include: (a) Mixing, , converting, or 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 of the body. (d) Administration of preparations.	A 052		

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A 052	Continued From page 2 (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 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	A 052		

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A 052	Continued From page 3	A 052		

self-administration of medication includes, orally advising the resident of the name and dosage of the medication 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 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

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A 052	Continued From page 4 medication does not include the activities detailed in Section 429.256(4), F.S. (g) As used in Section 429.256(4)(h), F.S., the terms "judgment" and "discretion" mean interpreting vital signs and evaluating or assessing a resident's condition. (h) 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 and interview, the facility failed to ensure staff who assist residents with self-administration of medications do so in accordance with proper procedure for 4 (Residents #17, # 18, # 19, # 20) of 4 medication` observations. The findings included: A review of the Facility Policy, Florida Version # 5, Policy No. A0609, 610; Assistance with self-administered Medication Nursing Services Medication Managements. approved , Policy: Assistance with self-administration includes, "assistance is provided in accordance with state regulations". On . . . at 12:57 p.m., Med Tech Staff D was observed assisting Resident #17 with medications. Staff D parked the medication cart outside of resident # 17's room. Staff D knocked on the room door, entered, and said to Resident #17, " I'm going to give you your meds". Staff D exited the room, went to the medication cart and took out Resident #17's medication. Without the	A 052		

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A 052	Continued From page 5 resident being present, Staff D placed the dosage of the medications into a cup. Reentering the room Staff D handed the cup of medications to the resident without identifying the medications by reading from the prescription label on each medication's container. On at 1:05 p.m., Med Tech Staff D was observed assisting Resident #18 with medications. Staff D parked the cart outside of resident # 18's room. Without the resident being present, Staff D placed Resident #18's medication into a cup. Staff D then entered the room and handed Resident #18 her medication. Staff D did not identify the medications for the resident by reading from the prescription label on each medication's container. On at 1:57 p.m., Med Tech Staff D was observed assisting Resident #19 with medications. Staff D parked the cart outside of resident # 19's room. Without the resident being present, Staff D placed Resident #19's medication into a cup. Staff D then entered the room and handed Resident #18 her medication. Staff D did not identify the medications for the resident by reading from the prescription label on each medication's container. On at 2:05 p.m., Med Tech Staff D was observed assisting Resident #20 with medications. Staff D parked the cart outside of resident # 20's room. Without the resident being present, Staff D placed Resident #20's medication into a cup. Staff D then entered the room and handed Resident #18 her medication. Staff D did not identify the medications for the resident by reading from the prescription label on each medication's container.	A 052		

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A 052	Continued From page 6 On . . . . . at 2:15 p.m., Director of Nursing (DON) stated the Med techs when assisting with self-administration of medications are required to read the medications being given to the resident unless the residents has a waiver for not being read their medications. On at 12:31 p.m., DON confirmed residents # 17. # 18, # 19, and # 20 have no waivers and Staff D should have read the medications to the residents when assisting them with self-administration of the medications. Class III	A 052		
A 078	59A-36.010(2) FAC Staffing Standards - Staff (2) STAFF. (a) Within 30 days after beginning employment, newly hired staff must submit a written statement from a health care provider documenting that the individual does not have any signs or symptoms of communicable . The examination performed by the health care provider must have been conducted no earlier than 6 months before submission of the statement. Newly hired staff does not include an employee transferring without a break in service from one facility to another when the facility is under the same management or ownership. 1. Evidence of a negative examination must be documented on an annual basis. Documentation provided by the Florida Department of Health or a licensed health care provider certifying that there is a shortage of . . . . . testing materials satisfies the annual	A 078		

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A 078	Continued From page 7 . . . . . examination requirement. An individual with a positive test must submit a health care provider's statement that the individual does not constitute a risk of . . . . . . 2. If any staff member has, or is suspected of having, a communicable . . . . . , such individual must be immediately removed from duties until a written statement is submitted from a health care provider indicating that the individual does not constitute a risk of transmitting a communicable . . . (b) Staff must be qualified to perform their assigned duties consistent with their level of education, training, preparation, and experience. Staff providing services requiring licensing or certification must be appropriately licensed or certified. All staff must exercise their responsibilities, consistent with their qualifications, to observe residents, to document observations on the appropriate resident's record, and to report the observations to the resident's health care provider in accordance with this rule chapter. (c) All staff must comply with the training requirements of rule 59A-36.011, F.A.C. (d) An assisted living facility . . . . . to provide services to residents must ensure that individuals providing services are qualified to perform their assigned duties in accordance with this rule chapter. The contract between the facility and the staffing agency or contractor must specifically describe the services the staffing agency or contractor will provide to residents. (e) For facilities with a licensed capacity of 17 or more residents, the facility must: 1. Develop a written job description for each staff position and provide a copy of the job description to each staff member; and,	A 078		

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A 078	Continued From page 8 2. Maintain time sheets for all staff. (f) Level 2 background screening must be conducted for staff, including staff . . . . . by the facility to provide services to residents, pursuant to sections 408.809 and 429.174, F.S. This Statute or Rule is not met as evidenced by: Based on record review and interview, the facility failed to ensure that, within 30 days of employment, staff submit a written statement from a health care provider documenting the individual is free from signs/symptoms of communicable . . . . . and evidence of freedom from ( ) documented annually thereafter for 1 (Staff E) of 4 employee records reviewed. The findings included: On a review of Staff E's employee file revealed a hire date of . . . as a Certified/Resident Aide. Staff E's file contained documentation of a statement from a health care provider that Staff E was free from signs/symptoms of communicable . . . . . signed . There was no further evidence of a statement of freedom from signed by a healthcare provider documented annually thereafter. On . . . . . at 12:25 p.m., the Business office Manager confirmed staff E needed annual communicable . . . . . documentation. Class III	A 078		
A 084	59A-36.011(6) FAC 429.52(6), FS Training - Assis Self-Admin Meds & Med Mgmt	A 084		

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A 084	Continued From page 9 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 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	A 084		

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A 084	Continued From page 10 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] 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,	A 084		

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A 084	Continued From page 11 n. Measurement of . . . . , ... , ... rate, temperature, and , , 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 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 record review and interview the facility failed to ensure unlicensed persons who provide assistance with self-administration of medications complete and obtain an initial 6-hour training	A 084		

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A 084	Continued From page 12 education and annual 2-hour training education on providing assistance with self-administered medications for 1 (Staff D) of 4 staff records reviewed. The findings included: On at 12:57 p.m., observed Staff D assist with self-administration of medications for residents # 17, #18, #19 and #20. Record review of Staff D's employee file revealed a hire date of as a Resident Aide/Med Tech. Staff D's file contained documentation of completing 6 hours of training education for assistance with self-administration of medications on . Staff D's file contained no documentation of completing annual 2-hour continuing education training for assistance with self-administration of medications. On at 12:25 p.m., the Business Office Manager reviewed staff D employee record and confirmed there is no evidence of completion of annual 2-hour continuing education of assistance with self-administration of medications. Class III	A 084		
A 091	59A-36.011(12) FAC Training - Documentation & Monitoring (12) TRAINING DOCUMENTATION AND MONITORING. (a) Except as otherwise noted, certificates, or copies of certificates, of any training required by this rule must be documented in the facility's personnel files. The documentation must include	A 091		

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A 091	Continued From page 13 the following: 1. The title of the training program, 2. The subject matter of the training program, 3. The training program agenda, 4. The number of hours of the training program, 5. The trainee's name, dates of participation, and location of the training program, 6. The training provider's name, dated signature and credentials, and professional license number, if applicable. (b) Upon successful completion of training pursuant to this rule, the training provider must issue a certificate to the trainee as specified in this rule. (c) The facility must provide the Department of Elder Affairs and the Agency for Health Care Administration with training documentation and training certificates for review, as requested. The department and agency reserve the right to attend and monitor all facility in-service training, which is intended to meet regulatory requirements. This Statute or Rule is not met as evidenced by: Based on record review and interview the facility failed to appropriately document required trainings for 3 (Staff D, E, F) of 4 employee records reviewed. The findings include: Record review for Staff D revealed a hire date of [redacted] as a Certified Nurse Aide/Med Tech. Further review revealed certificates of completion dated [redacted] for [redacted], Control, Safe Food Handling practices, Reporting Major and Adverse incidents, [redacted], Facility Emergencies, Fire Safety and Disaster Recovery, Recognizing and Reporting [redacted]/Neglect and [redacted]. The certificates	A 091		

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(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 091	Continued From page 14 did not include, the agenda, trainers name, credentials, and signature. Record review for Staff E revealed a hire date of [redacted] as a Resident Aide. Further review revealed certificates of completion dated for [redacted] Control, Safe Food Handling practices, Reporting Major and Adverse Incidents, [redacted], Recognizing and Reporting [redacted] /Neglect and [redacted], Fire Safety and Disaster Recovery, and Elopement Policies and Procedures. The certificates did not include, the agenda, trainers name, credentials, and signature. Record review for Staff F revealed a hire date of [redacted] as a Resident Aide. Further review revealed certificates of completion dated for [redacted] Control, and Safe Food Handling practices. Staff F completed 30 minutes of training in Activities of Daily Living which is less than the required 3 hours of training. Certificates of completion dated [redacted] were found for training in Reporting [redacted] /Neglect and [redacted], Resident Rights, Elopement Policies and Procedures, Emergency Preparedness and Environmental Safety. The certificates did not include, the agenda. On [redacted] at 12:25 a.m., the Business Office Manager (BOM) states the training for the employees is completed online. Once completed the certificates are printed and signed by the HR Assistant, who is not the actual instructor. The BOM acknowledged the person whose signature is on the certificates is not the actual trainer of the classes. Class III	A 091		

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
	AL11965718	A. BUILDING: _____ B. WING _____	04/12/2022

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