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
	AL11967714	A. BUILDING: _____ B. WING _____	R 05/05/2022

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
ROCKWELL SENIORS INC	22198 ENSENADA WY BOCA RATON, FL 33433

(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 revisit to the Relicensure survey was conducted on . . . . . at Rockwell Seniors Inc. The facility had an uncorrected deficiency identified at the time of the survey.	{A 000}		
{A 055}	59A-36.008(6) FAC Medication - Storage and Disposal (6) MEDICATION STORAGE AND DISPOSAL. (a) In order to accommodate the needs and preferences of residents and to encourage residents to remain as independent as possible, residents may keep their medications, both prescription and over-the-counter, in their possession both on or off the facility premises. Residents may also store their medication in their rooms or apartments if either the room is kept locked when residents are absent or the medication is stored in a secure place that is out of sight of other residents. (b) Both prescription and over-the-counter medications for residents must be centrally stored if: 1. The facility administers the medication; 2. The resident requests central storage. The facility must maintain a list of all medications being stored pursuant to such a request; 3. The medication is determined and documented by the health care provider to be hazardous if kept in the personal possession of the person for whom it is prescribed; 4. The resident fails to maintain the medication in a safe manner as described in this paragraph; 5. The facility determines that, because of physical arrangements and the conditions or habits of residents, the personal possession of medication by a resident poses a safety hazard to other residents, or 6. The facility's rules and regulations require	{A 055}		

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{A 055}	Continued From page 1	{A 055}		

central storage of medication and that policy has been provided to the resident before admission as required in Rule 59A-36.006, F.A.C.
(c) Centrally stored medications must be:
1. Kept in a locked cabinet; locked cart; or other locked storage receptacle, room, or area at all times;
2. Located in an area free of dampness and abnormal temperature, except that a medication requiring refrigeration must be kept refrigerated. Refrigerated medications must be secured by being kept in a locked container within the refrigerator, by keeping the refrigerator locked, or by keeping the area in which the refrigerator is located locked;
3. Accessible to staff responsible for filling pill-organizers, assisting with self-administration of medication, or administering medication. Such staff must have ready access to keys or codes to the medication storage areas at all times; and,
4. Kept separately from the medications of other residents and properly closed or sealed.
(d) Medication that has been discontinued but has not expired must be returned to the resident or the resident's representative, as appropriate, or may be centrally stored by the facility for future use by the resident at the resident's request. If centrally stored by the facility, the discontinued medication must be stored separately from medication in current use, and the area in which it is stored must be marked "discontinued medication." Such medication may be reused if prescribed by the resident's health care provider.
(e) When a resident's stay in the facility has ended, the administrator must return all medications to the resident, the resident's family, or the resident's guardian unless otherwise prohibited by law. If, after notification and waiting at least 15 days, the resident's medications are

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{A 055}	Continued From page 2 still at the facility, the medications are considered abandoned and may disposed of in accordance with paragraph (f). (f) Medications that have been abandoned or have expired must be disposed of within 30 days of being determined abandoned or expired and the disposal must be documented in the resident's record. The medication may be taken to a pharmacist for disposal or may be destroyed by the administrator or designee with one witness. (g) Facilities that hold a Special-ALF permit issued by the Board of Pharmacy may return dispensed medicinal drugs to the dispensing pharmacy pursuant to Rule 64B16-28.870, F.A.C. This Statute or Rule is not met as evidenced by: Based on observation and interview, the facility failed to ensure that discontinued medications were returned to the residents (Resident #1 and Resident #5) and failed to ensure to return all medications to a resident's family member (Resident #4) who was no longer residing in the facility. The findings included: In an observation conducted on from 10:50 AM to 11:15 AM in the facility's centrally-stored medication cabinet located in the kitchen, the following errant medications were observed. 1. Medications labeled with Resident #4's name: Two containers of 100 mg (milligrams)/5ml (milliliter) syrup and one 90-count container of 15 mg tablets. In an interview conducted with the Administrator on at 12:35 PM, she stated that Resident #4 no longer resides in the facility since	{A 055}		

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{A 055}	Continued From page 3 . . . . . and that the facility did not ensure to properly return these medications to the resident's family member. 2. Medications labeled with Resident #1's name: Three containers of , , , Thera Tears and Olopatadine and one sealed 50-count container of 50 mg tablets. During the interview conducted with the Administrator on at 12:35 PM, she stated that Resident #1 no longer used the , Thera Tears and Olopatadine , . . , . because these were discontinued and the was also discontinued before the resident could use this medication. 3. Medications labeled with Resident #5's name: One container of , , , , one 30-count . . . pack of . . . . . 40 mg tablets, one 30-count pack of , 25 mg tablets and one 30-count . . . . . 0.4 mg capsules. {Photographic evidence was obtained}. During the interview conducted with the Administrator on at 12:35 PM, she stated that Resident #5's . . . . . , ... , . . , tablets, , tablets and capsules were all discontinued as well. She further stated at this time that the facility did not promptly return Resident #1, Resident #4 and Resident #5's medications to each resident or their family members, when these medications were discontinued or the resident was no longer residing in the facility. Class III	{A 055}		