

Agency for Health Care Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11965162	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 07/19/2022
NAME OF PROVIDER OR SUPPLIER SOUTH SEAS ALF		STREET ADDRESS, CITY, STATE, ZIP CODE 101 MCABEE COURT GULF BREEZE, FL 32561		
(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 investigation (complaint numbers 2022006010, 2022005540, & 2021017405) and generator monitoring visit was conducted on through at South Seas ALF. Deficiencies were identified at the time of survey.	A 000		
A 055 SS=D	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	A 055		

AHCA Form 3020-0001

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

TITLE

(X6) DATE

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A 055	Continued From page 1 other residents, or 6. The facility's rules and regulations require 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	A 055			

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A 055	Continued From page 2 prohibited by law. If, after notification and waiting at least 15 days, the resident's medications are 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 observations and staff interviews, the facility failed to secure 1 of 1 nurse's station where centrally located medications are stored, including a medication cart and refrigerated medications. The findings include: On _____ from approximately 10:10 AM to 10:15 AM, the nurse's station door was identified as being unlocked and no facility staff were observed in the immediate area or inside the nurse's station. A medication cart was observed inside the nurse's station with the top drawer partially ajar and medications visible. There was another unlocked door inside the nurse's station that connected to a smaller room which contained a refrigerator filled with medications including _____ . (Photographic evidence obtained) On _____ at approximately 10:15 AM, an	A 055			

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A 055	Continued From page 3 interview was conducted with Staff B, Medication Technician (MT). Staff B stated that the nurse's station door should always be locked. Staff B further stated that all the MTs have a key. When asked to open the nurse's station door, Staff B easily opened it, and the medication cart was visible with top drawer open. Staff B stated that all the medication carts should be locked when not in use. When asked to open the medication refrigerator, Staff B confirmed that _____ was present. A review of the facility's Medication Storage Policy revealed the following: Independent residents who self-medicate must keep medicine in a locked drawer or medicine cabinet. Medications cannot be left out in rooms. Medications with supervision will be kept in the Nurse's area in a locked cart. At no time will medications be left out in resident's room. On _____ at approximately 11:08 AM, an interview was conducted with the Administrator. When asked what her expectations were for the security of the medication carts and nurse's station room she stated, "It is my expectation that the medications carts are locked at all times when not in use, and the nurse's station should always be locked 24/7". When asked where in the Medication Storage Policy it provides clear instruction to ensure the secure storage of all medications she said, "I will definitely add specific wording to identify the need for more secure medication storage at all times in the medication carts and to securely lock the nurse's station door 24/7". Class III	A 055		