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
	AL11969725	A. BUILDING: _____ B. WING _____	08/10/2022

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
THE CAPSTONE AT ROYAL PALM	10621 OKEECHOBEE BLVD ROYAL PALM BEACH, FL 33411

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A 000	Initial Comments An unannounced licensure Complaint survey (#2021017006, #2022004827, #2022008548, #2022011424) and Generator Monitoring survey was conducted on through at The Capstone at Royal Palm. The facility had deficiencies identified related to the Complaint survey (#2022004827, #2021017006, #2022008548) at the time of the survey.	A 000		
A 007 SS=D	59A-36.006(1) FAC Admissions - Criteria (1) ADMISSION CRITERIA. (a) An individual must meet the following minimum criteria in order to be admitted to a facility holding a standard, limited nursing services, or limited mental health license: 1. Be at least 2. Be free from signs and symptoms of any communicable that is likely to be transmitted to other residents or staff. An individual who has ( ) may be admitted to a facility, provided that the individual would otherwise be eligible for admission according to this rule. 3. Be able to perform the activities of daily living, with supervision or assistance if necessary. 4. Be able to transfer, with assistance if necessary. The assistance of more than one person is permitted. 5. Be capable of taking medication, by either self-administration, assistance with self-administration, or administration of medication. a. If the resident needs assistance with self-administration of medication, the facility must inform the resident of the professional qualifications of facility staff who will be providing this assistance. If unlicensed staff will be providing assistance with self-administration of	A 007		

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A 007	Continued From page 1 medication, the facility must obtain written informed consent from the resident or the resident's surrogate, guardian, or attorney-in-fact. b. The facility may accept a resident who requires the administration of medication if the facility employs a nurse who will provide this service or the resident, or the resident's legal representative, designee, surrogate, guardian, or attorney-in-fact, contracts with a third party licensed to provide this service to the resident. 6. Not have any special dietary needs that cannot be met by the facility. 7. Not be a danger to self or others as determined by a health care practitioner, or a mental health practitioner licensed under Chapter 490 or 491, F.S. 8. Not require 24-hour licensed professional mental health treatment. 9. Not be bedridden, unless the resident is receiving licensed hospice services pursuant to Section 429.26(1)(c), F.S.; 10. Not have any or 4 , . A resident requiring care of a may be admitted provided that: a. The resident either: (I) Resides in a standard or limited nursing services licensed facility and contracts directly with a licensed home health agency or a nurse to provide care; or (II) Resides in a limited nursing services licensed facility and care is provided by the facility pursuant to a plan of care issued by a health care practitioner; b. The condition is documented in the resident's record and admission and discharge logs; and, c. If the resident's condition fails to improve within 30 days as documented by a health care practitioner, the resident must be discharged from the facility.	A 007		

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A 007	Continued From page 2 11. Residents admitted to standard, limited nursing services, or limited mental health licensed facilities may not require any of the following nursing services: a. [illegible] airway management of any kind, except that of continuous positive airway pressure may be provided through the use of a CPAP or bipap machine; b. Assistance with [illegible], c. Monitoring of [illegible] gases, d. Management of post-surgical drainage tubes and [illegible] vacuum devices; e. The administration of [illegible] products in the facility; or f. Treatment of surgical [illegible] or [illegible], unless the surgical [illegible] or [illegible] and the underlying condition have been stabilized and a plan of care has been developed. The plan of care must be maintained in the resident's record. 12. In addition to the nursing services listed above, residents admitted to facilities holding only standard and/or limited mental health licenses may not require any of the following nursing services: a. [illegible] and [illegible] performed in the facility; b. [illegible] performed in the facility. 13. Not require 24-hour nursing supervision, unless the resident is receiving licensed hospice services pursuant to Section 429.26(1)(c), F.S.; 14. Not require skilled rehabilitative services as described in Rule 59G-4.290, F.A.C. 15. Be appropriate for admission to the facility as determined by the facility administrator. The administrator must base the determination on: a. An assessment of the strengths, needs, and preferences of the individual; b. The medical examination report required by Section 429.26, F.S.;	A 007		

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A 007	Continued From page 3 c. The facility's admission policy and the services the facility is prepared to provide or arrange in order to meet resident needs. Such services may not exceed the scope of the facility's license unless specified elsewhere in this rule; and, d. The ability of the facility to meet the uniform fire safety standards for assisted living facilities established in rule Chapter 69A-40, F.A.C. (b) A resident who otherwise meets the admission criteria for residency in a standard licensed facility, but who requires assistance with the administration and regulation of portable [illegible] or assistance with routine [illegible] care of [illegible] site [illegible] placement, may be admitted to a facility with a standard license as long as the facility has a nurse on staff or under contract to provide the assistance or to provide training to the resident on how to perform these functions themselves. (c) Nursing staff may not provide training to unlicensed persons, as defined in Section 429.256(1)(b), F.S., to perform skilled nursing services, and may not delegate the nursing services described in this section to certified nursing assistants or unlicensed persons. This provision does not restrict a resident or a resident's representative from [illegible] with a licensed third party to provide the assistance if the facility is agreeable to such an arrangement and the resident otherwise meets the criteria for admission and continued residency in a facility with a standard license. (d) Not withstanding any other provisions of this rule, an individual enrolled in and receiving licensed hospice services may be admitted to an assisted living facility pursuant to Section 429.26(1)(d), F.S. (e) Resident admission criteria for facilities holding an extended congregate care license are	A 007		

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A 007	Continued From page 4 described in Rule 59A-36.021, F.A.C. This Statute or Rule is not met as evidenced by: Based on record review and interview, the facility failed to properly admit 1 out of 4 sampled residents (Resident #3) by not basing its admission determination on the resident's strengths, needs and established medical examination. The findings are: Review of the facility's "Resident Pre-admission Appraisal" policy and procedures dated on revealed provisions that included the following: - The resident care director or designee will gather data on each potential resident "to determine the need and type of services to be provided". - The resident's completed medical examination (AHCA Form 1823) is reviewed before admission, if available, "for any prohibited conditions or communicable illness. - The resident's medical examination (AHCA Form 1823) "must be received prior to admission to confirm the resident's eligibility for admission". Review of the facility's "Resident Assessment and Service Plan" policy and procedures dated on revealed provisions that included the following: - In order to evaluate residents' needs, the resident care director will ensure that resident assessments are completed for residents in accordance with the procedures in this policy. - Assessments and service plans will be updated	A 007		

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A 007	Continued From page 5 as frequently as necessary to ensure they reflect current resident care needs and preferences. - Resident assessments are to be completed prior to move-in. - Residents will be re-assessed whenever there is a significant change in resident condition. - A resident change of condition is defined as a decline that is not considered short term in nature, and may include a resident who has . . . and suffered an injury. Review of Resident #3's record indicated that the resident was admitted to the facility on . . . . . Review of the resident's medical examination dated on . . . . . indicted that she was diagnosed with , cognition and gait abnormality, and the resident was wheelchair bound and needed precautions. Further review of this medical examination revealed that the resident needed total assistance with ambulation, assistance with bathing, ... ی، grooming and transferring, and supervision with eating and toileting. Review of Resident #3's facility assessment dated on revealed that the resident needed assistance with bathing, reminders for grooming and eating, stand by assist with . . . . . ی، and no assistance was needed for ambulation, ... ی، transferring and toileting. Further review of this assessment indicated that the resident was not at risk for and was not assessed to required a wheelchair for ambulation. Review of the resident incident report dated on . . . . . at approximately 4:00am indicated that the resident was found by a staff member leaning on her nightstand. Review of this report indicated that the resident suffered a cut on left and first aid was provided. Further review of the resident's record indicated that there were no	A 007		

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A 007	Continued From page 6 additional assessments documented for this resident. In an interview with the Administrator on at 11:35am, she stated that she performed Resident #3's facility assessment dated on and that she did not consider the results from the resident's medical examination dated on She stated that she realized that the results of the resident's facility assessment did not match the medical examination the resident received 3 days prior. She stated that the facility provided the care and services based on the results from the facility's assessment and may have required additional care and services shall she considered the results of the resident's medical examination. She stated that she did not consult with the resident's examining physician regarding the changes identified in the facility's assessment. In an interview with the Administrator on at 12:10pm, she stated that Resident #3 in her room on and there were no updated assessments or service plans done by the facility. She stated that the resident subsequently developed , severe enough for the family member to recommend that the resident go to the hospital on Class III	A 007		
A 052 SS=D	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	A 052		

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A 052	Continued From page 7 container, from where it is stored, and bringing it to the resident. For purposes of this paragraph, an . . syringe that is prefilled with the proper dosage by a pharmacist and an , that is prefilled by the manufacturer are considered medications in previously dispensed, properly labeled containers. (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 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 . . . . . . (4) Assistance with self-administration of medication does not include: (a) Mixing, . , . , converting, or . . . . . , medication doses, except for	A 052		

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A 052	Continued From page 8 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. (e) The use of irrigations or debriding agents used in the treatment of a skin condition. (f) Assisting with , , or ˛ 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 ˛ or older, trained to assist with self administered medication pursuant to the training	A 052		

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A 052	Continued From page 9	A 052		

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 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,

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A 052	Continued From page 10 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 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, record review and interview, the facility failed to properly assist 4 out of 5 sampled residents (Residents #5, 6, 9 and 10) with self-administration of medications by not orally advising residents of the medication names and dosages received and by not confirming the medications given for the intended resident. The findings are: Review of the facility's "Medication Services" policy and procedures dated on revealed provisions that included the following: - The administrator "will ensure that medication related services required or requested by each resident are provided." - "All medications that staff members handle, store, and assist with will be documented on the medication observation records (MOR) and in accordance with state regulations."	A 052		

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A 052	Continued From page 11 - "Medications may be given up to one hour before or up to one hour after the prescribed time." Review of the facility's "Medication Orders" policy and procedures dated on revealed provisions that included the following: - "Complete physician's orders are to be received for all medications stored, administered and/or provided with assistance to residents". - "Complete physician's orders are to be received so the pharmacy has all required information". - Prescription medications must include, but is not limited to, the resident's name, name of drug, dosage, frequency and directions for use. In an observation on at 10:25am, while assisting Resident #5 with the self-administration of her medications, med tech staff A did not orally advise the resident of the name and dosage of the medications given. In an observation on at 10:35am, while assisting Resident #6 with the self-administration of her medications, med tech staff A did not orally advise the resident of the name and dosage of the medications given. In an interview with staff A on at 10:45am, she stated that she did not know she was required to orally advise each resident of the name and dosage of each medication given. In an interview with the Director of Nursing (DON) on at 10:40am, she stated that she knew of no resident who had completed a written waiver to opt out of having to be orally advised of the medication name and dosage they received. In an observation on at 10:15am, while at	A 052		

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A 052	Continued From page 12 the medication cart inside the memory care unit, nurse staff B prepared the oral medications for Resident #9 and intended to provide these medications to Resident #10. In an observation immediately before nurse staff B went inside Resident #10's room and offer these medications to the resident, nurse staff B was reminded to re-check the origin of the medications she had in her . . . and to re-read the resident's MOR to ensure accuracy. In an interview with nurse staff B on . . . at 10:35am, she stated that she realized that she prepared Resident #9's medications in error, when she meant to prepare Resident #10's medications for proper med pass. She stated that she felt that she needed further training to orient herself with the facility medication services standards. Class III	A 052		
A 056 SS=D	59A-36.008(7) FAC Medication - Labeling and Orders (7) MEDICATION LABELING AND ORDERS. (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: 1. The resident's name; and, 2. The identification of each medicinal drug in the container. (b) Except with respect to the use of pill organizers as described in subsection (2), no	A 056		

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A 056	Continued From page 13 individual other than a pharmacist may transfer medications from one storage container to another. (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 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. (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. (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. (f) The facility must make every reasonable effort to ensure that prescriptions for residents who	A 056		

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	AL11969725	A. BUILDING: _____ B. WING _____	08/10/2022

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A 056	Continued From page 14 receive assistance with self-administration of medication or medication administration are filled or refilled in a timely manner. (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, they must be kept in a container that bears a label containing the following: 1. Practitioner's name, 2. Resident's name, 3. Date dispensed, 4. Name and strength of the drug, 5. Directions for use; and, 6. Expiration date. (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. This Statute or Rule is not met as evidenced by: Based on observation, interview and record review, the facility failed to follow the prescribed medication directions for 3 out of 5 sampled residents (Residents #4, 6 and 11) by not providing medications at the prescribed times and not providing individual medications as prescribed. The findings are:	A 056		

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A 056	Continued From page 15 Review of the facility's "Medication Orders" policy and procedures dated on revealed provisions that included the following: - "Complete physician's orders are to be received for all medications stored, administered and/or provided with assistance to residents". - "Complete physician's orders are to be received so the pharmacy has all required information". - Prescription medications must include, but is not limited to, the resident's name, name of drug, dosage, frequency and directions for use. Review of the facility's "Medication Services" policy and procedures dated on revealed provisions that included the following: - The administrator "will ensure that medication related services required or requested by each resident are provided." - "All medications that staff members handle, store, and assist with will be documented on the medication observation records (MOR) and in accordance with state regulations." - "Medications may be given up to one hour before or up to one hour after the prescribed time." In an observation on at 10:35am, Resident #6 received assistance with self-administration of her medications from med tech staff A. In an interview with staff A on at 10:45am, she stated that the resident's medications were prescribed to be given daily at 8:00am and she was aware that it was beyond the allowed time to give these medications but she was the only staff member performing medication passes that morning. She stated that she was responsible for medication passes in the standard care side of the facility. Review of Resident #6's MOR	A 056		

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A 056	Continued From page 16 revealed that the resident was prescribed to receive her daily morning medications at 8:00am. Review of the facility census dated on . . . . indicated that there were approximately 50 residents located in the standard care side of the facility. (Photographic evidence was obtained.) In an interview with Resident #4 on at 2:45pm, she stated that she has lived in the facility for about 3 months and she presently received assistance with self-administration for the majority of her medications from the facility staff. She stated that she was supposed to receive her daily medications 3 or 4 times per day, but she presently just received her medications 2 times per day. She stated that she felt this happened because there were not enough staff members to assist with resident medications. Review of Resident #4's . . . . . MOR revealed that the resident was prescribed to receive her daily medications at 8:00am, 9:00am, 2:00pm, 5:00pm, 8:00pm and 9:00pm. (Photographic evidence was obtained.) In an observation on at 11:05am, the interim Director of Nursing (DON) assisted Resident #11 with the self-administration of her medications. Review of the resident's . . . . MOR revealed that the resident was prescribed to receive her daily morning medications at 8:00am or 9:00am. (Photographic evidence was obtained.) In an interview with the interim DON on at 11:10am, she stated that that Resident #11's medications were prescribed to be given daily at 8:00am or 9:00am and she was aware that it was beyond the allowed time to give these	A 056		

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A 056	Continued From page 17 medications. She stated that she was assisting staff A to perform medication passes in the standard care side of the facility that morning. Class III	A 056		