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
	AL11963919	A. BUILDING: _____ B. WING _____	R 09/13/2022

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
HARBORCHASE	2960 TAMPA ROAD PALM HARBOR, FL 34684

(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 A fifth revisit to an biennial survey with revisits on , , & was conducted on at Harborchase. Deficiencies were identified at the time of the survey.	{A 000}		
{A 054} SS=D	59A-36.008(5) FAC Medication - Records (5) MEDICATION RECORDS. (a) For residents who use a pill organizer managed in subsection (2), the facility must keep either the original labeled medication container; or a medication listing with the prescription number, the name and address of the issuing pharmacy, the health care provider's name, the resident's name, the date dispensed, the name and strength of the drug, and the directions for use. (b) The facility must maintain a daily medication observation record for each resident who receives assistance with self-administration of medications or medication administration. A medication observation record must be immediately updated each time the medication is offered or administered and include: 1. The name of the resident and any known the resident may have; 2. The name of the resident's health care provider and the health care provider's telephone number; 3. The name, strength, and directions for use of each medication; and, 4. A chart for recording each time the medication is taken, any missed dosages, refusals to take medication as prescribed, or medication errors. (c) For medications that serve as chemical , the facility must, pursuant to section 429.41, F.S., maintain a record of the prescribing physician's annual evaluation of the use of the	{A 054}		

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{A 054}	Continued From page 1 medication. This Statute or Rule is not met as evidenced by: Based on interview and record review, the facility failed to ensure medications were accurately documented on the Medication Observation Records (MORs) for one (Resident #9) of six sampled residents. Findings Included: In an interview with Staff A conducted on . . . . . at 10:45am she stated ordered medication was not available for Resident #9. A record review of the , MOR for Resident #9 conducted on revealed Staff A had signed off the 8:00am ProSource Zac order as given. In an interview with the Executive Director conducted on at 1:13pm she stated it is the policy to document medications not given with a circled initial and a note as to why it was not given as ordered. Photographic Evidence Obtained. Class III	{A 054}		
{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	{A 056}		

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{A 056}	Continued From page 2 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 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	{A 056}		

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{A 056}	Continued From page 3 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 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.	{A 056}		

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{A 056}	Continued From page 4 This Statute or Rule is not met as evidenced by: Based on observation, record review, and interview, the facility failed to provide medications according to health care provider's orders, and failed to make every reasonable effort to ensure that prescriptions for residents who received assistance with self-administration of medication were filled or refilled in a timely manner for two residents (Resident #1 and Resident #9) of two sampled residents. Additionally, the Facility failed to make immediate changes to the Medication Observation Record (MOR) when new orders were received for one (Resident #1) of two sampled residents. Findings Included: In an interview with Staff A conducted on . . . . . at 10:45am she stated two medications were not available to be given for Resident #1 and Resident #9. In a record review of the Medication Observation Records (MORs) conducted on the Memory Care Unit on . . . . . the following was revealed: -Resident #1 had an order for . . . . . HFA take one puff two times daily at 8:00am and 5:00pm. All morning doses were circled as not given from . . . . . through . . . . . . The exception record on the . . . of the MOR revealed the medication was not given because the medication was "not in the cart." All afternoon doses were circled as not given from . . . . . through . . . . . due to medication "not in the cart." -Resident #9 had an order for Prosource Zac, take 30ml by . . . twice daily as a supplement	{A 056}		

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{A 056}	Continued From page 5 at 8:00am and 8:00pm. All morning doses were circled as not given from through . . . . The exception record on the . . . of the MOR revealed the medication was not given because the medication was "not in the cart." All afternoon doses were circled as not given from . . . . through . . . . due to medication "not in the cart." In a record review for Resident #1 conducted on the 1823 Resident Assessment dated . . . . revealed the resident required assistance with self-administration of medication and an attached medication list listed . . . . HFA 108 (90 base) mcg/act aerosol solution Take 2 puffs as needed inhalation twice a day. In an interview conducted on at 12:33pm with Staff B she provided an order for Resident #1 that indicated the missing medication on the MOR was discontinued. She stated "The order just basically did not get put on the MOR correctly as an as needed (PRN) medication. We are going through all the MORs and getting everything they are not using, and this one slipped through unfortunately." In a record review of an order dated at 3:05pm for Resident #1 conducted on the nursing fax request for orders read: " , we DC the following medication secondary to non-use: as needed (PRN)?" The order request was marked as approved. In a review of the Consultant Pharmacist Monthly Visit Report dated conducted on revealed "several orders were found	{A 056}		

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{A 056}	Continued From page 6 D/C'd on the MORs from old previous months, as far as . If the records are this inaccurate, I suggest you have the pharmacy correct and re-print before they go in the books on the carts." In an interview with the Executive Director conducted on at 1:13pm regarding the discontinued order for Resident #1 on the MOR as a scheduled medication, she stated "We have been having an enormous amount of audits and it has not been brought to my attention, but I will be reaching out to [the consultant pharmacy] directly." Additionally stated she would expect the medication technicians to notify the nurse who would notify the doctor, if a medication was not given as ordered. In an attempted record review requested on for Resident #1 and Resident #9, no evidence of a notification was provided to the ordering provider that medications were not available to be given for through Photo Evidence Obtained. Class III	{A 056}		