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
	AL11969452	A. BUILDING: _____ B. WING _____	R 02/02/2023

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
HARBORCHASE OF DR PHILLIPS	7233 DELLA DRIVE ORLANDO, FL 32819

(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 revisit to complaint investigation 2022015096 was conducted at Harborchase of Dr. Phillips on . The facility had uncorrected deficiencies at the time of the survey.	{A 000}		
{A 025} SS=D	429.26(7) FS; 59A-36.007(1) FAC Resident Care - Supervision 429.26 (7) The facility shall notify a licensed physician when a resident exhibits signs of or or has a change of condition in order to rule out the presence of an underlying physiological condition that may be contributing to such or . The notification must occur within 30 days after the acknowledgment of such signs by facility staff. If an underlying condition is determined to exist, the facility must notify the resident's representative or designee of the need for health care services and must assist in making , , for the necessary care and services to treat the condition. If the resident does not have a representative or designee or if the resident's representative or designee cannot be located or is unresponsive, the facility shall arrange with the appropriate health care provider for the necessary care and services to treat the condition. 59A-36.007 Resident Care Standards. An assisted living facility must provide care and services appropriate to the needs of residents accepted for admission to the facility. (1) SUPERVISION. Facilities must offer personal supervision as appropriate for each resident, including the following: (a) Monitoring of the quantity and quality of resident diets in accordance with Rule	{A 025}		

AHCA Form 3020-0001

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE | (X6) DATE

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{A 025}	Continued From page 1 59A-36.012, F.A.C. (b) Daily observation by designated staff of the activities of the resident while on the premises, and awareness of the general health, safety, and physical and emotional well-being of the resident. (c) Maintaining a general awareness of the resident's whereabouts. The resident may travel independently in the community. (d) Contacting the resident's health care provider and other appropriate party such as the resident's family, guardian, health care surrogate, or case manager if the resident exhibits a significant change. (e) Contacting the resident's family, guardian, health care surrogate, or case manager if the resident is discharged or moves out. (f) Maintaining a written record, updated as needed, of any significant changes, any illnesses that resulted in medical attention, changes in the method of medication administration, or other changes that resulted in the provision of additional services. This Statute or Rule is not met as evidenced by: DEFICIENCY REMAINED UNCORRECTED Based on record reviews and interviews, the facility failed to provide care and services to meet the needs of residents by failing to administer medications prescribed by a health care provider to 2 of 5 sampled residents (#5 and #12). Findings: 1. Review of resident #5's record revealed a facility admission date of [redacted]. A [redacted] 1823 indicated the resident's diagnoses were [redacted] and [redacted]. The resident required assistance	{A 025}		

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{A 025}	Continued From page 2 with self-administration of medications. A . . . . facility note indicated the resident complained of . , . , and runny . . . . On . . . . . a health care provider prescribed 10 milliliters (ml) by . . every eight hours for 3 days. On . . . . . a health care provider prescribed suspension 10 ml by every 6 hours for . . . for 3 days. Review of the resident's . . . . . Medication Observation Record (MOR) revealed she was given only two doses of the . . . . , once on and once on . On a health care provider prescribed . . . . . 10 ml by . . . . three times a day for 3 days. Review of the resident's MOR revealed the . . . . was not on it and therefore, no documentation to indicate the resident received it. On . . . . . at 12:45 pm, the findings were discussed with the director of nursing (DON) and the memory care director and neither of them could provide additional documents or explanation. 2. Review of resident #12's . . . . . 1823 revealed the resident required assistance with self-administration of medications. A . . . . physician order fax sheet indicated the resident was positive for Covid and complained of	{A 025}		

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{A 025}	Continued From page 3 . . . . . The health care provider prescribed , 500 milligrams by daily for 7 days. Review of the resident's MOR revealed the resident was given the medication from . . . . . (6 doses). Review of the resident's . . . . . MOR revealed the , was not on it and therefore, no documentation to indicate the resident received the seventh and last dose. On at 12:50 pm, the findings were discussed with the DON, who was unable to provide further documentation or explanation. Class III	{A 025}		
{A 077} SS=D	429.176 FS; 429.52( ),59A-36.01(1) FAC Staffing Standards - Administrators 429.176 Notice of change of administrator.-If, during the period for which a license is issued, the owner changes administrators, the owner must notify the agency of the change within 10 days and provide documentation within 90 days that the new administrator meets educational requirements and has completed the applicable core educational requirements under s. 429.52. A facility may not be operated for more than 120 consecutive days without an administrator who has completed the core educational requirements. 429.52 (4) A facility administrator must complete the required core training, including the competency test, within 90 days after the date of employment	{A 077}		

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{A 077}	Continued From page 4 as an administrator. Failure to do so is a violation of this part and subjects the violator to an administrative fine as prescribed in s. 429.19. Administrators licensed in accordance with part II of chapter 468 are exempt from this requirement. Other licensed professionals may be exempted, as determined by the agency by rule. (5) Administrators are required to participate in continuing education for a minimum of 12 contact hours every 2 years. 59A-36.010 (1) ADMINISTRATORS. Every facility must be under the supervision of an administrator who is responsible for the operation and maintenance of the facility including the management of all staff and the provision of appropriate care to all residents as required by chapters 408, part II, 429, part I, F.S., and rule chapter 59A-35, F.A.C., and this rule chapter. (a) An administrator must: 1. Be at least [illegible]; 2. If employed on or after [illegible], have, at a minimum, a high school diploma or G.E.D.; 3. Be in compliance with Level 2 background screening requirements pursuant to sections 408.809 and 429.174, F.S.; 4. Complete the core training and core competency test requirements pursuant to rule 59A-36.011, F.A.C., no later than 90 days after becoming employed as a facility administrator. Administrators who attended core training prior to [illegible], are not required to take the competency test unless specified elsewhere in this rule; and, 5. Satisfy the continuing education requirements pursuant to rule 59A-36.011, F.A.C. Administrators who are not in compliance with	{A 077}		

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{A 077}	Continued From page 5 these requirements must retake the core training and core competency test requirements in effect on the date the non-compliance is discovered by the agency or the department. (b) In the event of extenuating circumstances, such as the of a facility administrator, the agency may permit an individual who otherwise has not satisfied the training requirements of subparagraph (1)(a)4. of this rule, to temporarily serve as the facility administrator for a period not to exceed 90 days. During the 90 day period, the individual temporarily serving as facility administrator must: 1. Complete the core training and core competency test requirements pursuant to rule 59A-36.011, F.A.C.; and, 2. Complete all additional training requirements if the facility maintains licensure as an extended congregate care or limited mental health facility. (c) Administrators may supervise a maximum of either three assisted living facilities or a group of facilities on a single campus providing housing and health care Administrators who supervise more than one facility must appoint in writing a separate manager for each facility. However, an administrator supervising a maximum of three assisted living facilities, each licensed for 16 or fewer beds and all within a 15 mile of each other, is only required to appoint two managers to assist in the operation and maintenance of those facilities. (d) An individual serving as a manager must satisfy the same qualifications, background screening, core training and competency test requirements, and continuing education requirements as an administrator pursuant to paragraph (1)(a) of this rule. Managers who attended the core training program prior to , , , , are not required to take the	{A 077}		

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{A 077}	Continued From page 6 competency test unless specified elsewhere in this rule. In addition, a manager may not serve as a manager of more than a single facility, except as provided in paragraph (1)(c) of this rule, and may not [illegible], serve as an administrator of any other facility. (e) Pursuant to section 429.176, F.S., facility owners must notify the Agency Central Office within 10 days of a change in facility administrator on the Notification of Change of Administrator form, AHCA Form 3180-1006, [illegible], which is incorporated by reference and available online at: http://www.flrules.org/Gateway/reference.asp?No=Ref-09393. This Statute or Rule is not met as evidenced by: Based on record reviews and interviews, the facility's administrator failed to oversee the operation and maintenance of the facility by failing to ensure 2 of 5 sampled residents received medications prescribed by a health care provider (#5 and #12). Findings: 1. Review of resident #5's record revealed a facility admission date of [illegible]. A 1823 indicated the resident's diagnoses were [illegible] and [illegible]. The resident required assistance with self-administration of medications. A facility note indicated the resident complained of [illegible], and runny [illegible]. On a health care provider prescribed	{A 077}		

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{A 077}	Continued From page 7 10 milliliters (ml) by every eight hours for 3 days. On a health care provider prescribed suspension 10 ml by every 6 hours for for 3 days. Review of the resident's Medication Observation Record (MOR) revealed she was given only two doses of the , once on and once on . On a health care provider prescribed 10 ml by three times a day for 3 days. Review of the resident's MOR revealed the was not on it and therefore, no documentation to indicate the resident received it. On at 12:45 pm, the findings were discussed with the director of nursing (DON) and the memory care director and neither of them could provide additional documents or explanation. 2. Review of resident #12's 1823 revealed the resident required assistance with self-administration of medications. A physician order fax sheet indicated the resident was positive for Covid and complained of . The health care provider prescribed 500 milligrams by daily for 7 days. Review of the resident's MOR revealed the resident was given the medication from (6 doses).	{A 077}		

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{A 077}	Continued From page 8 Review of the resident's , MOR revealed the was not on it and therefore, no documentation to indicate the resident received the seventh and last dose. On at 12:50 pm, the findings were discussed with the DON, who was unable to provide further documentation or explanation. Class III	{A 077}		