

Agency for Health Care Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11969397	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 03/03/2023
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NAME OF PROVIDER OR SUPPLIER

STREET ADDRESS, CITY, STATE, ZIP CODE

SYMPHONY AT DELRAY BEACH

**4840 WEST ATLANTIC AVENUE
DELRAY BEACH, FL 33445**

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A 000	Initial Comments An unannounced Relicensure, Complaint (#2020020463, #2021000595, #2021003909, #2021009496, #2022002783, and #2023000125) and Generator Monitoring survey was conducted on _____ through _____ at Symphony at Delray Beach. The facility had deficiencies identified related to the Relicensure at the time of the survey.	A 000		
A 052	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 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	A 052		

AHCA Form 3020-0001

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

TITLE

(X6) DATE

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A 052	Continued From page 1 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 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	A 052		

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A 052	Continued From page 2 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 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	A 052		

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A 052	Continued From page 3 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, 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 1 out of 3 residents (Resident #17) with self-administration of medications by not	A 052		

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A 052	Continued From page 4 providing the resident's medications at their prescribed times. The findings included: In an observation conducted on _____ at 11:30 AM, Medication Technician (MT) Staff D assisted Resident #17 with the self-administration of 7 oral medications, which included _____ 20 milligrams (mg) daily at 9:00 AM used for _____ 25 mg twice daily at 9:00 AM and 5:00 PM used for high _____ and _____ ER 28 mg daily at 9:00 AM used for _____. In an observation after MT Staff D completed assisting with the self-administration of Resident #17's medications, she was not observed to document these actions in the resident's Medication Observation Record (MOR). Review of Resident #17's MOR revealed that the _____ 20 mg daily, _____ 25 mg twice daily and _____ ER 28 mg daily medications were each prescribed to be given at 9:00 AM and these medications were recorded by Staff D as having been given to the resident on _____ at 9:00 AM, however they were observed to have been administered at 11:30 AM. Of note, the Metroprolol was ordered twice daily at 9:00 AM and 5:00 PM, therefore administering the medication at 11:30 AM and not at 9:00 AM as ordered, may affect the residents _____ if taken too close together. (Photographic evidence was obtained). In an interview conducted with MT Staff D on _____ at 11:40 AM, she stated that Resident #17 had refused these medication earlier on _____ at 8:00 AM and that she notified the Care Coordinator of this. She stated that this was	A 052		

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A 052	Continued From page 5 the reason why she assisted the resident with these medications on _____ at 11:30 AM. In an interview conducted with the Care Coordinator on _____ at 11:50 AM, she stated that she was not notified that Resident #17 refused her medications earlier on _____ at 8:00 AM and that MT Staff D likely documented these medications as given before the time she actually provided the medications for the resident. Class III	A 052			
A 081	429.52(1 & 7) FS; 59A-36.011() FAC Training - Staff In-Service 429.52(1) (1) Each new assisted living facility employee who has not previously completed core training must attend a preservice orientation provided by the facility before interacting with residents. The preservice orientation must be at least 2 hours in duration and cover topics that help the employee provide responsible care and respond to the needs of facility residents. Upon completion, the employee and the administrator of the facility must sign a statement that the employee completed the required preservice orientation. The facility must keep the signed statement in the employee's personnel record. (7) Facility staff shall participate in inservice training relevant to their job duties as specified by agency rule. Topics covered during the preservice orientation are not required to be repeated during inservice training. A single certificate of completion that covers all required inservice training topics may be issued to a participating staff member if the training is provided in a single	A 081			

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A 081	Continued From page 6 training course. 59A-36.011 (2) STAFF PRESERVICE ORIENTATION. (a) Facilities must provide a preservice orientation of at least 2 hours to all new assisted living facility employees who have not previously completed core training as detailed in subsection (1). (b) New staff must complete the preservice orientation prior to interacting with residents. (c) Once complete, the employee and the facility administrator must sign a statement that the employee completed the preservice orientation which must be kept in the employee's personnel record. (d) In addition to topics that may be chosen by the facility administrator, the preservice orientation must cover: 1. Resident's rights; and, 2. The facility's license type and services offered by the facility. (3) STAFF IN-SERVICE TRAINING. Facility administrators or managers shall provide or arrange for the following in-service training to facility staff: (a) Staff who provide direct care to residents, other than nurses, certified nursing assistants, or home health aides trained in accordance with rule 59A-8.0095, F.A.C., must receive a minimum of 1 hour in-service training in _____ control, including universal precautions and facility sanitation procedures, before providing personal care to residents. The facility must use its _____ control policies and procedures when offering this training. Documentation of compliance with the staff training requirements of 29 CFR 1910.1030, relating to _____ borne _____ may be used to meet this	A 081		

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A 081	Continued From page 7 requirement. (b) Staff who provide direct care to residents must receive a minimum of 1 hour in-service training within 30 days of employment that covers the following subjects: 1. Reporting adverse incidents. 2. Facility emergency procedures including chain-of-command and staff roles relating to emergency evacuation. (c) Staff who provide direct care to residents, who have not taken the core training program, shall receive a minimum of 1 hour in-service training within 30 days of employment that covers the following subjects: 1. Resident rights in an assisted living facility. 2. Recognizing and reporting resident neglect, and The facility must use its prevention policies and procedures when offering this training. (d) Staff who provide direct care to residents, other than nurses, CNAs, or home health aides trained in accordance with rule 59A-8.0095, F.A.C., must receive 3 hours of in-service training within 30 days of employment that covers the following subjects: 1. Resident behavior and needs. 2. Providing assistance with the activities of daily living. (e) Staff who prepare or serve food, who have not taken the assisted living facility core training must receive a minimum of 1-hour-in-service training within 30 days of employment in safe food handling practices. (f) All facility staff shall receive in-service training regarding the facility's resident elopement response policies and procedures within thirty (30) days of employment. 1. All facility staff shall be provided with a copy of the facility's resident elopement response policies	A 081		

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A 081	Continued From page 8 and procedures. 2. All facility staff shall demonstrate an understanding and competency in the implementation of the elopement response policies and procedures. This Statute or Rule is not met as evidenced by: Based on record review and interview, the facility failed to provide documented evidence of a 1-hour Nutrition and Safe Food Handling Practices training for 1 out of 3 sampled staff members, specifically Staff E. The findings included: Review of Caregiver Staff E's employee record indicated that she was hired on _____ to work the 3:00 PM to 11:00 PM shift and she presently worked in the facility as a resident Caregiver with direct resident care duties. Further review of this record indicated that Caregiver Staff E did not have evidence of having received a 1-hour Nutrition and Safe Food Handling Practices training class. In an interview conducted with the Administrator on _____ at 10:45 AM, she stated that the facility did not have documented evidence that Caregiver Staff E received this Nutrition and Safe Food Handling training. Class III	A 081		
A 086	59A-36.011(10) FAC Training - ADRD (10) _____ AND RELATED	A 086		

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A 086	Continued From page 9 ("ADRD") TRAINING REQUIREMENTS. Facilities which advertise that they provide special care for persons with ADRD, or who maintain secured areas as described in Chapter 4, Section 464.4.6 of the Florida Building Code, as adopted in rule 61G20-1.001, F.A.C., Florida Building Code Adopted, must ensure that facility staff receive the following training. (a) Facility staff who interact on a daily basis with residents with ADRD but do not provide direct care to such residents and staff who provide direct care to residents with ADRD, shall obtain 4 hours of initial training within 3 months of employment. Completion of the core training program between and shall satisfy this requirement. Facility staff who meet the requirements for ADRD training providers under paragraph (g) of this subsection, will be considered as having met this requirement. Initial training, entitled "..... and Related Level I Training," must address the following subject areas: 1. Understanding 's and related 2. Characteristics of 3. Communicating with residents with 's 4. Family issues; 5. Resident environment; and, 6. Ethical issues. (b) Staff who have successfully completed both the initial one hour and continuing three hours of ADRD training pursuant to sections 400.1755, 429.917 and 400.6045(1), F.S., shall be considered to have met the initial assisted living facility and Related Level I Training. (c) Facility staff who provide direct care to residents with ADRD must obtain an additional 4	A 086	

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A 086	Continued From page 10 hours of training, entitled " _____ and Related _____ Level II Training," within 9 months of employment. Facility staff who meet the requirements for ADRD training providers under paragraph (g) of this subsection, will be considered as having met this requirement. _____ and Related _____ Level II Training must address the following subject areas as they apply to these _____ : 1. Behavior management, 2. Assistance with ADLs, 3. Activities for residents, 4. Stress management for the care giver; and, 5. Medical information. (d) A detailed description of the subject areas that must be included in an ADRD curriculum which meets the requirements of paragraphs (a) and (b) of this subsection, can be found in the document "Training Guidelines for the Special Care of Persons with _____'s _____ and Related _____," dated _____, incorporated by reference, available from the Department of Elder Affairs, 4040 Esplanade Way, Tallahassee, Florida 32399-7000. (e) Direct care staff shall participate in 4 hours of continuing education annually as required under section 429.178, F.S. Continuing education received under this paragraph may be used to meet 3 of the 12 hours of continuing education required by section 429.52, F.S., and subsection (1) of this rule, or 3 of the 6 hours of continuing education for extended congregate care required by subsection (7) of this rule. (f) Facility staff who have only incidental contact with residents with ADRD must receive general written information provided by the facility on interacting with such residents, as required under section 429.178, F.S., within three (3) months of employment. "Incidental contact" means all staff	A 086		

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A 086	Continued From page 11 who neither provide direct care nor are in regular contact with such residents. (g) Persons who seek to provide ADRD training in accordance with this subsection must provide the department or its designee with documentation that they hold a Bachelor's degree from an accredited college or university or hold a license as a registered nurse, and: 1. Have 1 year teaching experience as an educator of caregivers for persons with _____, or related _____, or 2. Three years of practical experience in a program providing care to persons with _____, or related _____, or 3. Completed a specialized training program in the subject matter of this program and have a minimum of two years of practical experience in a program providing care to persons with _____, or related _____. (h) With reference to requirements in paragraph (g), a Master's degree from an accredited college or university in a subject related to the content of this training program can substitute for the teaching experience. Years of teaching experience related to the subject matter of this training program may substitute on a year-by-year basis for the required Bachelor's degree referenced in paragraph (g). This Statute or Rule is not met as evidenced by: Based on interview and record review, the facility failed to ensure 2 of 3 sampled staff received the required annual 4 hours of continuing education training for _____'s _____ and Related _____ (ADRD), specifically Staff C and Staff G. The findings included: Review of the employee record for Home Health	A 086		

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A 086	Continued From page 12 Aide (HHA) Staff C revealed a date of hire of _____ to work the 7:00 AM to 3:00 PM shift in the secured Memory Care Unit (MCU). Further review of the employee record revealed the last 4 hours of ADRD training available for review was completed on _____. Review of the employee record for Caregiver Staff G revealed a date of hire of _____ to work the 11:00 PM to 7:00 AM shift in the secured MCU. Further review of the employee record revealed the last 4 hours of ADRD training available for review was completed on _____. Review of the facility Staffing Schedule from _____ through _____ revealed HHA Staff C and Caregiver Staff G were listed on this Staffing Schedule and have regular contact with and provide direct care to the residents residing in the facility's secured MCU. Class III	A 086		
A 090	59A-36.011(11) FAC Training - _____ (11) _____ TRAINING. (a) Currently employed facility administrators, managers, direct care staff and staff involved in resident admissions must receive at least one hour of training in the facility's policies and procedures regarding _____. (b) Newly hired facility administrators, managers, direct care staff and staff involved in resident admissions must receive at least one hour of training in the facility's policy and procedures regarding _____ within 30 days after employment.	A 090		

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A 090	Continued From page 13 (c) Training shall consist of the information included in rule 59A-36.009, F.A.C. This Statute or Rule is not met as evidenced by: Based on record review and interview, the facility failed to provide documented evidence of a 1-hour training course in _____ Policies and Procedures training for 2 out of 3 sampled staff members, specifically Staff E and Staff G. The findings included: Review of Caregiver Staff E's employee record indicated that she was hired on _____ to work the 3:00 PM to 11:00 PM shift and she presently worked in the facility as a resident Caregiver with direct resident care duties. Further review of this record indicated that Caregiver Staff E did not have evidence of having received a 1-hour training course in the facility's _____ Policies and Procedures. Review of Caregiver Staff G's employee record indicated that she was hired on _____ to work the 11:00 PM to 7:00 AM shift and she presently worked in the facility as a resident Caregiver with direct resident care duties. Further review of this record indicated that Caregiver Staff G did not have evidence of having received a 1-hour training course in the facility's _____ Policies and Procedures. In an interview conducted with the Administrator on _____ at 10:45 AM, she stated that the facility did not have documented evidence that Caregiver Staff E and Caregiver Staff G received their _____ Policies and Procedures training. Class III	A 090		

Agency for Health Care Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11969397	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 03/03/2023
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NAME OF PROVIDER OR SUPPLIER

STREET ADDRESS, CITY, STATE, ZIP CODE

SYMPHONY AT DELRAY BEACH

**4840 WEST ATLANTIC AVENUE
DELRAY BEACH, FL 33445**

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