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
	AL11969924	A. BUILDING: _____ B. WING _____	08/15/2023

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
FAITH CARE LLC	2562 SW CALDER ST PORT SAINT LUCIE, FL 34953

(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 Relicensure, Complaint (#2023012352) and Generator Monitoring survey were conducted on at Faith Care LLC. The facility had deficiencies identified related to the Relicensure and Complaint at the time of the survey.	A 000		
A 033	59A-36.007(8) PHYSICAL (8) PHYSICAL . Residents for whom a physician has prescribed a physical must have a written care plan for the use of the physical . The care plan must be developed within 14 days of the device being prescribed, and prior to use on the resident. (a) The care plan must specify: 1. The device prescribed for use; 2. The maximum amount of time the resident is to have the applied each day; and, 3. In what manner and frequency staff will monitor, observe, and report to the physician any injuries, increase in agitation, signs and symptoms of , , or decline in mobility or function related to the use of the prescribed . (b) Facility staff must ensure that the device is applied appropriately and safely. (c) The resident's physician must review the appropriateness of the continued use of the physical annually, and documentation of this review must be maintained in the resident's record. If the resident's ability to independently remove or avoid the device fluctuates, the device must be considered a physical and all requirements of this subsection apply. This Statute or Rule is not met as evidenced by: Based on observation, record review and interviews, the facility failed to obtain a	A 033		

AHCA Form 3020-0001

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

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A 033	Continued From page 1 Physician's order and develop a Plan of Care for a device used as a physical for 1 of 4 sampled residents (Resident #2). The findings included: On at 9:45 AM, Resident #2's bedroom door was observed with the lever handle moving up and down but unable to move downward enough for the resident to open her door to exit her room. A plastic device was observed below the lever handle on the outside of the door that was blocking the handle from being pushed down enough for the door to open. At this time, Caregiver Staff B was observed disengaging the plastic device to allow the handle to be pushed down and the door to open. Resident #2 then exited the room and ambulated ad lib to the common area of the house. Review of Resident #2's record revealed no current Health Care Provider's order for the use of this device as a . The file did not contain a Plan of Care indicating in what manner the could be used, how frequently, and the maximum amount of time to be used. There was no documentation showing the application times and monitoring of the resident's use of the . During an interview conducted with the Administrator on at 12:00 PM, the use of the on Resident #2's door handle due to the resident's was discussed. The facility provided no additional information for review at the time of the survey. Class III	A 033		

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A 054	Continued From page 2	A 054		
A 054	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 [illegible] 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 [illegible], 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 medication. This Statute or Rule is not met as evidenced by: Based on record review and an interview, the facility failed to ensure the Medication Observation Record (MOR) was documented at the time of the medication passing for 2 out of 4	A 054		

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A 054	Continued From page 3 sampled residents (Residents #2 and Resident #4) who required assistance with the self-administration of medication. The findings included: During review of the [redacted] MOR's, the following omissions were identified: A) Resident #2 1. All doses of medication from [redacted] through [redacted] were not initialed as given, including the following: a. 8: 00 AM Fexofendadine, [redacted] b. 5:00 PM [redacted] c. 9:00 PM [redacted] B) Resident #4 1. All doses of medication from [redacted] through [redacted] were not initialed as given, including the following: a. 8:00 AM [redacted] b. 5:00 PM [redacted] The Administrator was notified of these findings during an interview on [redacted] at 12:00 PM. The facility provided no additional documentation for review at this time. Class III	A 054		
A 083	59A-36.011(5) FAC Training - First Aid and [redacted] (5) FIRST AID AND [redacted] ([redacted]). A staff member who has completed courses in First Aid and [redacted] and	A 083		

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A 083	Continued From page 4 holds a currently valid card documenting completion of such courses must be in the facility at all times. (a) Documentation that the staff member possess current certification that requires the student to demonstrate, in person, that he or she is able to perform and which is issued by an instructor or training provider that is approved to provide training by the American Red Cross, the American Association, the National Safety Council, or an organization whose training is accredited by the Commission on Accreditation for Pre-Hospital Continuing Education satisfies this requirement. (b) A nurse shall be considered as having met the training requirement for First Aid. An emergency medical technician or paramedic currently certified under chapter 401, Part III, F.S., shall be considered as having met the training requirements for both First Aid and C.P.R. This Statute or Rule is not met as evidenced by: Based on record review and an interview, the facility failed to ensure a staff member who has completed courses in both First Aid and , , ( ) and holds a currently valid card documenting completion of such courses, was in the facility at all times for 3 out of 3 sampled staff (Staff A, Staff B and Staff C). The findings included: a) Certified Nursing Assistant Staff A was observed in sole charge of 4 current residents on at 9:30 AM. Review of employee files at the facility on revealed no current training with a valid card in First Aid or for Staff A.	A 083		

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A 083	Continued From page 5 b) Caregiver Staff B was observed in sole charge of residents on at approximately 9:40 AM. Review of the personnel file for Staff B on revealed no current training in First Aid. c) Administrator Staff C was also in sole charge of residents at the facility at times. Review of the personnel file for Staff C on revealed no current training in First Aid. During an interview conducted with the Administrator Staff C on at 12:00 PM, she was notified that the documentation of training was not present and available for review for staff who were left in sole charge of residents. The facility provided no additional documentation of the required training for review at this time. Class III	A 083		
A 084	59A-36.011(6) FAC 429.52(6), FS Training - Assis Self-Admin Meds & Med Mgmt 59A-36.011 (6) ASSISTANCE WITH THE SELF-ADMINISTRATION OF MEDICATION AND MEDICATION MANAGEMENT. Unlicensed persons who will be providing assistance with the self-administration of medications as described in rule 59A-36.008, F.A.C., must meet the training requirements pursuant to section 429.52(6), F.S., prior to assuming this responsibility. Courses provided in fulfilment of this requirement must meet the following criteria: (a) Training must cover state law and rule requirements with respect to the supervision, assistance, administration, and management of medications in assisted living facilities; procedures and techniques for assisting the	A 084		

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A 084	Continued From page 6 resident with self-administration of medication including how to read a prescription label; providing the right medications to the right resident; common medications; the importance of taking medications as prescribed; recognition of side effects and adverse reactions and procedures to follow when residents appear to be experiencing side effects and adverse reactions; documentation and record keeping; and medication storage and disposal. Training shall include demonstrations of proper techniques, including techniques for control, and ensure unlicensed staff have adequately demonstrated that they have acquired the skills necessary to provide such assistance. (b) The training must be provided by a registered nurse or licensed pharmacist who shall issue a training certificate to a trainee who demonstrates, in person and both physically and verbally, the ability to: 1. Read and understand a prescription label; 2. Provide assistance with self-administration in accordance with section 429.256, F.S., and rule 59A-36.008, F.A.C., including: a. Assist with oral dosage forms, . . , . . dosage forms, and , , , and dosage forms; b. Measure liquid medications, break scored tablets, and crush tablets in accordance with prescription directions; c. Recognize the need to obtain clarification of an "as needed" prescription order; d. Recognize a medication order which requires judgment or discretion, and to advise the resident, resident's health care provider or facility employer of inability to assist in the administration of such orders; e. Complete a medication observation record; f. Retrieve and store medication;	A 084		

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A 084	Continued From page 7 g. Recognize the general signs of adverse reactions to medications and report such reactions; h. Assist residents with syringes that are prefilled with the proper dosage by a pharmacist and , that are prefilled by the manufacturer by taking the medication, in its previously dispensed, properly labeled container, from where it is stored, and bringing it to the resident for self-injection; i. Assist with ; j. Use a to perform testing; k. Assist residents with and continuous positive airway pressure (CPAP) devices, excluding the titration of the levels; l. Apply and remove stockings and hosiery; m. Placement and removal of bags, excluding the removal of the or manipulation of the site; and, n. Measurement of , , rate, temperature, and , rate. (c) Unlicensed persons, as defined in section 429.256(1)(b), F.S., who provide assistance with self-administered medications and have successfully completed the initial 6 hour training, must obtain, annually, a minimum of 2 hours of continuing education training on providing assistance with self-administered medications and safe medication practices in an assisted living facility. The 2 hours of continuing education training may be provided online. (d) Trained unlicensed staff who, prior to the effective date of this rule, assist with the self-administration of medication and have successfully completed 4 hours of assistance with self-administration of medication training	A 084		

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A 084	Continued From page 8 must complete an additional 2 hours of training that focuses on the topics listed in sub-subparagraphs (6)(b)2.h.-n. of this section, before assisting with the self-administration of medication procedures listed in sub-subparagraphs (6)(b)2.h.-n. 429.52 (6) Staff assisting with the self-administration of medications under s. 429.256 must complete a minimum of 6 additional hours of training provided by a registered nurse or a licensed pharmacist before providing assistance. Two hours of continuing education are required annually thereafter. The agency shall establish by rule the minimum requirements of this training This Statute or Rule is not met as evidenced by: Based on observation, record review and an interview, the facility failed to ensure that 1 out of 2 sampled unlicensed staff members (Staff C), who provided assistance with self-administered medications, had successfully completed a minimum of 2 hours of annual update training in assistance with self-administered medication. The findings included: Administrator Staff C was observed assisting Residents #2 and Resident #3 with the self-administration of medication on at 9:48 AM and 9:58 AM, respectively. The personnel file for Staff C was reviewed for documentation of a minimum of 6 hours of initial training and 2 hours annually thereafter on providing assistance with self-administered medications. The last documented training was a 6 hour course completed on	A 084		

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A 084	Continued From page 9 There was no documentation available to show 2 hours of medication assistance update training was completed annually for Staff C. During an interview conducted with Staff C on at 12:00 PM, she was notified of these findings. The facility provided no additional documentation for review at the time of the survey. Class III	A 084		