

Agency for Health Care Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11943030	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 08/30/2023
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NAME OF PROVIDER OR SUPPLIER

STREET ADDRESS, CITY, STATE, ZIP CODE

TREEMONT ON THE PARK

**3881 NE 3RD AVENUE
OAKLAND PARK, FL 33334**

(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 and Generator Monitoring survey was conducted at Orchard Park at Deerfield Corp dba Treemont on the Park on The facility had deficiencies related to the Relicensure identified at the time of the survey.	A 000		
A 083	59A-36.011(5) FAC Training - First Aid and . (5) FIRST AID AND . (). A staff member who has completed courses in First Aid and . and 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 interview, the facility failed to have 2 of 3 sampled employees (Staff A and Staff B) complete courses in First Aid and (). The facility also failed to have a staff member who	A 083		

AHCA Form 3020-0001

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

TITLE

(X6) DATE

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A 083	Continued From page 1 holds a valid certificate training card documenting completion of such courses be in the facility at all times. The findings included: Record review of Staff A on revealed that Staff A works as the Administrator of the facility. However, Staff A did not have a valid training certification card on file. On Staff A was at the facility facilitating the survey process. Review of the staffing record on the date of revealed that Staff B works at the facility as Certified Nursing Assistant (CNA) on Sunday from 6:00 AM to 2:30 PM; Monday from 6:00 AM to 2:30 PM; Wednesday, Thursday, and Friday same time. However, Staff B did not a valid training certificate card in her record. The last training completed expired in ... On at 1:12 PM, the Administrator was asked to provide evidence of having at least one staff with a valid certification training card on schedule during the morning shift. The Administrator said there no other staff with a valid certificate training card on the morning shift. The Administrator said the next staff with a valid certificate training card would arrive at 3:00 PM, for the second shift. The Administrator provided no additional information during the exit meeting on Class III	A 083		

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NAME OF PROVIDER OR SUPPLIER TREEMONT ON THE PARK			STREET ADDRESS, CITY, STATE, ZIP CODE 3881 NE 3RD AVENUE OAKLAND PARK, FL 33334		
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A 084	Continued From page 2	A 084			
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 fulfillment 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 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:	A 084			

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A 084	Continued From page 3 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; 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,	A 084		

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A 084	Continued From page 4 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 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 record review and interviews, the facility failed to ensure that 2 of 3 sampled	A 084		

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A 084	Continued From page 5 employees (Staff A and Staff B) completed the two hours of yearly assistance with the self administration of medication training updates as required. The findings included: Staff A was hired on _____ and works at the facility as the Administrator. Staff A reported on _____ at 2:30 PM, that he completed the initial 6-hours of medication training on _____, and 1-hour of medication training update on _____. Verification of the medication training certificate confirmed that Staff A did receive one-hour of medication training update on _____/023. Staff B was hired on _____ and works at the facility as a Certified Nursing Assistant/Medication Technician. Review of Staff B's personnel record revealed that Staff B only completed one-hour of medication training update, on _____. Further record review showed that Staff B completed the initial six hours of medication training on _____. On _____ at 12:00 PM, Staff B was observed assisting residents with the self-administration of medications. The Administrator informed at the exit meeting on _____ that they will make sure to complete the yearly required 2- hours of assistance with the self administration of medication training updates. Class III	A 084		