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
	AL11910705	A. BUILDING: _____ B. WING _____	08/15/2023

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
OASIS AT MARGATE ASSISTED LIVING LLC	1189 WEST RIVER DRIVE MARGATE, FL 33063

(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 Change of Ownership (CHOW), Complaint (#2023012438) and Generator Monitoring survey were conducted on at Oasis at Margate Assisted Living LLC. The facility had deficiencies identified related to the Change of Ownership (CHOW) and Complaint (#2023012438) at the time of the survey.	A 000		
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 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	A 054		

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A 054	Continued From page 1 429.41, 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 observation, interview, and record review the facility failed to ensure medication was given to residents as ordered; failed to ensure medication administered was documented properly; and failed to ensure that prescribed medications were available for administration for 5 out of 5 resident Medication Observation Record (MOR) audits conducted, affecting Resident #1, Resident #2, Resident #10, Resident #11 and Resident #13. The findings included: A review of the facility's Policies and Procedures for Medication Storage dated documented the following: Medication will at all times be administered according to regulation and professional standards. Medication is administered in accordance with the Physician's directions. Record the observed dosage taken on the Medication Administration Record at the time taken. 1) During a review of Resident #1's Medication Observation Record (MOR) on , it was revealed that the medications Metoclopram Tab 5 milligrams (mg), 10 mg, , 20 mg, , 500 mg, Garvedilol 6.25 mg, , 20 mg, , 75 mg, , 325 mg, 5 mg, and 25 mg was documented to be administered at 8:00 AM. A review of Resident #1's MOR on at	A 054		

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A 054	Continued From page 2 3:57 PM revealed that on . . . . . and . . . . . the medications had not been documented as administered as ordered for the 8:00 AM dosages. 2) During a review of Resident #2's MOR on . . . . . it was revealed that the medications , . 5 mg, , 0.25 mg, and 25 mg were to be administered at 8:00 AM. A review of the MOR on at 4:18 PM revealed that on . . . . and . . . . . the medications had not been administered as ordered for the AM dosages. 3) During a review of Resident #10's MOR on , it was revealed that the medications Caridopa/Levo 25-100 mg was to be administered at 8:00 PM, 1000 mg was to be administered at 5:00 PM, and , 0.25 mg was to be administered at 8:00 PM. The review by the surveyor at 12:00 PM on revealed that the PM medications were documented to have been administered at least 5 hours before the prescribed time. It was further observed by this surveyor during a medication audit of Resident #10's MOR on that the medication Lupizide 5 mg was not in the medication cart and could not be administered as directed by the Physician. 4) During a review of Resident # 11's MOR on . . . . . revealed that the medication administration time was not in accordance with the Physician's order. A review of the MOR documented that , 10 mg was to be administered at 1:00 PM. The surveyor observed the medication was documented as being administered at 11:36 AM.	A 054		

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A 054	Continued From page 3 It was further observed by this surveyor during a medication audit for Resident #11's MOR on . . . . . , that the medications . . . . . 20 mg and 20 mg were not in the medication cart and could not be administered as directed by the Physician. 5) During a review of Resident #13's MOR on . . . . . revealed that the medications 60 mg, and 40 mg were not in the medication cart and could not be administered as directed by the Physician. During an interview conducted with the Administrator on . . . . . at 4:46 PM, he was informed of the missing medications and review of the documentation on the MORs and was given an opportunity to review the MORs. No additional documentation was provided during the survey. Class III	A 054		
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	A 083		

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A 083	Continued From page 4 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 personnel record review and interview, the facility failed to ensure 3 of 4 sampled staff had evidence of completion of First Aid and [redacted] ( ) available for review in their files, specifically Staff D, Staff E and Staff F. The findings included: Review of the personnel record for Staff D Medication Technician (MT) revealed a hire date of [redacted] to work the 3:00 PM to 11:00 PM shift. Further review of the personnel record revealed no evidence of First Aid or [redacted] certification in the file. Review of the personnel record for Staff E MT revealed a hire date of [redacted] to work the 7:00 AM to 3:00 PM shift. Further review of the personnel record revealed no evidence of First Aid or certification in the file. Review of the personnel record for Staff F MT revealed a hire date of [redacted] to work the 11:00 PM to 7:00 AM shift. Further review of the personnel record revealed no evidence of First Aid or certification in the file. On at 4:17 PM, during an interview	A 083		

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A 083	Continued From page 5 conducted with the Administrator, he confirmed the findings. 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 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.	A 084		

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A 084	Continued From page 6 (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; 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)	A 084		

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A 084	Continued From page 7 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 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	A 084		

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A 084	Continued From page 8 rule the minimum requirements of this training This Statute or Rule is not met as evidenced by: Based on personnel record review and interview, the facility failed to ensure 1 of 4 sampled staff who assist with the self-administration of medications had the required medication training available for review, specifically Staff E. The findings included: Review of the personnel record for Staff E Medication Technician revealed a hire date of . . . . . to work the 7:00 AM to 3:00 PM shift. Staff E assists residents with the self-administration of medications. Further review of the personnel record revealed no evidence of assistance with the self-administration of medication and medication management training in her file. On . . . . . at 4:17 PM, during an interview conducted with the Administrator, he confirmed that Staff E's position is a Medication Technician and the job duties involve passing medications. The Administrator acknowledged the finding. Class III	A 084		
A 161	429.275(2) FS; 59A-36.015(2) FAC Records - Staff 429.275 (2) The administrator or owner of a facility shall maintain personnel records for each staff member which contain, at a minimum, documentation of background screening, if applicable, documentation of compliance with all	A 161		

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A 161	Continued From page 9 training requirements of this part or applicable rule, and a copy of all licenses or certification held by each staff who performs services for which licensure or certification is required under this part or rule. 59A-36.015 (2) STAFF RECORDS. (a) Personnel records for each staff member must contain, at a minimum, a copy of the employment application, with references furnished, and documentation verifying freedom from signs or symptoms of communicable . In addition, records must contain the following, as applicable: 1. Documentation of compliance with all staff training and continuing education required by Rule 59A-36.011, F.A.C., 2. Copies of all licenses or certifications for all staff providing services that require licensing or certification, 3. Documentation of compliance with level 2 background screening for all staff subject to screening requirements as specified in Section 429.174, F.S., and Rule 59A-36.010, F.A.C., 4. For facilities with a licensed capacity of 17 or more residents, a copy of the job description given to each staff member pursuant to Rule 59A-36.010, F.A.C., 5. Documentation verifying direct care staff and administrator participation in resident elopement drills pursuant to paragraph 59A-36.007(8)(c), F.A.C. (b) The facility is not required to maintain personnel records for staff provided by a licensed staffing agency or staff employed by an entity to provide direct or indirect services to residents and the facility. However, the facility must maintain a copy of the contract between the	A 161		

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A 161	Continued From page 10 facility and the staffing agency or contractor as described in Rule 59A-36.010, F.A.C. (c) The facility must maintain the written work schedules and staff time sheets for the most current 6 months as required by Rule 59A-36.010, F.A.C. This Statute or Rule is not met as evidenced by: Based on personnel record review and interview, the facility failed to ensure Employee Applications and Job Descriptions were available for review for 3 of 4 sampled personnel records reviewed, specifically Staff D, Staff E and Staff F. The findings included: Review of the personnel record for Staff D Medication Technician (MT) revealed a hire date of to work the 3:00 PM to 11:00 PM shift. Further review of the personnel record revealed no evidence of a completed Employee Application or Job Description in the file. Review of the personnel record for Staff E MT revealed a hire date of to work the 7:00 AM to 3:00 PM shift. Further review of the personnel record revealed no evidence of a completed Employee Application or Job Description in the file. Review of the personnel record for Staff F MT revealed a hire date of to work the 11:00 PM to 7:00 AM shift. Further review of the personnel record revealed no evidence of a completed Employee Application or Job Description in the file. On at 4:17 PM, during an interview conducted with the Administrator, he confirmed	A 161		

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A 161	Continued From page 11 the findings. Class III	A 161		