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
	AL11968028	A. BUILDING: _____ B. WING _____	12/06/2023

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
K'S HAVEN, INC	7813 SW 8TH COURT NORTH LAUDERDALE, FL 33068

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A 000	Initial Comments An unannounced Relicensure, Complaint (#2022002273) and Generator Monitoring survey was conducted on at K's Haven, Inc. The facility had deficiencies identified related to the Relicensure 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 429.41, F.S., maintain a record of the prescribing physician's annual evaluation of the use of the	A 054		

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A 054	Continued From page 1 medication. This Statute or Rule is not met as evidenced by: Based on interview and record review, the facility failed to ensure the Medication Observation Records (MORS) were signed immediately after medication administration was provided to residents for 2 of 4 sampled resident's MORs reviewed, (Resident #1 and Resident #3). The findings included: On at 2:00 PM, a medication audit was conducted on the MORS. The audit revealed several medications were not signed off by Home Health Aide (HHA) Staff A and medication was signed off in advance on the resident's MORs. 1) Through observation of the MOR dated through the following medications were not signed off as provided for Resident #1: The 8:00 AM dose of was not signed off as provided on , , and The 8:00 AM dose of was not signed off as provided on , and . Further the 8:00 PM dose was not signed off as provided on , , and . The 8:00 AM dose of Trelegy , was not signed off as provided on and . The 8:00 PM dose of was signed off in advance as provided on . 2) Through observation of the MOR dated through , the 8:00 PM dose of for was signed off in advance as provided for Resident	A 054		

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A	Continued From page 2 #3. Review of the personnel record for HHA Staff A revealed a date of hire of and revealed no evidence of the initial 6 hour training in assisting residents with the self-administration of medications. During an interview conducted on . . . . . at 3:45 PM with the Administrator, she acknowledged the findings. Class III	A 054		
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	A 084		

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A 084	Continued From page 3 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; 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	A 084		

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A 084	Continued From page 4 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 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.	A 084		

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A 084	Continued From page 5 429.52 (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 interview and record review, the facility failed to provide evidence of the unlicensed staff who assist residents with the self-administration of medication have completed the required initial 6 hours of assistance with the self-administration of medication training for 2 of 3 employee personnel records reviewed (Administrator and Staff A). The findings included: 1) Review of the employee personnel record for the Administrator revealed a date of hire of . Further review of the personnel record revealed no evidence of the required initial 6 hours of assisting with the self-administration of medication training available for review. 2) Review of the employee personnel record for Home Health Aide (HHA) Staff A revealed a date of hire of . Further review of the personnel record revealed no evidence of the required initial 6 hours of assisting with the self-administration of medication training available for review. In an interview conducted with HHA Staff A on at 10:35 AM, she confirmed that she assists residents with the	A 084		

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A 084	Continued From page 6 self-administration of medications. An interview was conducted on [redacted] at 3:45 PM with the Administrator who acknowledged the findings and provided no additional information for review. Class III	A 084		
CZ814	435.12(2)(b-d), FS Background Screening Clearinghouse 435.12 Care Provider Background Screening Clearinghouse.- (2)(b) Until such time as the [redacted] are enrolled in the national retained print notification program at the Federal Bureau of Investigation: 1. A person with a break in service of more than 90 days from a position that requires screening by a specified agency must submit to a national screening if the person returns to a position that requires screening by a specified agency. 2. Effective [redacted], or a later date as determined by the Agency for Health Care Administration, for the participation of qualified entities in the clearinghouse under s. 435.12, a person with a break in service of more than 90 days from a position for which screening is conducted by a qualified entity participating in the clearinghouse must submit to a national screening if the person returns to a position for which screening is conducted by a qualified entity. (c) An employer of persons subject to screening or a qualified entity participating in the clearinghouse must register with the clearinghouse and maintain the employment or affiliation status of all persons included in the	CZ814		

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CZ814	Continued From page 7 clearinghouse. 1. Before , , , initial status and any changes in status must be reported within 10 business days after a person receives his or her initial status or after a change in the person ' s status has been made. 2. Effective , , , initial status and any changes in status must be reported within 5 business days after a person receives his or her initial status or after a change in the person ' s status has been made. (d) An employer or a qualified entity participating in the clearinghouse must register with and initiate all criminal history checks through the clearinghouse before referring an employee or potential employee or a person with a current or potential affiliation with a qualified entity for electronic , submission to the Department of Law Enforcement. The registration must include the person ' s full first name, middle initial, and last name; social security number; date of birth; mailing address; ; and race. Individuals, persons, applicants, and controlling interests that cannot legally obtain a social security number must provide an individual taxpayer identification number. This Statute or Rule is not met as evidenced by: Based on record review and interview, the facility failed to maintain any changes in employment status of all employees within the Agency for Health Care Administration (AHCA) Background Screening Clearinghouse Roster within 10 business days for 1 of 4 sampled staff, Staff C. The findings included: On the 24-hour facility staffing	CZ814		

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CZ814	Continued From page 8 schedule was compared to the AHCA Background Screening Clearinghouse Roster. The Roster revealed that the facility had not entered a termination date of employment for Caregiver Staff C who was not listed on the staffing schedule but was included as an employee of the facility on the Roster however was no longer employed with the facility. During an interview conducted with the Administrator on [redacted] at 3:45 PM, she stated Caregiver Staff C has been terminated since 2021. She acknowledged the finding and provided no additional information why Caregiver Staff C's termination date was not entered into the Background Screening Clearinghouse Roster. Unclassified	CZ814		