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
	AL11968854	A. BUILDING: _____ B. WING _____	C 03/07/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
LEGACY AT HIGHWOODS PRESERVE	18600 HIGHWOODS PRESERVE PARKWAY TAMPA, FL 33647

(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 A complaint (complaint number 2024000079) in conjunction with a generator monitoring survey was conducted at Legacy of Highwoods Preserve on . . . . . Deficiencies were identified at the time of survey.	A 000		
A 054 SS=D	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 record review and interview, the Facility failed to update Medication Observation Records (MORs) immediately each time medications were offered to 4 Residents (Resident #1, Resident #2, Resident #3 and Resident #4) of 5 sampled residents. Findings Included: A review conducted on at 11:02am of Resident #1's MOR and sign out sheet revealed no medication was documented as given. Furthermore, Resident #1's Hydroco/APAPA 10-325mg had multiple packs with random pills missing. A review conducted on at 11:42am of Resident #2's MOR and sign out sheet revealed no medication was documented as given. Furthermore, Resident #2's 15mg and 100mg had multiple packs with random pills missing. A review conducted on at 11:42am of Resident #3's MOR and sign out sheet revealed no medication was documented as given. Furthermore, Resident #3's 10mg packs with random pills missing. A review conducted on at 11:42am of Resident #4's MOR and sign out sheet revealed no medication was documented as given. Furthermore, Resident #4's 81mg, 88mg and 50mg packs with random pills missing. During an interview on at 11:44am	A 054		

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A 054	Continued From page 2 with Staff B she stated she was not sure why there would be medication missing and not documented. During an interview conducted on [redacted] at 11:31am with the Health and Wellness Director she stated no pills should be missing from the cards without being signed off as given. She also confirmed the medications were missing from the [redacted] packs and they were not documented as given on any of the forms. (Photographic Evidence Obtained) Class III	A 054		

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