

Agency for Health Care Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11969529	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 12/02/2024
NAME OF PROVIDER OR SUPPLIER REN LIV MANOR ALF LLC		STREET ADDRESS, CITY, STATE, ZIP CODE 17930 62ND RD NORTH LOXAHATCHEE, FL 33470		
(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 Renliv Manor ALF LLC on . The facility had deficiencies related to the Relicensure survey at the time of the visit.	A 000		
A 056	59A-36.008(7) FAC Medication - Labeling and Orders (7) MEDICATION LABELING AND ORDERS. (a) The facility may not store prescription drugs for self-administration, assistance with self-administration, or administration unless they are properly labeled and dispensed in accordance with Chapters 465 and 499, F.S., and Rule 64B16-28.108, F.A.C. If a customized patient medication package is prepared for a resident, and separated into individual medicinal drug containers, then the following information must be recorded on each individual container: 1. The resident's name; and, 2. The identification of each medicinal drug in the container. (b) Except with respect to the use of pill organizers as described in subsection (2), no individual other than a pharmacist may transfer medications from one storage container to another. (c) If the directions for use are "as needed" or "as directed," the health care provider must be contacted and requested to provide revised instructions. For an "as needed" prescription, the circumstances under which it would be appropriate for the resident to request the medication and any limitations must be specified; for example, "as needed for , , not to exceed 4 tablets per day." The revised instructions, including the date they were obtained from the health care provider and the signature of the staff	A 056		

AHCA Form 3020-0001

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

TITLE

(X8) DATE

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A 056	Continued From page 1 who obtained them, must be noted in the medication record, or a revised label must be obtained from the pharmacist. (d) Any change in directions for use of a medication that the facility is administering or providing assistance with self-administration must be accompanied by a written, faxes, or electronic copy of a medication order issued and signed by the resident's health care provider. The new directions must promptly be recorded in the resident's medication observation record. The facility may then obtain a revised label from the pharmacist or place an "alert" label on the medication container that directs staff to examine the revised directions for use in the medication observation record. (e) A nurse may take a medication order by telephone. Such order must be promptly documented in the resident's medication observation record. The facility must obtain a written medication order from the health care provider within 10 working days. A faxed or electronic copy of a signed order is acceptable. (f) The facility must make every reasonable effort to ensure that prescriptions for residents who receive assistance with self-administration of medication or medication administration are filled or refilled in a timely manner. (g) Pursuant to Section 465.0276(5), F.S., and Rule 61N-1.006, F.A.C., sample or complimentary prescription drugs that are dispensed by a health care provider, must be kept in their original manufacturer's packaging, which must include the practitioner's name, the resident's name for whom they were dispensed, and the date they were dispensed. If the sample or complimentary prescription drugs are not dispensed in the manufacturer's labeled package, they must be kept in a container that bears a	A 056			

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A 056	Continued From page 2 label containing the following: 1. Practitioner's name, 2. Resident's name, 3. Date dispensed, 4. Name and strength of the drug, 5. Directions for use; and, 6. Expiration date. (h) Pursuant to Section 465.0276(2)(c), F.S., before dispensing any sample or complimentary prescription drug, the resident's health care provider must provide the resident with a written prescription, or a faxed or electronic copy of such order. This Statute or Rule is not met as evidenced by: Based on records review and interviews, the facility failed to ensure that 1 of 3 sampled residents (resident #1) received medications () as ordered by the Physician. The findings included: On at 10:28 AM, Employee A reported during an interview that she gave Resident #1, 15 units of in the morning before breakfast because Resident #1's (BS) was 247. She clarified that she assisted the resident by filling up the syringe with 15 units of her medication and handed it to the Resident to take. Review of the Medication Observation Record (MOR) showed that the resident was supposed to take 16 units of if the BS was between 201-250. The physician's order was therefore not followed. Review of Resident #1's medical records revealed that she was admitted to the facility on . Her admitting diagnoses included:	A 056		

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A 056	Continued From page 3 and , Resident #1 required assistance with self-administration of medications. Review of the physician's orders for the month of regarding the level documented for level between 201-250, Resident #1 is supposed to receive 16 units of . The cheat sheet written by the Administrator for the Aide who assisted Resident #1 revealed that for BS between 201-250, give 15 units of . During a follow-up interview with the Administrator on at 3:21 PM, the error/discrepancy was pointed out. The Administrator said she was not aware of that mistake. She said that was her error. The Administrator who is a Registered Nurse (RN) acknowledged that this issue started since the month of when she hired Employee A who required clear directives on how to assist Resident #1 take her Review of Resident #1's level recorded from to , revealed that Resident #1's level ranged between 201-250, 57 times during breakfast, lunch, and dinner. The Administrator said during the exit meeting on at 4:05 PM, she will immediately have the issue rectified. Class III	A 056		