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
	AL11968977	A. BUILDING: _____ B. WING _____	04/30/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
INSPIRED LIVING AT BONITA SPRINGS	27221 BAY LANDING DR BONITA SPRINGS, FL 34135

(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 investigation for #2025017573 was conducted at Inspired Living at Bonita Springs on . Deficiencies were identified at the time of the visit.	A 000		
A 052 SS=D	429.256( ); 59A-36.008(3) Medication - Assistance with Self-Admin 429.256 (3) Assistance with self-administration of medication includes: (a) Taking the medication, in its previously dispensed, properly labeled container, from where it is stored, and bringing it to the resident. For purposes of this paragraph, an syringe that is prefilled with the proper dosage by a pharmacist and an , that is prefilled by the manufacturer are considered medications in previously dispensed, properly labeled containers. (b) In the presence of the resident, confirming that the medication is intended for that resident, orally advising the resident of the medication name and dosage, opening the container, removing a prescribed amount of medication from the container, and closing the container. The resident may sign a written waiver to opt out of being orally advised of the medication name and dosage. The waiver must identify all of the medications intended for the resident, including names and dosages of such medications, and must immediately be updated each time the resident's medications or dosages change. (c) Placing an oral dosage in the resident's or placing the dosage in another container and helping the resident by lifting the container to his or her . (d) Applying , medications.	A 052		

AHCA Form 3020-0001

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE | (X6) DATE

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A 052	Continued From page 1 (e) Returning the medication container to proper storage. (f) Keeping a record of when a resident receives assistance with self-administration under this section. (g) Assisting with the use of a , including removing the cap of a , opening the unit dose of solution, and pouring the prescribed premeasured dose of medication into the dispensing cup of the . (4) Assistance with self-administration of medication does not include: (a) Mixing, , converting, or medication doses, except for measuring a prescribed amount of liquid medication or breaking a scored tablet or crushing a tablet as prescribed. (b) The preparation of syringes for injection or the administration of medications by any injectable route. (c) Administration of medications by way of a tube inserted in a of the body. (d) Administration of , preparations. (e) The use of irrigations or debriding agents used in the treatment of a skin condition. (f) Assisting with , , or preparations. (g) Assisting with medications ordered by the physician or health care professional with prescriptive authority to be given "as needed," unless the order is written with specific parameters that preclude independent judgment on the part of the unlicensed person, and the resident requesting the medication is aware of his or her need for the medication and understands the purpose for taking the medication. (h) Medications for which the time of administration, the amount, the strength of dosage, the method of administration, or the	A 052		

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A 052	Continued From page 2 reason for administration requires judgment or discretion on the part of the unlicensed person. (5) Assistance with the self-administration of medication by an unlicensed person as described in this section shall not be considered administration as defined in s. 465.003. 59A-36.008 (3) ASSISTANCE WITH SELF-ADMINISTRATION. (a) Any unlicensed person providing assistance with self-administration of medication must be , ˬ or older, trained to assist with self administered medication pursuant to the training requirements of Rule 59A-36.011, F.A.C., and must be available to assist residents with self-administered medications in accordance with procedures described in Section 429.256, F.S. and this rule. (b) In addition to the specifications of Section 429.256(3), F.S., assistance with self-administration of medication includes, orally advising the resident of the name and dosage of the medication and verbally prompting a resident to take medications as prescribed. (c) In order to facilitate assistance with self-administration, trained staff may prepare and make available such items as water, juice, cups, and spoons. Trained staff may also return unused doses to the medication container. Medication, which appears to have been contaminated, must not be returned to the container. (d) Trained staff must observe the resident take the medication. Any concerns about the resident's reaction to the medication or suspected noncompliance must be reported to the resident's health care provider and documented in the resident's record. (e) When a resident who receives assistance with	A 052		

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A 052	Continued From page 3 medication is away from the facility and from facility staff, the following options are available to enable the resident to take medication as prescribed: 1. The health care provider may prescribe a medication schedule that coincides with the resident's presence in the facility, 2. The medication container may be given to the resident, a friend, or family member upon leaving the facility, with this fact noted in the resident's medication record, 3. The medication may be transferred to a pill organizer pursuant to the requirements of subsection (2), and given to the resident, a friend, or family member upon leaving the facility, with this fact noted in the resident's medication record, or 4. Medications may be separately prescribed and dispensed in an easier to use form, such as unit dose packaging. (f) Assistance with self-administration of medication does not include the activities detailed in Section 429.256(4), F.S. (g) As used in Section 429.256(4)(h), F.S., the terms "judgment" and "discretion" mean interpreting vital signs and evaluating or assessing a resident's condition. (h) All trained staff must adhere to the facility's control policy and procedures when assisting with the self-administration of medication. This Statute or Rule is not met as evidenced by: Based on observation and interview, the facility failed to ensure staff who assist with self-administration of medication do so in according to the regulations for 1 (Residents #1) of 3 residents observed for medications. The facility failed to ensure staff follow physician	A 052		

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A 052	Continued From page 4 orders for 1(Resident #2) of residents reviewed for discontinued medications. The findings included: 1. On at 10:00 a.m., observed MT Staff A at preparing medications at the medication cart in the hallway. Staff A placed 2 medications in a cup for Resident #1. Staff A started to walk to the resident's room but turned to the cart to crushed the medications and added applesauce. Staff A then took the oral medication in applesauce along with a , cream into the resident's room. Staff A spoon fed the crushed medications into Resident #1's . Staff A did not orally advise Resident #1 of the names ad doses of the medication given. Record review for Resident #1 revealed an admission date of . Further review revealed a Resident Health Assessment Form (1823) signed and dated indicating Resident #1 needed assistance with self-administration of medications. On at 3:22 p.m. during an interview, Staff A said Resident #1 requires assistance with eating food and she was under the impression it would be okay to spoon feed Resident #1 the medications. Staff A said she was unaware it was against the regulations. 2. On at 12:03 p.m., during an interview, Resident #2's Power of Attorney (POA) said the provider for Resident #2 discontinued the medication on , and the facility continued to give it. The POA said she found out because she received a bill for the medication through , . She said this was upsetting	A 052		

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A 052	Continued From page 5 to her because the medication did not help Resident #2 and it was very expensive. On at 3:25 p.m., during an interview, the Advanced Registered Nurse Practitioner (ARNP) said she faxed an order to decrease for Resident #2 on and verbally told the previous Health and Wellness Director (HWD) she was doing that. She said she wrote a clinical note and told the POA she would discontinue the medication. She said the POA contacted her this month and said the facility was still giving Resident #2 the medication. She said she called the facility and told the present HWD the medication was supposed to be stopped in . She said she wrote a new order dated and faxed it to the facility to begin decreasing so it could be stopped on . She said the medication cannot be stopped abruptly. Review of the provider's order dated indicated: 28 mg -10 mg(milligram) capsule sprinkle, extended release- take 1 capsule every other night fat bedtime for 7 days, then take 1 capsule every 2 nights for 7 days, then 1 capsule every 3 nights for 7 days, then discontinue. Review of the provider's clinical note dated indicated Resident #2 was seen by the ARNP with the POA present, and the POA wanted to discuss stopping . The clinical note contained the new order to decrease and then stop the . Reviewed the facility Medication Administration Records for , , , and . The facility continued to give	A 052		

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A 052	Continued From page 6 to Resident #2. There was no documentation of the order for as the provider said was given to the facility. The facility continued to give the medication after the provider stopped the medication. On at 3:42 p.m., during an interview the HWD said she was not in charge of checking the MARS for accuracy in . The HWD said she does not know why they did not have a record of the medication order for discontinuation. The HWD said she was told by the provider earlier this month that the medication was to be decreased so it could be stopped. Class III	A 052		