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
	AL11964437	A. BUILDING _____ B. WING _____	R

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
STERLING HOUSE OF PUNTA GORDA	250 BAL HARBOR BLVD. PUNTA GORDA, FL 33950

(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 These are the results of an unannounced follow up to the Limited Nursing Services survey conducted on at Sterling House of Punta Gorda, an Assisted Living Facility. The following deficiency was recited: A0052. New deficiencies were cited at A0055 and A0056.	{A 000}		
{A 052}	58A-5.0185(3) FAC Medication - Assistance with Self-Admin (3) ASSISTANCE WITH SELF-ADMINISTRATION. (a) For facilities which provide assistance with self-administered medication, either: a nurse; or an unlicensed staff member, who is at least , trained to assist with self-administered medication in accordance with Rule 58A-5.0191, F.A.C., and able to demonstrate to the administrator the ability to accurately read and interpret a prescription label, must be available to assist residents with self-administered medications in accordance with procedures described in Section 429.256, F.S. (b) Assistance with self-administration of medication includes verbally prompting a resident to take medications as prescribed, retrieving and opening a properly labeled medication container, and providing assistance as specified in Section 429.256(3), F.S. In order to facilitate assistance with self-administration, staff may prepare and make available such items as water, juice, cups, and spoons. Staff may also return unused doses to the medication container. Medication, which appears to have been contaminated, shall not be returned to the container. (c) Staff shall observe the resident take the medication. Any concerns about the resident ' s	{A 052}		

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reaction to the medication shall be reported to the resident ' s health care provider and documented in the resident ' s record.
(d) When a resident who receives assistance with 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 which coincides with the resident ' s presence in the facility;
2. The medication container may be given to the resident or 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;
(e) Pursuant to Section 429.256(4)(h), F.S., the term " competent resident " means that the resident is cognizant of when a medication is required and understands the purpose for taking the medication.
(f) Pursuant to Section 429.256(4)(i), F.S., the terms " judgment " and " discretion " mean interpreting vital signs and evaluating or assessing a resident ' s condition.
(4) Assistance with self-administration does not include:
(a) Mixing, compounding, , or calculating doses, except for measuring a prescribed amount of liquid medication or breaking a scored tablet or crushing a tablet as prescribed.

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(b) The preparation of syringes for injection or the administration of medications by any injectable route.
(c) Administration of medications through intermittent positive pressure breathing machines or a
(d) Administration of medications by way of a tube inserted in a cavity of the body.
(e) Administration of preparations.
(f) Irrigations or debriding agents used in the treatment of a skin condition.
(g) , , or preparations.
(h) 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 at the request of a competent resident.
(i) Medications for which the time of administration, the amount, the strength of dosage, the method of administration, or the reason for administration requires judgment or discretion on the part of the unlicensed person.

This Statute or Rule is not met as evidenced by:
Based on observation, interview, and record review the facility prepoured medications, mixed them in pudding, and stored them in a refrigerator to be administered without a current prescribed order from a medical doctor to mix medications in pudding and administer them for 1 (Resident #1) of 2 residents surveyed.

The findings include:

At 9:35 a.m. on during the initial tour, two plastic medicine cups were observed in the refrigerator in the medication . . . . There were several pills noted in each cup. The pills were

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mixed in a yellow substance that appeared to be pudding. The cups were unmarked, bearing no identification as to what they were or who they belonged to. As soon as they were observed Staff A took the cups from the refrigerator and took them to the medication chart.

An interview was conducted with Staff Member A, LPN, and the Administrator at 9:36 a.m. on . Staff A stated he had just mixed the pills in pudding and placed them in the refrigerator. He stated the pills belonged to Residents #1 and Resident #2. He stated he mixed the pills with pudding because both residents had difficulty swallowing pills. The Administrator stated that Staff Member A had mixed the pills with pudding right before the morning meeting at 9:15 a.m.

Review of Resident #1's 1823, dated , showed the resident was to receive assistance with medication. There was no physician's order noted in the resident medical record after to show the medical doctor was aware the resident was having difficulty swallowing pills. There was no order to mix pills with pudding or applesauce and administer medications to Resident #1.

Review of the resident's MOR (medication Observation Record) had no notation to mix medications with pudding or applesauce.

An interview was held with Staff A at 10:30 a.m. on : who stated he had been administering medications to Resident #1 for about a month. He stated she was unable to remember what medications she was taking because of her . He was mixing the pills with pudding because the resident had a hard time swallowing pills. He stated the pills in the cup in the

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refrigerator was Resident #1's morning medications. He stated he usually marks the cups with a magic marker and puts the resident's . . . . on them. He then stated he knew it was "basically illegal" to do this.

The Administrator was asked to supply information that had been instructed to the nurses in her follow up plan of correction. A document was provided with a date of .

During an interview with the Administrator at 10:45 a.m. on . she confirmed she had completed an inservice with all the staff providing assistance with medications with the residents on . She stated all the information listed on the document had been given to her staff. The statement #11 on the document reads: "Our residents are admitted with orders that state needs assistance with self administration of medications. This means their meds are put into the med cup in front of them and each one is explained (what it is, what it is for) to the resident at that time."

Review of the facility policy for change in condition reads: "A change of condition will be evaluated and documented for the residents who exhibit significant deviation in physical or mental status such as:Change in medical condition, change in behavior, or change in . ability. Non-Emergent:
1. The Physician and legally responsible party will be notified of the resident's change in condition.
2. All necessary medical care and treatment measures will be initiated and provided at the direction of the physician.
3. The Resident's record will be updated as appropriate.

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{A 052}	Continued From page 5 During an interview with the Administrator at 12:50 p.m., on , she confirmed the resident was having medications administered to her. She stated the Medical doctor was verbally aware the resident was receiving her medications by being administered in pudding. She was asked if the medical doctor was aware, why was there not a current order after the last 1823 from the doctor to administer the medications mixed in pudding, and why was this order not listed on the MOR. She confirmed that if the doctor was aware this should have been done. Class III Correction Date:	{A 052}		
A 055	58A-5.0185(6) FAC Medication - Storage and Disposal (6) MEDICATION STORAGE AND DISPOSAL. (a) In order to accommodate the needs and preferences of residents and to encourage residents to remain as independent as possible, residents may keep their medications, both prescription and over-the-counter, in their possession both on or off the facility premises; or in their or apartments, which must be kept locked when residents are absent, unless the medication is in a secure place within the or apartments or in some other secure place which is out of sight of other residents. However, both prescription and over-the-counter medications for residents shall be centrally stored if: 1. The facility administers the medication; 2. The resident requests central storage. The facility shall maintain a list of all medications being stored pursuant to such a request; 3. The medication is determined and documented by the health care provider to be hazardous if	A 055		

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kept in the personal possession of the person for whom it is prescribed;
4. The resident fails to maintain the medication in a safe manner as described in this paragraph;
5. The facility determines that because of physical arrangements and the conditions or habits of residents, the personal possession of medication by a resident poses a safety hazard to other residents; or
6. The facility ' s rules and regulations require central storage of medication and that policy has been provided to the resident prior to admission as required under Rule 58A-5.0181, F.A.C.
(b) Centrally stored medications must be:
1. Kept in a locked cabinet, locked cart, or other locked storage receptacle, , or area at all times;
2. Located in an area free of dampness and abnormal temperature, except that a medication requiring refrigeration shall be refrigerated. Refrigerated medications shall be secured by being kept in a locked container within the refrigerator, by keeping the refrigerator locked, or by keeping the area in which refrigerator is located locked;
3. Accessible to staff responsible for filling pill-organizers, assisting with self-administration, or administering medication. Such staff must have ready access to keys to the medication storage areas at all times; and
4. Kept separately from the medications of other residents and properly closed or sealed.
(c) Medication which has been discontinued but which has not expired shall be returned to the resident or the resident ' s representative, as appropriate, or may be centrally stored by the facility for future resident use by the resident at the resident ' s request. If centrally stored by the facility, it shall be stored separately from medication in current use, and the area in which it

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A 055	Continued From page 7	A 055		

is stored shall be marked " discontinued medication. " Such medication may be reused if re-prescribed by the resident ' s health care provider.
(d) When a resident ' s stay in the facility has ended, the administrator shall return all medications to the resident, the resident ' s family, or the resident ' s guardian unless otherwise prohibited by law. If, after notification and waiting at least 15 days, the resident ' s medications are still at the facility, the medications shall be considered abandoned and may disposed of in accordance with paragraph (e).
(e) Medications which have been abandoned or which have expired must be disposed of within 30 days of being determined abandoned or expired and disposition shall be documented in the resident ' s record. The medication may be taken to a pharmacist for disposal or may be destroyed by the administrator or designee with one witness.
(f) Facilities that hold a Special-ALF permit issued by the Board of Pharmacy may return dispensed medicinal drugs to the dispensing pharmacy pursuant to Rule 64B16-28.870, F.A.C.

This Statute or Rule is not met as evidenced by:
Based on observation, interview and record review the facility mixed morning medications (normally stored at in pudding and stored them in the refrigerator for 2 (Residents #1 and #2) 2 residents reviewed.

The findings include:

At 9:35 a.m. on during the initial tour, two plastic medicine cups were observed in the refrigerator in the medication . . . . . There were several pills and capsules noted in each cup.

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A 055	Continued From page 8	A 055		

The pills were mixed in a yellow substance that appeared to be pudding. The cups were unmarked, bearing no identification as to what they contained or to whom they belonged. When Staff A noted the surveyor observing the unlabeled containers, the staff member took the cups from the refrigerator and took them to the medication chart.

An interview was conducted with Staff A, LPN, and the Administrator at 9:36 a.m. on . Staff A stated he had just mixed the pills in pudding and placed them in the refrigerator. He stated the pills belonged to Residents #1 and Resident #2. He said he mixed the pills with pudding because both residents had difficulty swallowing pills. The Administrator stated Staff Member A had mixed the pills with pudding right before the morning meeting at 9:15 a.m.

During an interview with Staff A at 10:30 a.m. on , he stated he had been administering medications to both Residents #1 and #2 for about a month. He stated they were unable to remember what medications they were taking because of , and he was mixing the pills with pudding because the residents had a hard time swallowing pills. He stated the pills in the cup in the refrigerator were morning medications for both Residents #1 and #2. He stated he usually marks the cups with a magic marker and puts the resident's on them. He then stated he knew it was "basically illegal" to do this. He acknowledged that he should not be putting these medications in the refrigerator.

Review of Resident #1's MOR (Medication Observation Record) show at 9:00 a.m. she receives , Nemenda, and Minodrine. All these

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A 055	Continued From page 9 medications should be stored at [illegible] Review of Resident #2's MOR shows at 9:00 a.m. shows she receives [illegible] D, [illegible] and [illegible] All these medications should be stored at [illegible] During an interview with the Administrator at 12:50 p.m. on [illegible] she acknowledged the medications should not have been placed in the refrigerator. Class III Correction Date: [illegible]	A 055		
A 056	58A-5.0185(7) FAC Medication - Labeling and Orders (7) MEDICATION LABELING AND ORDERS. (a) No prescription drug shall be kept or administered by the facility, including assistance with self-administration of medication, unless it is 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. Identification of each medicinal drug product in the container. (b) Except with respect to the use of pill organizers as described in subsection (2), no person other than a pharmacist may transfer medications from one storage container to another.	A 056		

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A 056	Continued From page 10	A 056		

(c) If the directions for use are " as needed " or " as directed, " the health care provider shall 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 shall be specified; for example, " as needed for pain, 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 who obtained them, shall be noted in the medication record, or a revised label shall be obtained from the pharmacist.
(d) Any change in directions for use of a medication for which the facility is providing assistance with self-administration or administering medication must be accompanied by a written medication order issued and signed by the resident ' s health care provider, or a faxed copy of such order. The new directions shall promptly be recorded in the resident ' s medication observation record. The facility may then place an " alert " label on the medication container which directs staff to examine the revised directions for use in the MOR, or obtain a revised label from the pharmacist.
(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 copy of a signed order is acceptable.
(f) The facility shall 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

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A 056	Continued From page 11	A 056		

Rule 64F-12.006, 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 shall also 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 shall be kept in a container that bears a 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 shall provide the resident with a written prescription, or a fax copy of such order.

This Statute or Rule is not met as evidenced by:
Based on observation, interview, and record review the facility failed to label the MOR (Medication Observation Record) with a physician's order to crush medications and give in applesauce for one resident of two residents surveyed.

The findings include:

At 9:35 a.m. on 9/24 the initial tour, two plastic medicine cups were observed in the refrigerator in the medication room. were several pills and capsules noted in each cup. The pills were mixed in a yellow substance that appeared to be pudding. The cups were unmarked, bearing no identification as to what

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A 056	Continued From page 12 they contained or to whom they belonged. When Staff A noted the surveyor observing the unlabeled containers, the staff member took the cups from the refrigerator and took them to the medication chart. An interview was conducted with Staff A, LPN, and the Administrator at 9:36 a.m. on . Staff A stated he had just mixed the pills in pudding and placed them in the refrigerator. He stated the pills belonged to Residents #1 and #2. He stated he mixed the pills with pudding because both residents had difficulty swallowing pills. The Administrator stated that Staff A had mixed the pills with pudding right before the morning meeting at 9:15 a.m. Review of Resident #2's "Physician Visit Form" dated reads, "Please make sure to crush pills and give in applesauce if possible." Review of the Resident #2's MOR shows no record the order was ever carried over to the MOR. This could become a choking hazard if a nurse administered the medication without the knowledge the medications should be crushed and mixed in applesauce. During an interview with Staff A at 10:30 a.m. on , he acknowledged the order should be listed on the MOR, and did not know why it was not. During an interview with the Administrator at 12:50 p.m. on , she acknowledged the order to crush medications and mix in apple sauce should have been listed on the MOR. Class III	A 056		

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AHCA
FLORIDA AGENCY FOR HEALTH CARE ADMINISTRATION

RICK SCOTT
GOVERNOR

Better Health Care for all Floridians

ELIZABETH DUDEK
SECRETARY

, 2012

Administrator
Sterling House of Punta Gorda
250 Bal Harbor Blvd.
Punta Gorda, Florida 33950

Dear Administrator:

This letter reports the findings of a revisit survey conducted on , 2012by representative(s) of this office. Enclosed is the provider's copy of the State Form 3020, which references the uncorrected deficiency and new deficiencies, identified during the revisit.

You will not receive a copy of this report in the mail; you will only receive this faxed report. **All deficiencies shall be corrected no later than , 2012.**

The Quality Assurance Questionnaire has long been employed to obtain your feedback following survey activity. This form has been placed on the Agency's website at http://ahca.myflorida.com/Publications/Forms.shtml as a first step in providing a web-based interactive consumer satisfaction survey system. You may access the questionnaire through the link under Health Facilities and Providers on this page. Your feedback is encouraged and valued, as our goal is to ensure the professional and consistent application of the survey process.

Thank you for the assistance provided to the surveyor. Should you have any questions please call this office at (239) 335-1315.

Sincerely,

Harold D. Williams
Field Office Manager

HW:ss
Enclosures: State Form

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