

Agency for Health Care Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL1966866	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED 02/07/2013
NAME OF PROVIDER OR SUPPLIER BRIDGE OF HOPE ALF			STREET ADDRESS, CITY, STATE, ZIP CODE 5265 LONGLEAF ST JACKSONVILLE, FL 32209		
(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 relicensure survey was conducted on 7, 2013. Bridge of Hope had deficiencies found at the time of the visit.	A 000			
A 030	58A-5.0182(6) FAC; 429.28 FS Resident Care - Rights & Facility Procedures (6) RESIDENT RIGHTS AND FACILITY PROCEDURES. (a) A copy of the Resident Bill of Rights as described in Section 429.28, F.S., or a summary provided by the Long-Term Care Ombudsman Council shall be posted in full view in a freely accessible resident area, and included in the admission package provided pursuant to Rule 58A-5.0181, F.A.C. (b) In accordance with Section 429.28, F.S., the facility shall have a written grievance procedure for receiving and responding to resident complaints, and for residents to recommend changes to facility policies and procedures. The facility must be able to demonstrate that such procedure is implemented upon receipt of a complaint. (c) The address and telephone number for lodging complaints against a facility or facility staff shall be posted in full view in a common area accessible to all residents. The addresses and telephone numbers are: the District Long-Term Care Ombudsman Council, 1(888)831-0404; the Advocacy Center for Persons with 1(800)342-0823; the Florida Local Advocacy Council, 1(800)342-0825; and the Agency Consumer Hotline 1(888)419-3456. (d) The statewide toll-free telephone number of the Florida Hotline " 1(800)96- _____ or 1(800)962-2873 " shall be posted in full view in a common area accessible to all residents.	A 030			

AHCA Form 3020-0001

TITLE

(X6) DATE

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

STATE FORM

9899

BQKJ11

If continuation sheet 1 of 20

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A 030	Continued From page 1 (e) The facility shall have a written statement of its house rules and procedures which shall be included in the admission package provided pursuant to Rule 58A-5.0181, F.A.C. The rules and procedures shall address the facility's policies with respect to such issues, for example, as resident responsibilities, the facility's and tobacco policy, medication storage, the delivery of services to residents by third party providers, resident elopement, and other administrative and housekeeping practices, schedules, and requirements. (f) Residents may not be required to perform any work in the facility without compensation, except that facility rules or the facility contract may include a requirement that residents be responsible for cleaning their own sleeping areas or apartments. If a resident is employed by the facility, the resident shall be compensated, at a minimum, at an hourly wage consistent with the federal minimum wage law. (g) The facility shall provide residents with convenient access to a telephone to facilitate the resident's right to unrestricted and private communication, pursuant to Section 429.28(1)(d), F.S. The facility shall not prohibit unidentified telephone calls to residents. For facilities with a licensed capacity of 17 or more residents in which residents do not have private telephones, there shall be, at a minimum, an accessible telephone on each floor of each building where residents reside. (h) Pursuant to Section 429.41, F.S., the use of physical _____ shall be limited to half-bed rails, and only upon the written order of the resident's physician, who shall review the order biannually, and the consent of the resident or the resident's representative. Any device, including half-bed rails, which the resident chooses to use and can remove or avoid without assistance shall	A 030			

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A 030	Continued From page 2 not be considered a physical 429.28 Resident bill of rights.- (1) No resident of a facility shall be deprived of any civil or legal rights, benefits, or privileges guaranteed by law, the Constitution of the State of Florida, or the Constitution of the United States as a resident of a facility. Every resident of a facility shall have the right to: (a) Live in a safe and decent living environment, free from _____ and neglect. (b) Be treated with consideration and respect and with due recognition of personal dignity, individuality, and the need for privacy. (c) Retain and use his or her own clothes and other personal property in his or her immediate living quarters, so as to maintain individuality and personal dignity, except when the facility can demonstrate that such would be unsafe, impractical, or an infringement upon the rights of other residents. (d) Unrestricted private communication, including receiving and sending unopened correspondence, access to a telephone, and visiting with any person of his or her choice, at any time between the hours of 9 a.m. and 9 p.m. at a minimum. Upon request, the facility shall make provisions to extend visiting hours for caregivers and out-of-town guests, and in other similar situations. (e) Freedom to participate in and benefit from community services and activities and to achieve the highest possible level of independence, autonomy, and interaction within the community. (f) Manage his or her financial affairs unless the resident or, if applicable, the resident's representative, designee, surrogate, guardian, or attorney in fact authorizes the administrator of the facility to provide safekeeping for funds as provided in s. 429.27.	A 030			

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A 030	Continued From page 3 (g) Share a _____, his or her spouse if both are residents of the facility. (h) Reasonable opportunity for regular exercise several times a week and to be outdoors at regular and frequent intervals except when prevented by inclement weather. (i) Exercise civil and religious liberties, including the right to independent personal decisions. No religious beliefs or practices, nor any attendance at religious services, shall be imposed upon any resident. (j) Access to adequate and appropriate health care consistent with established and recognized standards within the community. (k) At least 45 days' notice of relocation or termination of residency from the facility unless, for medical reasons, the resident is certified by a physician to require an emergency relocation to a facility providing a more skilled level of care or the resident engages in a pattern of conduct that is harmful or offensive to other residents. In the case of a resident who has been adjudicated mentally _____, the guardian shall be given at least 45 days' notice of a nonemergency relocation or residency termination. Reasons for relocation shall be set forth in writing. In order for a facility to terminate the residency of an individual without notice as provided herein, the facility shall show good cause in a court of competent jurisdiction. (l) Present grievances and recommend changes in policies, procedures, and services to the staff of the facility, governing officials, or any other person without _____, interference, coercion, discrimination, or reprisal. Each facility shall establish a grievance procedure to facilitate the residents' exercise of this right. This right includes access to ombudsman volunteers and advocates and the right to be a member of, to be active in, and to associate with advocacy or	A 030			

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A 030	Continued From page 4 special interest groups. This Statute or Rule is not met as evidenced by: Based on observation and employee interview, it was determined that the Assisted Living Facility (ALF) failed to ensure residents' access to adequate and appropriate health care consistent with established and recognized standards within the community related to control for 1 of 1 sampled residents reviewed (#2). The findings include: 1. On at approximately 12:30 P.M. observation of Employee #2 during assistance with self-administration of medication for Resident #2 revealed that Employee #2 did not wash or sanitize her hands at any time during the medication pass, nor did she read the label of the medication being administered to Resident #2. Employee #2 had pre-filled a pill organizer and transferred that medication into a medication cup. She handed the cup to Resident #2 without explaining what the medication was or the reason it was being administered. Resident #2 accepted the medication and took it, handing the medication cup back to Employee #2 who disposed of the cup in the kitchen garbage. 2. An interview with Employee #2 on at approximately 12:45 P.M. revealed that she had no response when control and hand washing/sanitizing practices were discussed. When asked, Employee #2 admitted that she understood the need to sanitize/wash her hands when assisting with self-administration of medication. She also acknowledged that she	A 030			

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A 030	Continued From page 5 should read the medication label to the resident when assisting with self-administration of medication. Class III	A 030			
A 051	58A-5.0185(2) FAC Medication - Pill Organizers (2) PILL ORGANIZERS. (a) A "pill organizer" means a container which is designed to hold solid doses of medication and is divided according to day and time increments. (b) A resident who self-administers medications may use a pill organizer. (c) A nurse may manage a pill organizer to be used only by residents who self-administer medications. The nurse is responsible for instructing the resident in the proper use of the pill organizer. The nurse shall manage the pill organizer in the following manner: 1. Obtain the labeled medication container from the storage area or the resident; 2. Transfer the medication from the original container into a pill organizer, labeled with the resident 's name, according to the day and time increments as prescribed; 3. Return the medication container to the storage area or resident; and 4. Document the date and time the pill organizer was filled in the resident 's record. (d) If there is a determination that the resident is not taking medications as prescribed after the medicinal benefits are explained, it shall be noted in the resident 's record and the facility shall consult with the resident concerning providing assistance with self-administration or the administration of medications if such services are offered by the facility. The facility shall contact the resident 's health care provider regarding questions, concerns, or observations relating to	A 051			

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A 051	Continued From page 6 the resident ' s medications. Such communication shall be documented in the resident ' s record. This Statute or Rule is not met as evidenced by: Based on observation of residents' medications, review of residents' health assessments, and employee interview, it was determined that the Assisted Living Facility failed to ensure that 2 of 5 sampled residents (#1 and #2) who were receiving medications via use of pill organizers were able to self-administer their medications. The findings include: 1. Observation of medication storage on at approximately 9:25 A.M. revealed that two of the five residents sampled (#1 and #2) had pill organizers that were filled with medication. The pill organizers were labeled with the residents' names in indelible ink. 2. An interview with Employee #2 on at approximately 9:25 A.M. revealed that she was filling the pill organizers for these two residents (#1 and #2) "for convenience". Employee #2 stated that during the week, she assisted the residents with self-administration of the medications in the pill organizers, and on the weekends, her staff used the pill organizers to assist the residents with self-administration of medications as she did not work on the weekends. When asked, Employee #2 said that neither Resident #1 nor Resident #2 was independent with self-administration of medication. Employee #2 also said that none of her staff were nurses, and that she was unaware that residents must be independent with self-administration in order to utilize pill organizers.	A 051			

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A 051	Continued From page 7 3. Review of Resident #1's and Resident #2's Health Assessments on _____ indicated that they both required assistance with self-administration of medication. Class III	A 051			
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 reaction to the medication shall be reported to the resident's health care provider and documented in the resident's record.	A 052			

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A 052	Continued From page 8 (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, _____, 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.	A 052		

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A 052	Continued From page 9 (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 of residents' medications, employee interview and review of the medication observation record (MOR) and resident health assessment, it was determined that the Assisted Living Facility (ALF) failed to ensure that syringes for injection were not pre-filled by licensed staff for use by unlicensed staff during assistance with self-administration of medication for 1 of 5 sampled residents. (#1) The findings include: 1. Observation of refrigerated medication storage on _____ at approximately 1:15 P.M. revealed that pre-filled _____ syringes for Resident #1 were kept in a lock box in the kitchen refrigerator. 2. An interview with Employee #2 on _____ at _____	A 052			

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A 052	Continued From page 10 approximately 1:30 P.M. revealed that she pre-filled the syringes "for convenience". When asked who administered the _____, Employee #2 said that Resident #1 administered it herself, but that she could not draw up the medication, and she didn't know what time she was to receive it. Employee #2 went on to say that she (a licensed practical nurse (LPN) pre-filled the syringes, and then took them to Resident #1 when it was time for the medication administration. At that time she handed the resident the syringe and the resident injected herself. When asked who administered the _____ on the weekends when Employee #2 was not in the facility, Employee #2 stated that she pre-fills the syringes and the staff that was working on the weekend took the prefilled syringe to Resident #1 who injected the medication herself. 3. Review of Resident #1's health assessment on _____ revealed that she required assistance with self-administration of medication. Review of Resident #1's MOR on _____ revealed that she received _____ twice daily, seven days a week. Class III	A 052			
A 054	58A-5.0185(5) FAC Medication - Records (6) MEDICATION RECORDS. (a) For residents who use a pill organizer managed under subsection (2), the facility shall 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.	A 054			

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A 054	Continued From page 11 (b) The facility shall maintain a daily medication observation record (MOR) for each resident who receives assistance with self-administration of medications or medication administration. A MOR must include the name of the resident and any known _____ the resident may have; the name of the resident's health care provider, the health care provider's telephone number, the name, strength, and directions for use of each medication; and a chart for recording each time the medication is taken, any missed dosages, refusals to take medication as prescribed, or medication errors. The MOR must be immediately updated each time the medication is offered or administered. (c) For medications which serve as chemical _____, the facility shall, pursuant to Section 429.41, F.S., maintain a record of the prescribing physician's annual evaluation of the use of the medication. This Statute or Rule is not met as evidenced by: Based on review of the medication observation record (MOR) and employee interview, it was determined that the Assisted Living Facility (ALF) failed to ensure that the MOR was immediately updated each time medications were offered or administered for 4 of 5 sampled residents (#1, #2, #3, and #5). The Assisted Living Facility (ALF) also failed to ensure that medication which the resident was administering with assistance from staff was listed on the resident's MOR for 1 of 5 sampled residents (#3). The findings include: 1. A review of the MOR for four of five residents sampled (#1, #2, #3 and #5) on _____ revealed that none of the morning medications scheduled for these residents on the date of the survey (_____) were signed off as having been	A 054			

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A 054	Continued From page 12 administered. Also, for Resident #3, two medications from the previous night were not signed off as having been administered, and an OTC (Blink Tears) which Resident #3 was receiving was not listed on her 2013 MOR. 2. An interview with Employee #2 on _____ at approximately 1:30 P.M. revealed that she was unaware that two of the _____ P.M. medications for Resident #3 were not signed off, and she stated that she would have staff come in that day to sign for the medications administered. She was also unaware that the Blink Tears over-the-counter medication was not listed on Resident #3's MOR, and said that she would correct that. When the current day's A.M. medications were addressed, Employee #2 said that she would sign them off as she had administered those medications. When asked, Employee #2 said that she understood that medications were to be documented on the MOR immediately upon administration. Class III	A 054		
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 64B16-28.106, 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.	A 056		

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(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 056	Continued From page 13 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. (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	A 056			

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A 056	Continued From page 14 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 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 of residents' medications, review of residents' medication observation records (MOR), and employee interview it was determined that the Assisted Living Facility failed to ensure that a resident's prescription medication was properly labeled for 1 of 5 sampled residents. (#2) The findings include:	A 056			

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A 056	Continued From page 15 1. Observation of medication storage on at approximately 9:25 A.M. revealed that Resident #2's _____ nasal spray bottle had no label. There was no box located for this medication. 2. An interview with Employee #2 on _____ at approximately 11:15 A.M. revealed that she was aware that the medication bottle had no label, but knew that it belonged to Resident #2. Employee #2 stated that the medication package/box with the resident-specific label on it had been inadvertently thrown away. Employee #2 acknowledged that all medication required a resident-specific label. 3. Review of Resident #2's medication observation record and resident health assessment revealed that this medication was currently ordered as noted on the MOR. Class III	A 056			
A 057	58A-5.0185(8) FAC Medication - Over The Counter (OTC) Products (8) OVER THE COUNTER (OTC) PRODUCTS. For purposes of this subsection, the term OTC includes, but is not limited to, OTC medications, _____, nutritional supplements and nutraceuticals, hereafter referred to as OTC products, which can be sold without a prescription. (a) A stock supply of OTC products for multiple resident use is not permitted in any facility. (b) OTC products, including those prescribed by a licensed health care provider, must be labeled with the resident's name and the manufacturer's label with directions for use, or the licensed	A 057			

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A 057	Continued From page 16 health care provider ' s directions for use. No other labeling requirements are necessary nor should be required. (c) Residents or their representatives may purchase OTC products from an establishment of their choice. (d) A facility cannot require a licensed health care provider ' s order for all OTC products when a resident self-administers his or her own medications, or when staff provides assistance with self-administration of medications pursuant to Section 429.256, F.S. A licensed health care provider ' s order is required when a licensed nurse provides assistance with self-administration or administration of medications, which includes OTC products. When such an order for an OTC product exists, only the requirements of paragraphs (b) and (c) of this subsection are required. This Statute or Rule is not met as evidenced by: Based on observation of residents ' medications, and employee interview it was determined that the Assisted Living Facility (ALF) failed to ensure that over the counter (OTC) medication was labeled with the resident's name for 1 of 5 sampled residents. (#3) The findings include: 1. Observation of medication storage on at approximately 9:25 A.M. revealed that Resident #3 was receiving OTC eye drops (Blink Tears) which were not labeled with her name or any information which would indicate that the eye drops belonged to her. Neither the eye drop bottle nor the box it came in was labeled with Resident #3's name. 2. An interview with Employee #2 on at approximately 9:25 A.M. revealed that she was aware that the medication should have been	A 057			

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A 057	Continued From page 17 labeled with Resident #3' s name and said that she would label the bottle. Class III	A 057			
A 084	58A-5.0191(5) FAC Training - Assis Self-Admin Meds & Med Mgmt (5) ASSISTANCE WITH SELF-ADMINISTERED MEDICATION AND MEDICATION MANAGEMENT. Unlicensed persons who will be providing assistance with self-administered medications as described in Rule 58A-5.0185, F.A.C., must meet the training requirements pursuant to Section 429.52(5), 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 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 and provide opportunities for hands-on learning through practice exercises. (b) The training must be provided by a registered nurse or licensed pharmacist who shall issue a training certificate to a trainee who demonstrates an ability to:	A 084			

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A 084	Continued From page 18 1. Read and understand a prescription label; 2. Provide assistance with self-administration in accordance with Section 429.256, F.S., and Rule 58A-5.0185, F.A.C., including: a. Assist with oral dosage forms, _____ dosage forms, and _____ and nasal 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; and g. Recognize the general signs of adverse reactions to medications and report such reactions. (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 4 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 shall only be provided by a licensed registered nurse, or a licensed pharmacist. This Statute or Rule is not met as evidenced by: Based on employee record review and an interview with the administrator, the facility failed to ensure that employees providing assistance	A 084			

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A 084	Continued From page 19 with the self administration of medication had completed two hours of continuing education on an annual basis for one of four employees reviewed (#1). The findings include: A review of the records for employee #1 revealed that the employee did not complete two hours of continuing education assistance with the self administration of medication on an annual basis. This was confirmed in an interview with the administrator on _____, 2013 at 1:30 pm. Class III	A 084			



RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

, 2013

Administrator
Bridge of Hope ALF
5265 Longleaf Street
Jacksonville, FL 32209

Dear Administrator:

This letter reports the findings of a state re-licensure survey that was conducted on , 2013 by representatives of this office.

Attached is the provider's copy of the State (3020) Form, which indicates the deficiencies that were identified on the day of the visit. Section 408.811(4), Florida Statutes, requires that you correct these deficiencies within thirty days of the date of this letter unless the Agency has approved another timeframe. **All medication tags must be corrected immediately.** Staff from this office will conduct a review after , 2013 to verify that the necessary corrections are in place to correct the deficiencies identified on your survey.

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 surveyors. Should you have any questions please call this office at -4201.

Sincerely,

Keisha Woods, MPH
Health Facility Evaluator Supervisor
Division of Health Quality Assurance

JPL/JV/KW/sm
Enclosure

