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
	AL11953352	A. BUILDING: _____ B. WING _____	

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
DIXIE OAK MANOR, LLC	6410 OLD DIXIE HWY VERO BEACH, FL 32967

(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 Assisted Living Facility off hours Operation Spot Check (OSC) monitoring visit was conducted on . . . . . Dixie Oak Manor, had licensure deficiencies found at the time of the visit. Representatives from the following agencies were also in attendance: Attorney General's Office; Treasure Coast Long Term Care Ombudsman Program; and the Indian River County Sheriff's Department.	A 000		
A 030 SS=D	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	A 030		

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A 030	Continued From page 1	A 030		

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.
(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

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A 030	Continued From page 2	A 030		

physical restraints 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 not be considered a physical restraint.

).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 abuse and
(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,

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A 030	Continued From page 3	A 030		

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.
(g) Share a [redacted] 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 [redacted], 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

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A 030	Continued From page 4	A 030		

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 special interest groups.

This Statute or Rule is not met as evidenced by:
Based on observation, interviews and record review, it was determined this facility did not ensure that each resident was free from physical , specifically the use of side rails without a physician's order for 3 of 3 sampled residents (Residents #1, #2, and #3) and 18 resident beds that were observed to be pushed against the wall so residents do not have access to one side of their bed to get in and out of bed as they choose.

The findings include:

Observational tour of the facility was conducted, on beginning at approximately 3:55 AM, and the following beds were observed to be pushed up against the wall:

: A bed and B bed
: A bed and B bed
: A bed and B bed
: A bed
: A bed and B bed; B (Resident #1) bed also had 1 half side rail in use on the opposite side of the bed from the wall
: A bed and B bed; B bed (Resident #2) also had 1 half side rail in use on the opposite side of the bed from the wall

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A 030	Continued From page 5 A bed and B bed the only bed in this against the wall the only bed in this against the wall; this bed also had l side rails in use (Resident #3) the only bed in this against the wall During interview with CNA #1, conducted on beginning at approximately 4:20 AM, she was asked why side rails were in use for Residents #1, #2, and #3. She replied that these " residents have or they roll out of bed at night ". During interview with the facility's Manager, conducted on beginning at approximately 4:45 AM, she was asked why side rails were in use for Residents #1, #2, and #3. She replied that the side rails came with the hospital beds. She was asked for a physician ' s order for the use of the side rails for Residents #1, #2, and #3. She stated that there are no orders for the use of the side rails for these residents because they use the hospital beds and the hospital beds came in with the side rails. She was asked why the other residents (noted above) had the side of their beds located directly next to (touching) the wall. She stated they had always been that way because it makes more the Resident #1' s medical record indicated that she was admitted to the facility on Her health assessment (1823 form), dated , reflected diagnosis of left hip pain; behavioral status is noted as forgetful; special precautions are noted as l risk and assistance is noted as required for transferring,	A 030		

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A 030	Continued From page 6 ambulating, and toileting. Resident #2's medical record indicated that he was admitted to the facility on . . . . . His health assessment (1823 form), dated . . . . . reflected diagnosis of . . . . . of . . . . . s type; . . . . . behavioral status is noted as patient is alert and oriented to self and situation; resident is noted to be independent with transfers and ambulation and requiring supervision for toileting. Resident #3' s medical record indicated that she was admitted to the facility on . . . . . Her health assessment (1823 form), dated . . . . . reflected diagnoses of . . . . . high . . . . . , and . . . . . ; . . . . . behavioral status us noted as intact; special precautions are noted as . . . risk; and assistance is noted as required for transferring, ambulating, and toileting. Record review of Resident #1, #2 and #3's file, revealed all lacked documentation of a physican order for usage of 1/2 side-rails. Class III	A 030		
A 052 SS=D	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	A 052		

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A 052	Continued From page 7	A 052		

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.
(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

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A 052	Continued From page 8	A 052		

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.
(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

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A 052	Continued From page 9 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, it was determined the facility did not ensure that each resident was observed to take their medications when they were provided by the Medication Tech and that all medication orders had specific parameters for usage, for 1 out of 4 sampled residents (Resident #4). The findings include: Resident #4's April _ _ . MOR (Medication Observation Record) reflected the use of oxycodo every 6 hours. This MOR did not indicate a diagnoses for this use of this medication. The Law Enforcement Investigator from the Office of the Attorney General stated that upon observation of this resident's room approximately 5:15 AM, which 2 individually packaged doses of Oxycodone/APAP 00 AM and 12:00 PM) were found in this resident's bedside table. Upon interview with the facility manager she was asked to explain how these doses of Oxycodone could located in this resident ' s bedside table if the staff were observing her take her medications (as per regulatory requirement). She stated, " I don ' t know " . Class III	A 052		
A 164 SS=D	58A-5.024(4) FAC Records - Inspection Availability (4) RECORD INSPECTION.	A 164		

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A 164	Continued From page 10 (a) All records required by this rule chapter shall be available for inspection at all times by staff of the agency, the department, the district long-term care ombudsman council, and the advocacy center for persons with . . . . . (b) The resident ' s records shall be available to the resident, and the resident ' s legal representative, designee, surrogate, guardian, or attorney in fact, case manager, or the resident ' s estate, and such additional parties as authorized in writing. (c) Pursuant to Section 429.35, F.S., agency reports which pertain to any agency survey, inspection, monitoring visit, or complaint investigation shall be available to the residents and the public. 1. Requestors shall be required to provide identification prior to review of records. 2. In facilities that are co located with a licensed nursing home, the inspection of record for all common areas shall be the nursing home inspection report. (d) The facility shall ensure the availability of records for inspection. This Statute or Rule is not met as evidenced by: Based on observation and interviews, it was determined this facility did not ensure that all resident records were available at all times by staff of the agency for a census of 25 residents, specifically, for 3 of out 4 resident records initially requested for review (Residents #1, #2, and #3). The findings include: Upon entrance to the facility, on . . . . . at approximately 3:45 AM, the lead investigator from the Office of the Attorney General ' s office explained the purpose of this visit to the 2 CNAs	A 164		

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A 164	Continued From page 11 (Certified Nursing Assistants) that were on duty at this time. This surveyor provided a business card to CNA #1 and introduced herself and explained the purpose of this off hours visit. CNA #1 was asked where the resident ' s medical records were located. She pointed to the binder that contained all of the resident' s MORs (Medication Observation Records). She was asked the location of each resident ' s individual medical record that would contain their health assessments; physician ' s orders; any notes from physician ' s or staff, etc. She replied that they do not have access to those records that only the facility's Manager can get those records. Upon arrival of the facility's Manager on at approximately 4:30 AM, she was asked to provide the medical records for Resident #1, #2, and #3. She was asked why the evening shift CNAs do not have access to resident ' s medical records. She replied that they are kept locked up and the evening shift staff does not have keys. During subsequent interview with the Administrator, conducted on at approximately 5:00 AM, he was asked why the staff on all shifts do not have access to the resident ' s medical records. He stated this facility had had a history of missing medical records when staff 's employment is terminated/discontinued. He was informed that resident ' s medical records are required to be available for inspection at all times. He stated that he was not aware of this requirement. Class III	A 164		

AHCA
FLORIDA AGENCY FOR HEALTH CARE ADMINISTRATION

RICK SCOTT
GOVERNOR

Better Health Care for all Floridians

ELIZABETH DUDEK
SECRETARY

, 2013

Administrator
Dixie Oak Manor, Llc
6410 Old Dixie Hwy
Vero Beach, FL 32967

Re: Operation Spot Check

Dear Administrator:

This letter reports the findings of a state licensure survey that was conducted on , 10, 2013 by a representative from 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. 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 representative. Should you have any questions please call this office at (561) 381 - 5840.

Sincerely,

Arlene Mayo - Davis
Field Office Manager

AMD/jw
Enclosure

XG90

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Phone (561) 381-5840; Fax (561) 496-5924