STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11964952	10/08/2013
NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE	
Arden Courts Manorcare Health	5509 Swift Road Sarasota, FL 34231	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAG AND REGULATORY IDENTIFYING INFORMATION)		

List of Tags Cited:
St - A - 0055 - 58a-5.0185(6) Fac - Medication - Storage And Disposal S-S= D
St - A - 0078 - 58a-5.019(2) Fac - Staffing Standards - Staff S-S= D
St - A - 0165 - 429.23 Fs; 58a-5.0241 Fac - Risk Mgmt & Qa; Adverse Incident Report S-S= D

Specific Tag Findings:
An unannounced Biennial and Limited Nursing Services (LNS) survey was conducted on through at Arden Court an Assisted Living Facility (ALF) in Sarasota, Florida.

The following is a description of non-compliance:

0055-Medication - Storage and Disposal 58A-5.0185(6) FAC
Based on observation and interview, the facility failed to discard expired medications and stored expired medications in medication carts were they were accessible to residents having a potential for residents to receive ineffective medications.

The findings include:

At 10:20 a.m. on , 10 mg suppositories were observed in the refrigerator in the medication an expiration date of .

In an interview with Staff A at 10:25 a.m. on , she confirmed the medication was expired.

At 10:40 a.m. on , the following medications were observed to be expired on the Country unit's medication cart:

ointment 2.5% expired
325 mg expired
2 mg expired
Nemenda 10 mg expired

In an interview with Staff A at 10:45 a.m. on , she confirmed the medications were being stored in the medication cart after they were expired.

At 10:50 a.m. on , the following medications were observed to be expired on the Cottage unit medication cart:

DR 250 mg expired
suspension concentrate expired

In an interview with Staff A at 10:55 a.m. on , she confirmed the medications were being stored on the medication cart after they had expired.

At 11:00 a.m. on , the following medications were observed to be expired in the Boathouse medication cart:

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Risamine ointment Discard after
concentrate suspension expired

In an interview with Staff A at 11:05 a.m. on she confirmed the medications were being stored on the medication cart after they had expired.

At 11:10 a.m. on the following medications were observed to be expired on the Garden Path unit medication cart:

5 mg discard after
200 mg discard after
40 mg discard after
1 mg discard after

In an interview with Staff A at 11:15 a.m., she confirmed the medications were being stored in the medication cart after they had expired.

Class III

0078-Staffing Standards - Staff 58A-5.019(2) FAC
Based on interview and record review, the facility failed to obtain a statement from a health care provider that 1 (Staff B) of 3 staff members surveyed does not have a communicable including

The findings include:

During a record review of Staff B's employee file no documentation was found in the record to show the Staff was free from communicable including The staff member's date of hire was

In an interview with the Office Manager at 1:30 p.m. on she confirmed the staff member had no documentation she was free from communicable She confirmed Staff B had worked part time for the facility for over one year. She stated Staff B had another job. She stated she had left a message with on Staff B's phone to call the facility back. She was waiting to see if Staff B might have a record that she had been screened by a healthcare provider.

The facility was not able to produce the record before the conclusion of the survey.

Class III

0165-Risk Mgmt & QA; Adverse Incident Report 429.23 FS; 58A-5.0241 FAC
Based on interview and record review, the facility failed to file an adverse incident report for two residents of 13 residents surveyed after one (Resident #4) resident eloped from the facility and police were involved in returning the resident to the facility, and one (Resident #13) resident sustained a bone after an being pushed by another resident.

The findings include:

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1. Resident #4 is an female who suffers from

During an interview with Staff A at 1:30 p.m. on she was asked if any residents had eloped from the facility. She stated Resident #4 had recently eloped after the alarm system was broken. She was unable to give a specific date. She stated the incident had occurred on a Saturday. She stated the resident had left the building and went to a hair salon. She stated the police were called by the local business after the resident could not pay for the services performed.

Review of the Sheriff's report shows the incident occurred on The deputy arrived at 11:05. The report shows the resident was and did not know where she lived. The deputy returned the resident to her husband at 12:09 p.m. A review of the Maintenance Director's note shows the resident was returned to the facility by her husband at 12:25 p.m.

In reviewing the Resident Caregiver's note, dated at 1:30 p.m., records show she searched for the resident at 11:20 a.m. and was unable to locate her. She documents the alarm was broken at the time of the search. She states she reported to all houses at lunch time to "Stop and secure the resident's location." She then documents she learned the resident's husband was bringing the resident back into the facility. She documents the resident's husband needed to speak with the person in charge.

An interview was conducted with the Executive Director at 2:00 p.m. on She stated she had not filed an incident report or an investigation with the Agency because she was not aware she needed to. She then verified the police were involved with returning the resident back to the facility. She verified that when the resident left the facility unattended she was in danger of physical injury. She stated, "I see what you mean. I should have filed an adverse incident."

2. Resident #13 is a female who suffers from and Agitation. She is 'Hard of Hearing' and is 'Legally

Review of an incident report dated shows "Resident pushed by another resident, lost balance and to the carpet on the right side. This resident was being verbally to another resident." The record shows the resident was sent to the emergency be assessed for a left shoulder injury.

The Emergency (ER) report shows the resident suffered an left humerous The ER doctor documents "She was trying to follow and intimidate this patient and was pushed down."

Review of the resident's record shows no investigation was completed to find out who saw the resident intimidating another resident. There is no documentation to show why the resident was allowed to follow and intimidate another resident until a conflict ensued.

An interview was conducted with the Executive Director at 2:00 p.m. on She confirmed the resident had incurred a shoulder after an altercation with another resident. She was asked if she had filed an adverse incident report and investigated the incident. She stated she had not filed an incident report because she was not aware she had to.

In interviewing the Executive Director she stated that she did not know a was a broken bone. She confirmed that no investigation was ever done on the cause of the incident. She stated Resident #13 had been

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given a 24 hour sitter after the incident occurred.

Class III

AHCA
FLORIDA AGENCY FOR HEALTH CARE ADMINISTRATION

RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

, 2013

Administrator
Arden Courts Manorcare Health
5509 Swift Road
Sarasota, FL 34231

Dear Administrator:

This letter reports the findings of a Biennial and Limited Nursing Service (LNS) survey that was conducted on , 2013 by representatives of this office.

Attached is the provider's copy of the State (5000-3547) 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 surveyors. Should you have any questions please call this office at (239) 335-1315.

Sincerely,

Harold D. Williams
Field Office Manager

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Enclosure: State Form

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