AHCA
FLORIDA AGENCY FOR HEALTH CARE ADMIN.

RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

, 2013

Administrator
Summers Assisted Living Facility
1225 S.W. Grandview Avenue
Lake City, FL 32025

Dear Administrator:

This letter reports the findings of a state licensure survey that was conducted on , 2013 by representative(s) of this office.

Enclosed 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 surveyor(s). Should you have any questions please call this office at (386) 462-6201.

Sincerely,

Stephen Burgin for,

Kriste J. Mennella
Field Office Manager

KJM/amw

Enclosure
XG90

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STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11964911	10/07/2013
NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE	
Summers Assisted Living Facility	1225 S.W. Grandview Avenue Lake City, FL 32025	
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 - 0093 - 58a-5.020(2) Fac - Food Service - Dietary Standards

Specific Tag Findings:

0000-Initial Comments

A biennial licensure survey with LMH and LNS was conducted on , 2013 at Summers Assisted Living facility. Deficiencies were found at the time of the visit. Summers ALF was found not to be in compliance.

0055-Medication - Storage and Disposal 58A-5.0185(6) FAC
Based on observation, interview and policy review the facility failed to follow their policy on abandoned and expired medication disposal in 1 of 9 sampled residents. Res. # 4

Findings:

During the drug storage / label observation on , at 10:15 AM revealed a bottle of 100 mg. in Resident # 4's locked box with an expiration date of , 2013. The Direct care staff (DCS) and Administrator both concurred that the drug is expired. The DCS removed the bottle from the box and gave it to the Administrator. Interview with the DCS on at 10:20 AM revealed and stated that the family provides the medication and will give them a call. Review of Summers Assisted Living Facility Policy and Procedure for Medication Disposal on page 1 of 2 provided by the Administrator revealed and documented: Medications that have been abandoned or expired must be disposed of within 30 days of being determined abandoned or expired and disposition shall be documented in the residents record. The medications may be returned to the pharmacy for disposal or may be destroyed by the Administrator or designee with one witness. Medication is destroyed by putting it in a container with bleach and cat litter and then disposed in the dumpster.

Class III

0093-Food Service - Dietary Standards 58A-5.020(2) FAC
Based on observations, review and interview, it was determined that the facility failed to note substitutions to the regular menu and failed to maintain a sufficient quantity of emergency drinking water supply for 3-days did not meet the needs of the 9 residents.

Findings:

During the initial tour of the kitchen on at approximately 9:10 AM, revealed that the current menu did not include written meal substitutions. Observation of the emergency food supply revealed that the facility had 15-gallons of water.

Review of the menus from , 2013 - , 2013, revealed that there had not been menu substitutions kept on file at the facility for 6 months.

Interview conducted with administrator on at 9:45 AM, she stated that the menu is not substituted and

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that she follows the menu according to the dietitian. She stated that if residents do not want what is on the menu that she or the staff would give them a sandwich as a substitute to the menu. She stated that she was aware that the water supply was low and would the owner plan to purchase more emergency water for the facility.

Class III