AHCA
FLORIDA AGENCY FOR HEALTH CARE ADMINISTRATION

RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

, 2013

Administrator
Emeritus at Barrington Place
2341 West Norvell Bryant Highway
Lecanto, FL 34461

Dear Administrator:

Re: CCR #2013011902

This letter reports the findings of a state licensure survey that was conducted on , 2013 by a representative 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 , 2014 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. Should you have any questions please call this office at (386) 462-6201.

Sincerely,

for

Kristie J. Mennella
Field Office Manager

KJM/amw

Enclosure

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STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11963839	12/03/2013
NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE	
Emeritus At Barrington Place	2341 W. Norvell Bryant Highway Lecanto, FL 34461	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAG AND REGULATORY IDENTIFYING INFORMATION)		

List of Tags Cited:

St - A - 0025 - 58a-5.0182(1) Fac - Resident Care - Supervision S-S= D
St - A - 0052 - 58a-5.0185(3) Fac - Medication - Assistance With Self-Admin 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:

0000-Initial Comments

On [redacted] an unannounced Complaint Inspection (CCR #2013011902) was conducted at Emeritus at Barrington Place, an assisted living facility. Deficiencies were identified at the time of the survey.

0025-Resident Care - Supervision 58A-5.0182(1) FAC
Based on observation, record review and interview the facility failed to follow their [redacted] policy and sufficiently ensure the safety of 1 of 11 residents (#4).

The findings include:

Review of the closed record for Resident #4 revealed the following
Nursing Notes :
[redacted] 7:30 AM-"found resident on floor in his [redacted] res stating he slipped and [redacted] on his bottom"
[redacted] 9:55 AM-[redacted] transports resident to hospital emergency [redacted]
[redacted] 3:00 PM- resident's wife states ER found compression [redacted] in spine. return to facility tomorrow.
[redacted] from Discharge Planner at hospital -resident is currently a 2 person assist
[redacted] 5:30 PM-resident returned, has back brace, unsteady on feet,
[redacted] 10:00 PM staff report they found resident on floor in his [redacted] resident transported to emergency [redacted]
[redacted] 11:00 AM call placed to resident's wife, she stated resident [redacted] on [redacted] no further information was provided.

Resident #4's Health Assessment dated [redacted] does not list [redacted] under special precautions but under Medical History it lists right sided [redacted] and general paresis. It lists him as Independent in all activities of daily living. His Care Plan dated [redacted] also his date of admission, listed the following interventions:
requires supervision for bathing, no hands on assist.
There were no further directives for the resident's needs for activities of daily living. There was no update or revision after his [redacted] on [redacted] There was no Ambulation Evaluation information provided. There is no documentation of directives given to direct care staff regarding his conditions or the need for 2 person assist as was stated by the hospital staff to the facility staff on [redacted] There was no further information provided.

Review of the facility [redacted] policy dated [redacted] revealed a [redacted] is defined as "any drop, collapse or tumble'. [redacted] assessments are completed as part of the residents admission packets but are not part of the information the Resident Aides would see. It states upon admission each resident must have a completed Ambulation and Mobility Evaluation.

During an interview with the Executive Director on [redacted] at approximately 5:00 PM, she confirmed Resident #4 had 2 [redacted] within a short period of time. She confirmed there was no safety plan update or directives noted for the

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staff. No further information was provided.

Class III

0052-Medication - Assistance with Self-Admin 58A-5.0185(3) FAC
Based on observation, record review and interview the facility failed to provide assistance with the self administration of medications which included the identification of the medications and contamination free medications for 2 of 5 residents (#7 and #10)

The findings include:

1. Observation of the medication pass for Resident #7 on beginning at 7:35 AM, Staff D popped the packs in to a medicine cup on the cart in the hall. She took the medication with a cup of water to the Resident #7 in her Staff D took the medication and drank the water. There was no discussion of the identification of the medications nor their use. Resident #7 stated, "What is this?" Staff D replied, " It is for you". During the passage the resident dropped her Docosate into the folds of her clothing. the Staff retrieved them with her ungloved fingers and handed it back to her.

2. Observation of the medication pass for for Resident #10 on beginning at 8:15 AM, Staff E popped the packs in to a medicine cup on the cart in the hall. She took the medication with a cup of water to the Resident #10 in her She took the medication and drank the water. The Staff E identified as one of the medication, Staff E did not identify any of the other medications nor their use. During the passage the resident dropped one of her pills into the folds of her clothing. The Staff E retrieved them with her ungloved fingers and handed it back to her.

A Review of the facility Medication Policy provided, did not address the identification of the medications to the residents.

During an interview with the Licensed Practical Nurse and the Executive Director on at 10:38 AM they stated both staff have been properly trained and would be trained again today to provide medications properly for Residents #7 and #10. They confirmed the medications were contaminated and should have been destroyed. They confirmed the medications are to be identified to the residents in the original containers.

Class III

0165-Risk Mgmt & QA; Adverse Incident Report 429.23 FS; 58A-5.0241 FAC
Based on record review an interview, the facility failed to file a one day Adverse Incident report for 1 of 11 sampled residents after an incident resulting in a and transfer of the resident to a facility with higher level of care (#4).

The findings include:

A review of the nursing notes for Resident #4 revealed on Resident #4 was found on the floor in his transferred to the hospital by Emergency Management Services Resident #4 was diagnosed

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with a compression spinal

A review Agency for Health Care Administration internal Adverse Incident Reports revealed the facility did not file a one day Adverse Incident report related to Resident #4 's and incident on

On at approximately 3:45 p.m. an interview was conducted with the Executive Director (ED). The ED stated Resident #4 had a series of while at the facility and added prior to Resident #4 's entry into the facility Resident #4 declined rapidly. The ED confirmed the facility did not file an Adverse Incident report after Resident #4 was transferred to the hospital and found to have a spinal compression

Class III