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
	AL11910367	A. BUILDING: _____ B. WING _____	

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
CRESTHAVEN EAST	5100 CRESTHAVEN BLVD. HAVERHILL, FL 33415

(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 CCR#2014001587 A complaint inspection was conducted from _____ to _____. The Cresthaven East assisted living facility did have deficiencies at the time of this visit.	A 000		
A 055 SS=D	58A-5.0185(6) FAC Medication - Storage and Disposal (6) MEDICATION STORAGE AND DISPOSAL. (a) In order to accommodate the needs and preferences of residents and to encourage residents to remain as independent as possible, residents may keep their medications, both prescription and over-the-counter, in their possession both on or off the facility premises; or in their _____ or apartments, which must be kept locked when residents are absent, unless the medication is in a secure place within the _____ or apartments or in some other secure place which is out of sight of other residents. However, both prescription and over-the-counter medications for residents shall be centrally stored if: 1. The facility administers the medication; 2. The resident requests central storage. The facility shall maintain a list of all medications being stored pursuant to such a request; 3. The medication is determined and documented by the health care provider to be hazardous if kept in the personal possession of the person for whom it is prescribed; 4. The resident fails to maintain the medication in a safe manner as described in this paragraph; 5. The facility determines that because of physical arrangements and the conditions or habits of residents, the personal possession of medication by a resident poses a safety hazard to	A 055		

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A 055	Continued From page 1 other residents; or 6. The facility ' s rules and regulations require central storage of medication and that policy has been provided to the resident prior to admission as required under Rule 58A-5.0181, F.A.C. (b) Centrally stored medications must be: 1. Kept in a locked cabinet, locked cart, or other locked storage receptacle, or area at all times; 2. Located in an area free of dampness and abnormal temperature, except that a medication requiring refrigeration shall be refrigerated. Refrigerated medications shall be secured by being kept in a locked container within the refrigerator, by keeping the refrigerator locked, or by keeping the area in which refrigerator is located locked; 3. Accessible to staff responsible for filling pill-organizers, assisting with self-administration, or administering medication. Such staff must have ready access to keys to the medication storage areas at all times; and 4. Kept separately from the medications of other residents and properly closed or sealed. (c) Medication which has been discontinued but which has not expired shall be returned to the resident or the resident ' s representative, as appropriate, or may be centrally stored by the facility for future resident use by the resident at the resident ' s request. If centrally stored by the facility, it shall be stored separately from medication in current use, and the area in which it is stored shall be marked " discontinued medication. " Such medication may be reused if re-prescribed by the resident ' s health care provider. (d) When a resident ' s stay in the facility has ended, the administrator shall return all medications to the resident, the resident ' s	A 055		

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A 055	Continued From page 2 family, or the resident ' s guardian unless otherwise prohibited by law. If, after notification and waiting at least 15 days, the resident ' s medications are still at the facility, the medications shall be considered abandoned and may disposed of in accordance with paragraph (e). (e) Medications which have been abandoned or which have expired must be disposed of within 30 days of being determined abandoned or expired and disposition shall be documented in the resident ' s record. The medication may be taken to a pharmacist for disposal or may be destroyed by the administrator or designee with one witness. (f) Facilities that hold a Special-ALF permit issued by the Board of Pharmacy may return dispensed medicinal drugs to the dispensing pharmacy pursuant to Rule 64B16-28.870, F.A.C. This Statute or Rule is not met as evidenced by: Based on observation, record review and interview, the facility failed to store resident medications in an area free of dampness. As evidence of the facility storing Resident #7's medication inside a medication closet with exposed plumbing repairs. The facility also failed to properly dispose of expired resident medications. As evidence of the facility failure to dispose of it had residents #8 and 9's expired medications (locate inside the medication closet). The findings are: In an observation of the 2nd floor nursing station's medication closet on _____ at 2:55pm, several residents' medications were stored next to an exposed 5-gallon bucket of soiled, brown colored water, which was approximately ¾ filled, with a cut-off pipe that came from the hand washing sink's drain on the opposite side of the	A 055		

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A 055	Continued From page 3 wall as photographed. The medication closet at this time presented to have a distinct musty odor with high humidity air, its ceiling tiles were discolored with black-brown stains, a resident medication cart was being stored under the ceiling air conditioning unit which was covered with a thin plastic sheet and a biohazard waste box was stored next to a shelf containing resident medications as photographed. During this observation on at 3:00pm, the plastic shelf approximately 2 feet in front of the bucket with soiled water, Resident #7's medication container with 2mg tablets was being stored. It was noted at this time that a wall-mounted shelf containing several residents ' medications was in between the bucket with soiled water and the discolored ceiling tiles. It was noted at this time that Resident #8's expired tablets were being stored on the plastic shelf, with indication on its container to discard after . It was noted at this time that Resident #9's expired 500mg tablets were being stored in the medication cart under the ceiling air conditioning unit, with indication on its container that it expired on . In an interview with the Assistant Director of Nursing on at 3:05pm, she stated that the medication closet has been in that condition for about 2 weeks since the drain pump for the hand washing sink broke and it has taken the maintenance supervisor that long to repair the pump. She stated at this time that the residents' medications stored inside the medication closet have been indirectly exposed to the moist environment caused by the repairs being performed in this closet.	A 055		

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A 055	Continued From page 4 Review of the facility medication management storage and disposal policies and procedures indicated that the residents' medications were to be stored in an area free of dampness and expired medications were to be disposed of within 30 days of being expired with proper documentation in the resident's record. In an interview with the Director of Nursing on at 3:25pm, she stated that she was aware of the repairs being done in the 2nd floor medication closet, but believed that the residents' medications were not being exposed to the dampness caused by the plumbing repairs being done in this closet. She stated at this time that she was not aware of the several expired resident medications being stored inside the medication closet, which were not properly disposed of. Class III	A 055		

AHCA
FLORIDA AGENCY FOR HEALTH CARE ADMINISTRATION

RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

, 2014

Administrator
Cresthaven East
5100 Cresthaven Blvd.
Haverhill, FL 33415

Re: CCR #2014001587

Dear Administrator:

This letter reports the findings of a State Licensure Complaint Survey that was conducted on . 2014 by a representative from 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 **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 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

Headquarters
2727 Mahan Drive
Tallahassee, FL 32308
http://ahca.myflorida.com

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5150 Linton Boulevard, Suite 500
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