STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11967775	04/16/2014
NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE	
Christie's Place Assisted Living Facility	471 Almansa Street Ne Palm Bay, FL 32907	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAG AND REGULATORY IDENTIFYING INFORMATION)		

Revisit Corrected Tags:
0093-Food Service - Dietary Standards-04/16/2014

Revisit Repeat Tags:
0030-Resident Care - Rights & Facility Procedures-58a-5.0182(6) Fac; 429.28 Fs
0164-Records - Inspection Availability-58a-5.024(4) Fac

Revisit New Tags:
0008-Admissions - Health Assessment-58a-5.0181(2) Fac
0051-Medication - Pill Organizers-58a-5.0185(2) Fac
0055-Medication - Storage And Disposal-58a-5.0185(6) Fac

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Specific Tag Findings:

0000-Initial Comments
A revisit to the re-licensure survey was conducted on . . . . . Christie's Place Assisted Living Facility had deficiencies that remained uncorrected and additional deficiencies were found at the time of the revisit.

0008-Admissions - Health Assessment 58A-5.0181(2) FAC
Based on record review and interview the facility failed to ensure that the medical examination was accurately recorded on AHCA Form 1823, Resident Health Assessment for Assisted Living Facilities; . . . . . 2010 for 2 of 4 sampled residents (#3 and #4).

Findings:

1. Record review for resident #3 revealed a Resident health Assessment form 1823 dated . . . . . that did not indicate the type of assistance she required with medication. The section was left blank.

2. Record review for resident #4 revealed an 1823 dated . . . . . that noted she required assistance with medication. The section that would have indicated the type of assistance required was left blank.

During a telephone interview with the administrator on . . . . . at approximately 11:15 AM

she was informed of the findings.

Class III

0030-Resident Care - Rights & Facility Procedures 58A-5.0182(6) FAC; 429.28 FS
A030 Remained uncorrected

Based on observations and interview the facility did not ensure the use of physical ... was limited to half-bed rails for 2 of 4 sampled residents (#2 and #3).

Findings:

During the tour of the facility on ... at approximately 9:40 the following observations were made:

1. Resident #2 had full bed rails on both sides of her bed. During an interview with resident #2 at the time she stated she was going to have to get half rails for her bed. Record review revealed that there was an order from the physician that noted "Patient is a ... risk. Must keep railing on bed." The order did not indicate what type of rail was required.

2. Resident #3 had a full rail on the right side of her bed. Record review for resident #3 revealed that there was not an order for Rails.

During a telephone interview with the administrator on ... at approximately 9:30 AM, she confirmed that the full bed rails remained on the residents beds.

Class III

0051-Medication - Pill Organizers 58A-5.0185(2) FAC
Based on observations and interview the facility failed to ensure that only nurses managed a weekly pill organizer for residents who self- administered their medications and allowed unlicensed staff to manage the weekly pill organizers for 4 of 5 sampled residents(#1, #2, #3 and #4) who received assistance with self- administration of medications.

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Findings:

Observations on [redacted] at approximately 11 AM revealed that resident's #1, #2, #3 and #4 medications were stored in pill organizer in the kitchen cabinet.

During an interview with the staff present on [redacted] at approximately 11 AM she stated the administrator (a nurse) would fill the pill organizers for the residents. She stated she would give the pill organizers to the resident and she made sure that they took them.

1. Record review for resident #1 revealed a resident health assessment form 1823 that was dated [redacted] that noted she needed her medications administered (nurse only).

2. Record review for resident #2 revealed an 1823 that was dated [redacted] and noted she required assistance with medication.

3. Record review for resident #3 revealed an 1823 dated [redacted] did not indicate the type of assistance she required with medication. The section was left blank.

4. Record review for resident #4 revealed an 1823 that was dated [redacted] and noted she required assistance with medication. The section that would have indicated the type of assistance required was left blank.

During a telephone interview with the administrator on [redacted] at approximately 10:30 AM, she stated she filled the pill organizer for the resident and they took their own medications.

Class III

0055-Medication - Storage and Disposal 58A-5.0185(6) FAC
Based on observation and interview the facility failed to ensure medications were kept in a locked storage area at all times.

Findings:

Observations on [redacted] at approximately 9:45 AM a prescription bottle of [redacted] Liquid 10 % was on top a storage bin in the office with no door located in the front of the facility. Further observations revealed that the medication belonged to resident #3.

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During an interview with the staff present on [redacted] at approximately 10:15 AM, she stated the medication did belong to resident #3 and the other medications were kept in the kitchen.

Observations on [redacted] at approximately 10:30 AM revealed that resident's #1, #2, #3 and #4 medications were centrally stored in pill organizers in the kitchen cabinet that was not locked. All of the residents had access to the kitchen area of the home.

During a telephone interview with the administrator on [redacted] at approximately 11:15 AM, she stated that she had placed the [redacted] in her office because the pharmacy was coming to get it. She was not aware the medications had to be locked.

Class III

0164-Records - Inspection Availability 58A-5.024(4) FAC
A 164 remained uncorrected

Based on observations and interviews the facility failed to have personnel records available for the agency's review.

Findings:

During a telephone interview with the administrator on [redacted] at approximately 9:30 AM, she stated the personnel records were locked in the cabinet and she had the key. She stated that she could not get the facility for 2 hours because she was working.

Observations on [redacted] at approximately 10:45 AM, the staff present pointed to the cabinet where the personnel records were filed and stated that it was locked and she did not have a key.

Class III

AHCA
FLORIDA AGENCY FOR HEALTH CARE ADMINISTRATION

RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

, 2014

Administrator
Christie's Place Assisted Living Facility
471 Almansa Street NE
Palm Bay, FL 32907

RE: Revisit to biennial relicensure

Dear Administrator:

This letter reports the findings of a revisit survey conducted on 16, 2014by representative(s) of this office. Enclosed is the provider's copy of the Statement of Deficiencies (State Form 5000-3547), which references the uncorrected deficiencies and new deficiencies identified during the revisit.

You will not receive a copy of this report in the mail; you will only receive this faxed report. **All deficiencies shall be corrected no later than 2014.**

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 (407) 420-2502.

Sincerely,

Theresa DeCanio, RN
Field Office Manager

LH/be
Enclosure

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