STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11932659	05/02/2014
NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE	
Woodmont By Encore Senior Livi	3207 North Monroe Street Tallahassee, FL 32303	

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

0000-Initial Comments

On unannounced survey for CCR 2014003769 and CCR 2014003027 was conducted in conjunction with a revisit to CCR 2014001673 and limited nursing services (LNS) monitoring at Pacifica Senior Living Woodmont. Deficiencies were cited.

0055-Medication - Storage and Disposal 58A-5.0185(6) FAC
Based on observation and staff interview the facility failed to maintain medications in a safe manner as evidence by medications for multiple residents were observed in the nurses was unlocked.

The findings are:

On at approximately 8:37 AM the door to the nurses observed to be open. It was found that medications were in the unlocked . There were medications for resident #14 30 tablets of 10 mg , 30 D 3 1000iu, 4 capsules of d2-50,000u , 30 tablets of 10mg, and 30 tablets of 10mg. For resident #16 there were 4 cards of 30 each 50mg and 30 tablets of Acetaminophen 500mg. For resident #15 30 tablets of 50mg and 30 tablets of 50mg. No staff were observed at the station. 2 aides were observed in the dining area and multiple residents with access in the area.

On at approximately 8:37 AM the LPN (licensed practical nurse) also witnessed the medications laying on the ...n the nursing the door open and unlocked. She confirmed the medications should have been locked in the carts and was unsure how long the medications had been in the nursing ..

A review of the pharmacy manifestation sheets revealed the medications had been delivered on / at approximately 4:30 PM and signed for by a staff member acknowledging delivery.

An interview with the administrator on at approximately 9:00 Am was conducted. She stated the medication should not have been left unattended.

On at approximately 12:50 PM resident #17 was observed in this area. He was observed ambulating behind the nursing station going in and out of the . The door to the nurses open. The resident was observed removing a cup of applesauce from the medication cart and putting it inside his jacket. No staff are in the area at this time.

Class III

RICK SCOTT
GOVERNOR

AHCA
FLORIDA AGENCY FOR HEALTH CARE ADMINISTRATION

ELIZABETH DUDEK
SECRETARY

, 2014

Administrator
Woodmont By Encore Senior Living
3207 North Monroe Street
Tallahassee, FL 32303

Dear Administrator:

Re: CCR #2014003027, 2014003769

This letter reports the findings of a state licensure survey that was conducted on , 2014 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 , 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 surveyors. Should you have any questions please call me at 850-412-4540.

Sincerely,

Patricia McIntyre

Donah Heiberg, M.S.W.
Field Office Manager

DH/pm
Enclosure
XG90

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