



RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

. 2014

Administrator
Camelot Chateau
1831 S.E. Lake Weir Avenue
Ocala, FL 34471

Dear Administrator:

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

Sincerely,

Kriste J. Mennella
Field Office Manager

KJM/amw

Enclosure



AGENCY FOR HEALTH CARE
ADMINISTRATION

PRINTED: 05/12/2014
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER: AL11953185	(X3) DATE SURVEY COMPLETED 04/17/2014
NAME OF PROVIDER OR SUPPLIER Camelot Chateau	STREET ADDRESS, CITY, STATE, ZIP CODE 1831 S.E. Lake Weir Avenue Ocala, FL 34471	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAG AND REGULATORY IDENTIFYING INFORMATION)		

List of Tags Cited:

St - A - 0052 - 58a-5.0185(3) Fac - Medication - Assistance With Self-Admin S-S= D

Specific Tag Findings:

0000-Initial Comments

On unannounced **biennial licensure** survey was conducted at Camelot Chateau Assisted Living Facility in **Ocala** Florida. Discernible deficiencies were identified as a result of this survey. The facility was not in compliance at this time.

0052-Medication - Assistance with Self-Admin 58A-5.0185(3) FAC

Based on observations and interviews, the facility failed to assist residents with self administration of medication by not providing the medication as prescribed for 1 of 17 residents (Resident #17).

Findings:

On at approximately 9:00 AM an observation of assistance with self administration of medication was started with the facility staff. It was observed that at 11:20 AM the medication technician retrieved Resident #17's med's) and (for from the med cart and took them to the resident in her she was observed to assist the resident with her medication. When resident #17's prescription was reconciled with the medication observation record it was observed the MOR stated that Resident #17 was supposed to receive both her & at 9:00 AM.

On at approximately 11:45 AM the facility med-tech was asked why she gave Resident #17 medication so late. She stated that she normally starts her medication assistance on the second floor and works her way down to the first floor. However she thought it would be faster to start at the first floor and work her way up to the second today.

On at approximately 12:10 PM an interview was conducted with Resident #17 regarding assistance with the self-administration of medication. The resident stated that she never gets her medication at the same time. She said she has had to call for staff to bring her medication to her because she thought they forgot to give it to her. She has on several occasions not receive her morning medication until lunch time. She said she will not go eat breakfast until she has her because of her

On at approximately 3:00 PM an interview was conducted with Resident #17's physician assistant (PA). The PA was asked if Resident #17's and needed to be given at the same time every day and she stated yes if it is to work like its suppose to. If it's not, it's not detrimental.

Class III