STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11953545	06/13/2014
NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE	
Sea View Inn At Forest Lakes	3548 Sea View Street Sarasota, FL 34239	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAG AND REGULATORY IDENTIFYING INFORMATION)		

Revisit Corrected Tags:
0081-Training - Staff In-Service-06/13/2014

Revisit Repeat Tags:
0025-Resident Care - Supervision-58a-5.0182(1) Fac

Revisit New Tags:
0093-Food Service - Dietary Standards-58a-5.020(2) Fac

Specific Tag Findings:
These are the results of a third follow-up visit conducted on 6/13/14 to Complaint Survey, CCR# 2013006854 which was originally completed on 12/23/13 at Sea View Inn at Forest Lakes, an Assisted Living Facility (ALF).

One of the deficiencies was cleared, A0081. However, A0025 was recited and a new deficiency (A0093) was cited.

The following is a description of non-compliance:

0025-Resident Care - Supervision 58A-5.0182(1) FAC
Based on observation, record review and interview, the facility failed to provide adequate supervision related to healthcare needs for 1 (Resident #1) of 3 sampled residents. The caregiver failed to ensure medications were properly identified to the resident prior to handing them to her. This failure contributed to the resident receiving the incorrect dose of a nasal spray medication. In addition, the resident misunderstood what type of medication she was receiving and the caregiver failed to correctly inform her of what she was taking. The facility failed to provide a therapeutic diet as prescribed by the physician.

The findings include:

1. During the record review on , Resident #1's Resident Health Assessment AHCA Form 1823 was documented as completed on . The resident was admitted on with diagnosis including: , eating and scoliosis. The resident requires assistance with medications.

Observation on at 7:32 a.m. during assistance with medications for Resident #1, the Assistant Administrator (AA) removed a plastic bin containing medication cards out of a cupboard in the laundry . The AA removed the medication cards from the bin and handed medications one by one to the resident without identifying what the medications were. He then handed Resident #1 nasal spray and she instilled one spray to each nostril. Resident #1 and the AA were questioned on the amount of sprays the resident was supposed to receive and the resident stated, "This is how I always take it." The AA was not aware the label directed 2 sprays to be instilled. After asking the AA to read the label, the AA asked the resident to instill a second spray into each nostril.

The AA then handed another pill to the resident. He did not inform the resident what he was giving her. The resident was asked what medicine she thought she was receiving and stated it was . Observation confirmed the medication given to her as "Levothyroxin." The AA failed to identify the correct medication he handed to her.

The AA stated he was not informing the resident of the names of the medications. With a furled he angrily

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stated, "It's the most stupidest rule I've ever heard of. The bigger facilities have nurses and CNA's fill pill cups up and have residents lining up waiting for them and they get away with it."

Review of the physician's orders dated document the following: 50 mcg/actuation nasal spray, suspension...2 sprays in each nostril once daily..."

The AA failed to ensure he was identifying the medications to Resident #1 while handing them to her. He indicated the "rule" was stupid. He did not correctly identify the Levothyroxin when handing it to Resident #1 and she thought she was taking He failed to read the label on the Fluticsone nasal spray and failed to ensure Resident #1 was aware she needed to instill the correct amount of medication into her nose. Because he failed to read the label prior to assisting the resident, he was not aware she was not receiving the correct amount of the medication.

2. During the record review on Resident #1's Health Assessment AHCA Form 1823 was documented as completed on The resident was admitted on with diagnosis including: eating and scoliosis. Under "Special Diet Instructions", documentation indicates a "calorie controlled, low fat/low diet." The assessment documents the resident needs a low calorie menu.

Review of the physician's orders dated includes, "2 gm diet-2000 cal diet."

Documentation provided by the AA revealed an informal menu plan was devised for Resident #1 by the AA and not be a registered dietitian.

In an interview with the AA on at 10:25 a.m., he stated he went to the doctor with Resident #1 and spent 3 hours there with her and the doctor. Prior to this he faxed all of her doctors related to her eating and received an order for a 2,000 cal. diet from Resident #1's doctor. The AA confirmed he did not consult with a dietitian because "all she does is make up the menus." He stated he (himself) developed the weight loss program for the resident as he had no other help. The resident's "primary" doctor told Resident #1 to try to catch her (her doctor). The AA never got a hold of the doctor. So, he himself broke down a list of food and calories for lunch and dinner for Resident #1 and he stated he picks the "doses" of what she should eat. He also compromised a dietary weight loss plan for the resident which includes the pool and walking.

The AA was asked whether he consulted Resident #1's legal guardian and he stated, "No, he's a dentist and is very busy and lives over on the other coast."

Review of the facility's menu failed to reveal evidence of the therapeutic diet.

Class III

0081-Training - Staff In-Service 58A-5.0191(2) FAC

0093-Food Service - Dietary Standards 58A-5.020(2) FAC
Based on observation, record review and interview, the facility failed to provide a therapeutic diet as prescribed by the physician and reviewed by the registered dietitian for 1 (Resident #1) of 4 residents.

The findings include:

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Review of the physician's orders dated revealed that they include, "2 gm diet-2000 cal diet."

Documentation provided by the AA (Assistant Administrator) revealed an informal menu plan was devised for Resident #1 by the AA and not be a registered dietitian.

In an interview with the AA on at 10:25 a.m., he stated he went to the doctor with Resident #1 and spent 3 hours there with her and the doctor. Prior to this he faxed all of her doctors related to her eating and received an order for a 2,000 cal. diet from Resident #1's doctor. The AA confirmed he did not consult with a dietitian because "all she does is make up the menus." He stated he (himself) developed the weight loss program for the resident as he had no other help. The resident's "primary" doctor told Resident #1 to try to catch her (her doctor). The AA never got a hold of the doctor. So, he himself broke down a list of food and calories for lunch and dinner for Resident #1 and he stated he picks the "doses" of what she should eat. He also compromised a dietary weight loss plan for the resident which includes the pool and walking.

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Class III

RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

, 2014

Administrator
Sea View Inn At Forest Lakes
3548 Sea View Street
Sarasota, FL 34239

Dear Administrator:

This letter reports the findings of a **third** Revisit Survey to complaint CCR# 2013006854. This revisit was conducted on , 13, 2014 by a representative of this office.

Attached is the provider's copy of the State (3020) Form, which indicates the deficiency that was corrected during the visit as well as the uncorrected deficiency and the new deficiency that was identified on the day of the visit.

You will not receive a copy of this report in the mail; you will only receive this faxed report. Your facility is required to be in compliance with all of the rules and regulations pertaining to Assisted Living Facilities in the State of Florida. The agency will conduct monitoring visits to your facility to ensure that you maintain compliance with these rules and regulations.

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 (239) 335-1315.

Sincerely,

Harold D. Williams
Field Office Manager

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Enclosure: State Form

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2295 Victoria Avenue,
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