STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11967230	07/11/2014
NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE	
Shp .. Harbour Island, Llc	1101 Plantation Island Drive Saint FL 32080	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAG AND REGULATORY IDENTIFYING INFORMATION)		

List of Tags Cited:
St - A - 0000 - - Initial Comments
St - A - 0009 - 58a-5.0181(3) Fac - Admissions - Admission Package S-S= D
St - A - 0025 - 58a-5.0182(1) Fac - Resident Care - Supervision S-S= D
St - A - 0030 - 58a-5.0182(6) Fac; 429.28 Fs - Resident Care - Rights & Facility Procedures S-S= D
St - A - 0056 - 58a-5.0185(7) Fac - Medication - Labeling And Orders S-S= D
St - A - 0165 - 429.23(1-4 & 6-10) Fs; 58a-5.0241 Fac - Risk Mgmt & Qa; Adverse Incident Report S-S= D

Specific Tag Findings:

0000-Initial Comments
A relicensure survey was conducted on SHP . Harbour Island had deficiencies found at the time of the visit.

0009-Admissions - Admission Package 58A-5.0181(3) FAC
Based on a review of resident contracts, and an interview with the administrator, the facility failed to ensure that contracts between the facility and the resident allow for at least 45 days written notice of relocation or termination for 42 of 42 residents in the facility.

The findings include:

In a review of the facility resident contract on page 6 of 13, #3 (c) has a provision allowing for termination without notice for nonpayment of charges. It allows the facility to require the resident to vacate the apartment if they fail to pay within five days following the date when due, of monthly fees or other charges allowed under the contract at the sole election of the landlord. This in effect negates the residents right to a written 45 day notice as written in Chapter 429.28 (1) (k).

In a telephone interview with the Dircetor on at 3:45 PM, she acknowledged that the facility is required to provide residents with at least a 45 day notice of termination of services in their admission package.

Class III

0025-Resident Care - Supervision 58A-5.0182(1) FAC
Based on record review and resident and staff interview the facility failed to provide supervision related to potential side effects of running out of a medication that caused increased pain which lead to hospitalization for 1 of 10 sampled residents (Resident #4).

The findings include:

On at 10:24 AM an interview with Resident #4 revealed he has of his lower extremities, he takes for Restless Leg (RLS). He said a few weeks ago the facility ran out of his which controls his leg pain and leg spasms. He said the medication technicians always say all of your pills are in there. He said my legs started hurting so bad and my legs were jumping around. He said he had a in his legs it was so bad. He said the pain was horrible. He said he found out the medication ran out for a few days and he was not aware of it. He said he was furious about that because the pain was becoming

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progressive. He said the facility confirmed his was out. He said they did nothing about it, until he had to go to the emergency (ER). He said the ER doctor asked why he wasn't taking his and he told the ER doctor that his had run out. He said the ER doctor gave him some and his legs stopped jumping and within a few hours and the pain went away. He said the ER doctor gave him a prescription for to last a month. Resident #4 said he was worried because he needed to have a continuous order so he will never run out again. Resident #4 stated he cannot go through that again. He said even after he returned from the hospital he still needed to get the prescription filled. He said it took a long time, he said he missed another dose and the medication didn't arrive until the following evening.

Record review of 2014 Medication Observation Record revealed capsule 150 mg by mouth twice daily was circled on , 2014 at 6:00 PM, , 2014 at 9:00AM and 6:00PM, , 2014 at 9:00AM and 6:00PM and 2014 at 9:00AM.

On at 11:22 AM an interview with Employee #B stated that when the MOR's are circled, that means the medication is on back order. She stated we begin ordering Resident #4 medications when he has 7 days of pills left, the pharmacy will let us know if we need the doctors authorization to fill a prescription. She said we were told there were 2 different doctors to order his . One MD wrote the original order, but when Resident #4 was switched to a new doctor, the new doctor did not sign for the authorization and the previous doctor would not fill the prescription for because he had not seen Resident #4 in a year. The resident up going to the ER that weekend for complaints of severe pain. Employee #B confirmed Resident #4 went to the hospital on . She confirmed Resident #4 missed 6 doses of .

On at 11:25 AM an interview with Employee #C stated she went to get Resident #4 prescriptions filled at Wal- Greens on Sunday, , 2014, the day after he returned from the ER and he did miss his morning dose of on 2014.

Class III

0030-Resident Care - Rights & Facility Procedures 58A-5.0182(6) FAC; 429.28 FS
Based on a review of resident contracts, and an interview with the administrator, the facility failed to ensure that contracts between the facility and the resident allow for at least 45 days written notice of relocation or termination for 42 of 42 residents in the facility.

The findings include:

In a review of the facility resident contract on page 6 of 13, #3 (c) has a provision allowing for termination without notice for nonpayment of charges. It allows the facility to require the resident to vacate the apartment if they fail to pay within five days following the date when due, of monthly fees or other charges allowed under the contract at the sole election of the landlord. This in effect negates the residents right to a written 45 day notice as written in Chapter 429.28 (1) (k).

In an interview with the administrator on she reported she was unaware that a 45 day notice was required for non-payment.

Class III

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0056-Medication - Labeling and Orders 58A-5.0185(7) FAC
Based on observation, staff interview and record review, the facility failed to ensure a medication label matched the prescription, as well as failed to ensure prescriptions are refilled timely for 2 of 10 sampled residents (Resident #4, #13).

The findings include:

1. On . . . . . at 8:15 AM an observation of Employee #D, Medication Technician, was assisting with self-administration of medication for Resident # 13. Employee #D opened the pill bottle labeled capsule 300 milligram (mg) take 1 by mouth at night time daily and poured a capsule into the pill cup.

Record review of Resident #13 revealed capsule 300 mg, take 1capsule by mouth twice daily at 9:00AM and 7:00PM dated .

. . /2014 at 12:20 AM an interview with Employee C licensed practical nurse, LPN revealed Resident #13 has a mail order for her medications. She said when they were called in by the doctor a few weeks ago. She said he didn't tell them that the order changed. The label states capsule 300 milligram (mg) take 1 by mouth at night time daily. Employee #C confirmed the order changed on .

2. On . . . . . at 10:24 AM an interview with Resident #4 revealed he has of his lower extremities, he takes for Restless Leg (RLS). He said a few weeks ago the facility ran out of his which controls his leg pain and leg spasms. He said the medication technicians always say all of your pills are in there. He said my legs started hurting so bad and my legs were jumping around. He said he had a in his legs it was so bad. He said the pain was horrible. He said he found out the medication ran out for a few days and he was not aware of it. He said he was furious about that because the pain was becoming progressive. He said they confirmed his was out. He said they did nothing about it until he had to go to the emergency . . . (ER). He said the ER doctor asked why he wasn't taking his and he told the ER doctor that his had run out. He said the ER doctor gave him some and his legs stopped jumping and within a few hours and the pain went away. He said the ER doctor gave him a prescription for to last a month. Resident #4 said he was worried because he needed to have a continuous order so he will never run out again. Resident #4 stated he cannot go through that again. He said even after he returned from the hospital he still needed to get the prescription filled. He said it took a long time, he said he missed another dose and the medication didn't arrive until the following evening.

Record review of . . . . 2014 Medication Observation Record revealed capsule 150 mg by mouth twice daily was circled on , 2014 at 6:00 PM, , 2014 at 9:00AM and 6:00PM, , 2014 at 9:00AM and 6:00PM and , 2014 at 9:00AM.

On . . . . . at 11:22 AM an interview with Employee #B stated that when the MOR's are circled, that means the medication is on back order. She stated we begin ordering Resident #4 medications when he has 7 days of pills left, the pharmacy will let us know if we need the doctors authorization to fill a prescription. She said we were told there were 2 different doctors to order his . One MD wrote the original order, but when Resident #4 was

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switched to a new doctor, the new doctor did not sign for the authorization and the previous doctor would not fill the prescription for because he had not seen Resident #4 in a year. The resident up going to the ER that weekend for complaints of severe pain. Employee #B confirmed Resident #4 went to the hospital on She confirmed Resident #4 missed 6 doses of

On at 11:25 AM an interview with Employee #C stated she went to get Resident #4 prescriptions filled at Wal- Greens on Sunday, , 2014, the day after he returned from the ER and he did miss his morning dose of on , 2014.

Class III

0165-Risk Mgmt & QA; Adverse Incident Report 429.23(1-4 & 6-10) FS; 58A-5.0241 FAC
Based on record review, staff and resident interview the facility failed to report to the Agency for Health Care Administration an adverse incident report for 1 of 10 sampled residents (Resident #4).

The findings include:

On at 10:24 AM an interview with Resident #4 revealed he has of his lower extremities, he takes for Restless Leg (RLS). He said a few weeks ago the facility ran out of his which controls his leg pain and leg spasms. He said the medication technicians always say all of your pills are in there. He said my legs started hurting so bad and my legs were jumping around. He said he had a in his legs it was so bad. He said the pain was horrible. He said he found out the medication ran out for a few days and he was not aware of it. He said he was furious about that because the pain was becoming progressive. He said they confirmed his was out. He said they did nothing about it until he had to go to the emergency (ER). He said the ER doctor asked why he wasn't taking his and he told the ER doctor that his had run out. He said the ER doctor gave him some and his legs stopped jumping and within a few hours and the pain went away. He said the ER doctor gave him a prescription for to last a month. Resident #4 said he was worried because he needed to have a continuous order so he will never run out again. Resident #4 stated he cannot go through that again. He said even after he returned from the hospital he still needed to get the prescription filled. He said it took a long time, he said he missed another dose and the medication didn't arrive until the following evening.

Record review of 2014 Medication Observation Record revealed capsule 150 mg by mouth twice daily was circled on , 2014 at 6:00 PM, 2014 at 9:00AM and 6:00PM, , 2014 at 9:00AM and 6:00PM and , 2014 at 9:00AM.

On at 11:22 AM an interview with Employee #B stated that when the MOR's are circled, that means the medication is on back order. She stated we begin ordering Resident #4 medications when he has 7 days of pills left, the pharmacy will let us know if we need the doctors authorization to fill a prescription. She said we were told there were 2 different doctors to order his One MD wrote the original order, but when Resident #4 was switched to a new doctor, the new doctor did not sign for the authorization and the previous doctor would not fill the prescription for because he had not seen Resident #4 in a year. The resident up going to the ER that weekend for complaints of severe pain. Employee #B confirmed Resident #4 went to the hospital on

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. She confirmed Resident #4 missed 6 doses of .

On at 11:25 AM an interview with Employee #C stated she went to get Resident #4 prescriptions filled at Wal- Greens on Sunday, 2014, the day after he returned from the ER and he did miss his morning dose of on 2014.

On at 1:45 PM an interview with the Community Director and stated, there have not been any adverse incidents filed in the past year. In an interview with both the Community Director and Health Coordinator (LPN), stated they did not consider the facilities inability to provide Resident #4 the medications that had been prescribed, but not refilled appropriately, to be an adverse incident.

Class III

RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

, 2014

Administrator
SHP Harbour Island, LLC
1101 Plantation Island Drive
Saint FL 32080

Dear Administrator:

This letter reports the findings of a state biennial licensure survey that was conducted on 11, 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 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 this office at

Sincerely,

for Jana Meyering, QIDP
Health Facility Evaluator Supervisor
Division of Health Quality Assurance

MB/JM/sm
Enclosure

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