Separator Page

Assisted Living Facility

FAMILY MANORS, LLC - File: 11911737

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Main Fldr: Statement of Deficiencies

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STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11911737	10/28/2014
NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE	
Family Manors, LLC	3385 S.E. Evergreen Street Stuart, FL 34997	
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
St - A - 0055 - 58a-5.0185(6) Fac - Medication - Storage And Disposal S-S= D
St - A - 0078 - 58a-5.019(2) Fac - Staffing Standards - Staff S-S= D

Specific Tag Findings:

0000-Initial Comments
An unannounced Abbreviated Relicensure survey was conducted on [redacted] at Family Manors. The facility had deficiencies found at the time of the visit.

0052-Medication - Assistance with Self-Admin 58A-5.0185(3) FAC
Based on observation and staff interview, Employee A failed to follow the proper protocol for assistance with self-administration of medication, as outlined in Florida Statute 429.256(3), for 1 of 1 residents whose assistance with self-administration of medication was observed (Resident #2).

The findings include:

On [redacted] at 11:25 AM, Employee A was observed providing assistance with self-administered medications for Resident #2. At this time, Employee A removed Resident #2's medications from the locked cabinet inside of a closet in the Administrator's office. He placed the Medication Observation Record (MOR), the Resident's medication card containing the resident's medications, disposable gloves, and small plastic cups in a plastic, hand-held medication caddy. Employee A took the caddy out into the dining [redacted] sat the caddy on one of the dining [redacted] next to a separate resident who was eating lunch. Employee A left the caddy unattended to go into the [redacted] wash his hands.
He came out of the [redacted] sanitized his hands with [redacted]-based hand sanitizer, and donned disposable gloves. At this time, he accidentally knocked the clipboard, containing the medication sheets (MOR), onto the floor. He picked up the clipboard and the papers, removed the gloves, and re-sanitized his hands. The Med Tech checked the MOR with the medication, popped the pills out of the medication card into the small plastic cup, and handed the cup to the resident. The resident poured the pills into her hand, and one of the pills [redacted] onto the floor. The Med Tech picked up the pill with a pair of gloves, hesitated a moment, as if unsure what to do, then handed the pill to the resident. Employee A observed the resident while Resident #2 took the medications and initialed the MOR in the appropriate spaces.

During interview with Employee A and the Facility Administrator on [redacted] at 11:45 AM, the following protocol from Florida Statute 429.256(3)(a)(b) for assistance with self-administered medications was reviewed:
(3) Assistance with self-administration of medication includes:
(a) Taking the medication, in its previously dispensed, properly labeled container, from where it is stored, and bringing it to the resident.

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(b) In the presence of the resident, reading the label, opening the container, removing a prescribed amount of medication from the container, and closing the container.
It was also discussed that protocol contained in Florida Administrative Code 58A-5.0185(3)(b) does not allow for any medication which appears to have been contaminated [coming in contact with the floor] to be returned to the medication container for future use. This would include returning contaminated medication to the resident for immediate consumption.

Employee A and the Facility Administrator acknowledged deficient practice relating to assistance with self-administered medication for Resident #2.

Class III

0055-Medication - Storage and Disposal 58A-5.0185(6) FAC
Based on observation and staff interview, Employee A failed to keep centrally stored medications secured in a locked area when not in possession of the medications for 1 of 1 residents whose assistance with self-administered medications was observed (Resident #2).

The findings include:

On at 11:25 AM, Employee A was observed providing assistance with self-administered medications for Resident #2. At this time, Employee A removed Resident #2's medications from a locked cabinet inside the Administrator's office. He placed the Medication Observation Record (MOR), the medication card containing the resident's medications, disposable gloves, and small plastic cups in a plastic, hand-held medication caddy. Employee A then took the caddy out into the dining sat the caddy on one of the dining occupied by a single resident eating her lunch. Employee A left the caddy containing medications unattended to go into the wash his hands. From the Employee A washed his hands, the medication caddy could not be viewed by the employee.

During interview with Employee A and the Facility Administrator on at 11:45 AM, they acknowledged that medications should be secured at all times when not in the possession of an employee authorized to have access to the medications.

Class III

0078-Staffing Standards - Staff 58A-5.019(2) FAC
Based on employee record review and staff interview, the facility failed to ensure newly hired staff, within 30 days of hire date, submitted a written statement from a health care provider documenting the individual does not have any signs or symptoms of communicable for 1 of 3 employees whose records were reviewed (Employee A).

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The findings include:

During employee record review for Employee A, it was noted that the employee's date of hire was on [redacted]. Further record review revealed a written statement from a health care provider documenting Employee A is free from any signs or symptoms of communicable [redacted] could not be found.

The Administrator stated, during an interview conducted on [redacted] at 10:45 AM, Employee A had undergone a physical, but she could not get the health care provider to answer repeated calls to request the documentation be faxed to the facility. She said she would have to have the employee undergo another exam if the document could not be obtained from the first health care provider.

Class III

RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

, 2014

Administrator
Family Manors, LLC
3385 S.E. Evergreen Street
Stuart, FL 34997

RE: Relicensure Survey

Dear Administrator:

This letter reports the findings of a state Relicensure survey that was conducted on , 2014 by a representative 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 representative. Should you have any questions please call this office at (561) 381-5840.

Sincerely,

Arlene Mayo-Davis
Field Office Manager

AMD
Enclosure

Delray Beach Field Office
5150 Linton Boulevard, Suite 500
Delray Beach, FL 33484
Phone:(561) 381-5840; Fax:(561) 496-5924
AHCA.MyFlorida.com

Facebook.com/ACHAFlorida
Youtube.com/AHCAFlorida
Twitter.com/AHCA_FL
SlideShare.net/AHCAFlorida