RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

, 2016

Administrator
Belvedere Commons Of Fort Walton Beach
2000 Principal Lane
Fort Walton Beach, FL 32547

RE: CCR #2016004662, 2016004807, 2016006298

Dear Administrator:

This letter reports the findings of a state licensure survey that was conducted on , 2016 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. **Please attach a summary of your corrective action for each deficiency, including completion dates, on your letterhead. Also include any additional documentation to support correction of identified deficiencies. Submit summary and documents to the Field Office no later than , 2016.** Staff from this office will conduct a review of the provided corrective action and supporting documentation to verify that the necessary corrections are in place to correct the deficiencies identified on your survey, which may include a desk review or onsite revisit.

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 me at 850-412-4540.

Sincerely,

Donald Helberg
Field Office Manager

DH/dh
Enclosure
XG90

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STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11965472	06/22/2016

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
BELVEDERE COMMONS OF FORT WALTON BEACH	**2000 PRINCIPAL LANE FORT WALTON BEACH, FL 32547**

SUMMARY STATEMENT OF DEFICIENCIES
(FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION)

0000 Initial Comments

Complaints (#2016004662, #201604807 and #2016006298) were investigated on - at Belvedere Commons Assisted Living Facility (license # 9819). Deficient practice was cited.

0025 Resident Care - Supervision

Based on family interview, staff interview and record review found the facility failed to provide the necessary care and services to treat the condition for 1 of 9 sampled resident. (#9)

The findings are:

Review of the residents record found he was admitted and expired on . He was on the Memory Care unit due to his diagnosis of .
Upon admission his weight was 164. On he weighed 141 a loss of 23 lbs.

Interview with his son on / at 12:21 PM indicated he received phone calls from , who provided care for him that they were concerned about his care at the facility nourishments as it was difficult to get him to eat.

Review of admission health assessment (HA) dated / indicated he had diagnosis of , muscle , with weight of 167 lbs. He needed supervision for eating and on regular diet.

The resident was weighed on / with weight of 153.

The resident saw the physician again on / . He indicated he would order 2 teaspoons (tsp) one time a day which is an appetite stimulant, encourage one can of ensure three times a day, monitor weight and will follow closely. No order was seen for this until . On medication observation record (MOR) for the month of / shows was not given / , / , / with a note saying "Waiting on Pharmacy". Again on the MOR med was not given / , 22,23,24, with a note saying "Waiting on Pharmacy". The record lacked documentation of ensure given.

The resident saw his physician on / and indicated since the resident was last seen he was started The physician recommended Speech evaluation and to drink 4 glasses of water daily. The record lacked documentation that water was given.

On the resident say his physician again with a diagnosis of and weight loss

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secondary to decreased by mouth intake. Plan is to continue with oral intake.

On physician orders diet change to mechanical soft with nectar thick liquids. The record lacks documentation of monitoring this other than speech notes showing provided and progressing with .

The resident was weighed on with weight of 141. He expired on .

Interview with the director of nursing on at 1:15 PM indicated the staff would give ensure when he didn't eat very well. Later she indicated the physician suggested giving ensure to the resident , it was not an order. She said this was not monitored on the facility MOR and they don't document that it is given. The said the days the was not given they were waiting on the Pharmacy and or family.

Class III

0052 Medication - Assistance with Self-Admin

Based on observation of assistance with self administration of resident medications and staff interview found unlicensed staff administering medications to 4 of 4 sampled residents. (#4, 6, 7, 8)

The findings are:

During observation of assistance with self administration of medications on I/ at 2:15 PM for resident #4, 4:00 PM for resident #6, 4:15 PM for resident #7 and at 4:25 PM for resident #8 found the following-Staff I who is trained as a medical technician administered their medications. She stood at med cart out of view of the resident poured up the residents medications into a cup and handed the cup to the resident without the original container present and without explaining medications to the residents. Review of residents #4, 6, 7 and #8 health assessments indicated by physician they needed assistance with medications.
Interview with the Director of Nursing on I/ at 5:00 PM indicated they are to assist not administer medications.

Class III

0054 Medication - Records

Based on family interview, staff interview and record review found the facility failed to adminster medications and treatment as ordered by the physician for 1 of 9 sampled residnets. (#9)

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Class III

0055 Medication - Storage and Disposal

Based on observation and staff interview the facility failed to store medications in a clean, safe area free of dampness, safe temperatures and free from potential cross contamination.

The findings are:

Observation with Director of Nursing (DON) on / at 2:15 PM of facility refrigerator where resident medications are stored found a small freezer that had about an inch thickness of ice. Medication cardboard containers were stuck to the ice and the packages were wet and cardboard soft. Freezer had been dripping over the stored medications. Temperature in refrigerator was 39 degrees.
Review of temperature logs for monitoring temperatures found monthly logs for , not completed and no monitoring of temperatures for the month of . A resident's specimen and a specimen were observed in the refrigerator with medications.

Interview with DON on at 11:30 AM indicated she needed to defrost the freezer and confirmed concerns with wet medication containers, monitoring refrigerator temps and storing residents specimens in refrigerator with resident medications.
Class III

0078 Staffing Standards - Staff

Based on staff interview and record review found the facility failed provide documentation that staff was free from communicable within 30 days of hire and failed to provide evidence of negative examination on an annual basis for 4 of 5 sampled staff. (A, C, D, E)

The findings are:

Review of staff record A found she was hired / . She had ( ) screening which was negative. The screening form did not have the date signed by physician.

Review of staff record C found she was hired . Her screening was negative. It lacked

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physician signature and date.

Review of staff record D found she was hired . Her screening was negative. The screen was over 30 days of hire, was not signed by physician or dated.

Review of staff E found she was hired / . Her last screen was completed / which was negative. There is no current annual screen completed.

Interview with Director of Nursing Eon at 11:20 am confirmed the findings.

Class III