STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11911336	R 03/13/2017
NAME OF PROVIDER OR SUPPLIER **KIMBERLY PLACE**	STREET ADDRESS, CITY, STATE, ZIP CODE **26315 NORTHERN CROSS ROAD** **PUNTA GORDA, FL 33983**	

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

0000 - Initial Comments

An unannounced revisit survey was conducted on at Kimberly Place, an assisted living facility (license number #7594) in Punta Gorda, Florida.

This was a follow-up to the relicensure survey completed on .

The following is description of the deficiency found uncorrected at the time of the visit.

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

Based on record review and interview the facility failed to ensure medication labels are recorded accurately on the Medication Observation Record (MOR) for 3 (Resident #1, #3, and #5) of 3 records reviewed. This has the potential for residents to experience adverse side effects from medication error .

The findings included:

1. A comparison of the stored medication and MOR for Resident #1 found a medication bubble packet for Laratadine-D to be taken once daily. This medication was filled on . The package indicated the medication was given on and . The resident's medication included a medication bubble package of 600. This mediation label stated to be given twice a day for 5 days. This medication was in two separate bubble packets, one for morning and the second marked evening. The packages showed the mediation was filled on . The Morning package showed the medication was given on and . The evening medication was shown to be given on . This medication was not listed on the MOR.

2. A comparison of the stored medication and MOR for Resident #3 found a package label , 75 MCG once a day. The MOR for Resident #3 found two entries for this medication. Each entry documented the medication given.

3. A comparison of the stored medication and MOR for Resident #5 found a packaged medication of , 0.5 mg to be taken 3 times a day. The MOR for this medication showed the medication is being taken twice a day.
There was a medication package for , ER 25 mg to be taken daily. This medication was not listed on the MOR

There was a bottle of , 0.5 mg to be taken twice a day as needed for agitation. This medication was listed on the MOR with the instruction to be taken daily as needed. There was no

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indication of need listed on the MOR.

4. On at 11:00 a.m., the administrator said Resident #5's medication is supplied by hospice and they do not provide a MOR. The MOR for Resident #5 was not accurate. The medication for Resident #1 was not delivered until and the MOR had not been updated. The medication for Resident #3 was listed twice on the MOR. Both entries are marked but the medication is only given once.

Class III