STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11964947	**06/12/2017**
NAME OF PROVIDER OR SUPPLIER **INN AT THE COURTYARDS (THE)**	STREET ADDRESS, CITY, STATE, ZIP CODE **255 COURTYARDS BLVD** **SUN CITY CENTER, FL 33573**	

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

0000 - Initial Comments

Assisted Living Facility

A complaint investigation, (CCR# 2017003483), was conducted at Inn at the Courtyards assisted living facility on . Inn at the Courtyards had a deficiency at the time of the investigation.

(License # 9439)

0025 - Resident Care - Supervision - 429.26(7) FS; 58A-5.0182(1) FAC

Based on record reviews, observations and interviews, the facility failed to provide services to meet the needs regarding having physician's ordered medication available for 1 (Resident #1) of 3 Residents sampled for medications.

Findings included:

Record review on of Resident #1's medical record revealed the facility had a physician's order for , , 200 mg to be given three times daily if needed for pain. It had not been refilled since when it was requested by the facility to have the medication filled by the family. The family brought in , 325 mg instead of the requested , , 200 mg.

Observation on of the medication observation record (MOR) revealed the MOR showed the resident had physician orders for three as needed (PRN) medications, , , 325 mg, , , 1000 mg and , , 200 mg. When the medications were reviewed on , there were only the , , 325 mg and the , , 1000 mg in the medication cart for Resident #1. The family never brought in the PRN medication, , , 200 mg when it was requested by the facility on . The facility did not follow their medication policy of reordering the medication through their backup pharmacy if the medication was not refilled in a reasonable time.

Interview on at 11:00 am with the Director of Nursing revealed it is the facility's policy to order medications for a resident whose family is controlling the supply of medication to the facility, if the requested medication is not received in a reasonable time. She stated she did not realize the family for Resident #1 had not brought in the medication, , , , 200 mg as requested on . She stated

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they did not order the medication as stated in their policy, therefore on , there was still no physician ordered , , , 200 mg in the medication cart for Resident #1.

Class III