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| STATEMENT OF DEFICIENCIES                                       | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:<br><br><b>AL11964130</b>               | (X3) DATE SURVEY COMPLETED<br><br><b>06/22/2017</b> |
| NAME OF PROVIDER OR SUPPLIER<br><br><b>BROOKDALE CLEARWATER</b> | STREET ADDRESS, CITY, STATE, ZIP CODE<br><b>2750 DREW STREET<br/>CLEARWATER, FL 33759</b> |                                                     |

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

**0000 - Initial Comments**

Assisted Living Facility

An unannounced complaint survey, (CCR# 2017003436, 2017003986 & 2017006488) was conducted on \_\_\_\_\_ at Brookdale Clearwater, an assisted living facility in Clearwater, Florida. There were deficiencies identified at the time of visit.

(License # 6670)

**0054 - Medication - Records - 58A-5.0185(5) FAC**

Based on record review and interview, the facility failed to maintain an accurate and up-to-date Medication Observation Records (MORs) that reflected each time medications were provided to residents, or each time medications were offered and refused by residents for four residents (#2, #13, #14, and #15) of four sampled residents.

Findings included:

1) Review of Residents' MORs, conducted on \_\_\_\_\_, revealed that prescribed medications were not documented as given for the following residents:

a. Resident #2's MORs revealed:

Medication capsules scheduled for one capsule by mouth three time every day was not documented as given on: \_\_\_\_\_ at 14:00 and 22:00, \_\_\_\_\_ at 14:00, \_\_\_\_\_ at 14:00, \_\_\_\_\_ at 22:00, \_\_\_\_\_ at 22:00, and \_\_\_\_\_ at 22:00.

Inhaler scheduled four times every day was not documented as given on: \_\_\_\_\_ at 14:00, \_\_\_\_\_ at 14:00, and \_\_\_\_\_ at 14:00.

b. Resident #13 MORs revealed:

Medication tablet scheduled for one tablet by mouth three times a day was not documented as given on: \_\_\_\_\_ at 22:00, \_\_\_\_\_ at 14:00, \_\_\_\_\_ at 14:00, \_\_\_\_\_ at 22:00, and \_\_\_\_\_ at 22:00.

**AGENCY FOR HEALTH CARE  
ADMINISTRATION**

PRINTED: 07/06/2017  
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| SUMMARY STATEMENT OF DEFICIENCIES<br>(FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                           |                                                     |
| <p>Medication tablet scheduled for one tablet by mouth three times a day was not documented as given on:<br/> at 22:00, at 06:00, at 06:00, at 14:00, at<br/> 06:00, at 14:00, at 06:00, at 06:00 &amp; 22:00, at 06:00,<br/> at 06:00, and at 22:00.</p> <p>c. Resident #14 MORs revealed:<br/> Medication tablet scheduled for one tablet by mouth two times a day was not documented as given on:<br/> at 20:00.</p> <p>Medication tablet scheduled for one tablet by mouth one times a day was not documented as given on:<br/> at 06:00, at 06:00, at 06:00, at 06:00, and at<br/> 06:00.</p> <p>Medication tablet scheduled for one tablet by mouth one times a day was not documented as given on:<br/> 06: at 06:00.</p> <p>Medication tablet scheduled for one tablet by mouth two times a day was not documented as given on:<br/> at 20:00.</p> <p>Medication capsule scheduled for two capsule by mouth at bedtime was not documented as given on:<br/> at 20:00.</p> <p>d. Resident #15 MORs revealed:<br/> Medication tablet scheduled for one tablet by mouth one time a day was not documented as given on:<br/> at 17:00.</p> <p>Medication tablet scheduled for one tablet by mouth three times a day was not documented as given on:<br/> at 13:00, at 13:00, at 21:00, at 21:00, at<br/> 21:00, and at 13:00.</p> <p>Medication tablet scheduled for one tablet by mouth two times a day was not documented as given on:<br/> at 06:00, at 18:00, at 18:00, at 06:00, at<br/> 06:00, and at 06:00.</p> <p>Medication tablet scheduled for one tablet by mouth at bedtime was not documented as given on:<br/> at 20:00.</p> |                                                                                           |                                                     |

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| <p>Medication tablet scheduled for one tablet by mouth two times every day for seven day was not documented as given on: ..... at 20:00.</p> <p>Medication tablet scheduled for one tablet by mouth every morning until ..... was not documented as given on: ..... at 06:00.</p> <p>Medication tablet scheduled for one tablet by mouth every day until ..... was not documented as given on: ..... at 06:00.</p> <p>Medication tablet scheduled for one tablet by mouth at bedtime was not documented as given on: ..... at 20:00.</p> <p>2) During interview conducted on ..... at 01:15pm, the Health and Wellness Director acknowledged and confirmed that residents' MORs were missing much documentation/initials that medications were given as ordered with no explanation provided.</p> <p>Class III</p> <p><b>0084 - Training - Assis Self-Admin Meds &amp; Med Mgmt - 58A-5.0191(5) FAC</b></p> <p>Based on observation, record review, and interview, the facility failed to ensure that 2 of 3 unlicensed staff who provide residents assistance with self-administered medications had successfully completed the annual 2-hour update on providing assistance with self-administration of medications and safe medication practices in an assisted living facility with 116 in-house residents.</p> <p>Findings included:</p> <p>Per ..... employee record reviews, Staff A and Staff C were unlicensed Med Techs who provided residents assistance with self-administration of medications.</p> <p>Per ..... review of the facility's Medication Observation Records and staff interviews, Staff A and Staff C assisted residents with self-administration of medications.</p> <p>Per interview with Staff A on ....., Staff A stated she provided residents their 8:00 medications that morning.</p> |                                                                                           |                                                     |

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| <p>Per Surveyor review of the facility's employee records conducted on _____, Staff A completed 2 hours of medication training on _____ &amp; _____ -- there was no indication of completion of the required annual 2-hour training update as of _____. Staff C completed 4 hours of medication training on _____ - there was no indication of completion of the required annual 2-hour training update as of _____.</p> <p>Per interview with the facility Administrator on _____, the Administrator confirmed that Staff A &amp; Staff C were responsible for assisting residents with self-administration of medications and acknowledged the need for annual 2-hour updated training.</p> <p>Class III</p> <p><b>0160 - Records - Facility - 58A-5.024(1) FAC</b></p> <p>Based on record review and interview, the facility failed to maintain an up-to-date admission and discharge log recording the admission and the discharge date, the reason for discharge, and where the resident was discharged.</p> <p>Findings included:</p> <p>In review of the facility admission and discharge log conducted on _____, there were many residents recorded without admission dates (Photographic evidence recorded).</p> <p>One resident's (#13) discharge information was recorded (Photographic evidence recorded). Resident #13 was discharged from the facility on _____. The missing discharge information included the date of discharge; the reason for discharge; and, where resident #13 was discharged.</p> <p>In an interview conducted on _____ at 01:15pm, the Regional Director acknowledged and confirmed that the admission and discharge log was not up-to-date. The Regional Director provided no explanation.</p> <p>Class III</p> |                                                                                           |                                                     |