

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 07/11/2017
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11967699	(X3) DATE SURVEY COMPLETED 06/22/2017
NAME OF PROVIDER OR SUPPLIER GRANDE, LLC (THE)	STREET ADDRESS, CITY, STATE, ZIP CODE 725 DESOTO AVENUE BROOKSVILLE, FL 34601	

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

0000 - Initial Comments

An unannounced biennial licensure survey was conducted on 21-22, 2017 at The Grande Assisted Living Facility (lic. 11732). Deficient practice was identified at the time of the survey.

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

Based on observation, interview and record review, the facility failed to ensure 1 of 4 residents observed (resident #8) receive assistance with self-administration as require.

FINDINGS:

On 6/22/2017 at 3:50 PM staff B was observed to provide assistance with self-administration of medication to resident #8. During the observation staff B went to the unsecured refrigerator in resident #8 retrieved two types of medication (Acidophilus Probiotic take 2 tabs by mouth twice daily and 1823 Health Assessment Elixir take 30 milliliters into mouth twice daily swish and swallow). Staff B was observed to only pour 15 milliliters of the 1823 Health Assessment elixir into a medication cup and not the prescribed 30 milliliters and gave it to the resident. Resident #8 was observed to take the medication swish in her mouth and spit back into the cup and not swallow it.

On 6/22/2017 at approximately 3:55 PM an interview was conducted with staff B in reference to resident #8 medication being stored unsecured in her room, why she only gave 15 milliliters of 1823 Health Assessment Elixir and not 30 milliliters. And if the provider has been notified that the resident spits out the solution and not swallow it as perscribed. Staff B stated she did not know.

A record review was conducted on resident #8. It was revealed that there was no documentation showing the provider was contacted advising them that the resident #8 was not taking the 1823 Health Assessment Elixir as perscribed. It was revealed that the current 1823 Health Assessment dated 6/22/2017 shows the resident #8 diagnosis contains 1823 Health Assessment and forgetfulness and needs assistance with self-administration of medication.

Class III

0055 - Medication - Storage and Disposal - 58A-5.0185(6) FAC

Based on observation, interview and record review, the facility did not ensure medications were kept secured for 2 of 2 residents. For residents #8 and #4 who both required "Assistance with Self-Administered" medications.

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FINDINGS: During a medication observation in the facility on _____ at 4:05 PM on the 3rd floor of the building were observed unsecured medications identified in Resident # 8 (_____ # _____). A medication _____ card of Acidophilus Probiotic prescription (for _____ and _____ Support) and a prescription bottle (of approximately 450 milliliters) of _____ / _____ solution were both observed in the resident's refrigerator in her _____. No locking device to secure the medication was observed on or in the refrigerator. Review of the resident's 1823 Health Assessment dated _____ and signed by the physician, shows the resident required "Assistance with Self Administered Medication". The residents diagnoses includes _____ and forgetfulness. Resident #4 (_____ # _____) The following medications were identified in the resident's _____ on the counter and in the medicine cabinet (standing open) above the sink. (Photographs are included.) _____ 10 milligrams approximately 18 tablets. _____ 500 milligrams approximately 1/2 full of a 250 capsule container. D-3 2,000 International Units approximately 1/2 full of a 250 capsule container. E Mixed _____ 400 International Units approximately 1/2 full of a 250 softgel container. _____ 100 and MSM 1500 milligrams _____ approximately 1/4 full of a 90 tablet container. A 10,000 International Units approximately 1/2 full of a 250 softgel container. C 500 milligrams approximately 1/2 full of 100 chewable tablets. Record review of resident #41823 Health Assessment dated _____ and signed by the physician, stated that the resident requires "Assistance with Self Administered Medications". The resident's diagnoses include: _____. Interview with the medication technician (Staff B) on _____ at 4:40 PM revealed her statement of "I know nothing about it and all that is taken care of by someone else it's not me". Interview with the Director of Resident Care on _____ at approximately 11:00 AM revealed that the medications in _____ had been removed, but that she was not aware of the medications in _____ until our interview. The facility's failure to secure medications has the potential for residents for whom they are prescribed and residents for whom they are not prescribed, to access and ingest the medications at will.		

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