

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11967962	(X3) DATE SURVEY COMPLETED 10/18/2017
NAME OF PROVIDER OR SUPPLIER TRANSITION CARE ASSISTED LIVING FACILITY	STREET ADDRESS, CITY, STATE, ZIP CODE 1613 SW MERIDIAN AVE PORT SAINT LUCIE, FL 34953	

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

0000 - Initial Comments

On , a Change of Ownership survey was conducted at Transition Care Assisted Living Facility, license #11948. The facility had deficiencies identified during the survey.

0010 - Admissions - Continued Residency - 429.26(1&9) FS; 58A-5.0181(4) FAC

Based on record review and interview, the facility failed to ensure residents received the required medical examinations every 3 years, for 2 of 3 sampled Residents (#2 and #4).

The findings included:

1. Resident #2 was admitted to the facility on . Her initial medical examination AHCA Form 1823 was completed on , over 3 years prior.
2. Resident #4 was admitted to the facility in . Her initial medical examination AHCA Form 1823 was completed on , over 3 years prior.

This was discussed with acknowledged by the Administrator on at 11:55 AM.

Class III

0030 - Resident Care - Rights & Facility Procedures - 58A-5.0182(6) FAC; 429.28(1-2) FS

Based on observations and interview, the facility failed to provide a safe and decent living environment in 1 of 2 sampled resident (photographic evidence obtained):

The findings included:

During a tour of the facility conducted at 9:39 AM, the following control and housekeeping issues were observed:

1. In the main resident , used by Residents #1, #2 and #4:
 - a. Stored on the sink vanity were 6 toiletry bottles and a plastic basket with supplies. None of these items were labeled or separated in any way. Three residents use this .
 - b. A partially used roll of toilet paper was stored on the vanity as well. There was no no toilet paper holder or dispenser for toilet paper in the .
 - c. There were no paper towels present for use by residents, staff or visitors. There was no paper towel

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holder or dispenser for paper towels in the d. The bottom of the tub had rust-colored stains throughout. The shower mat in the tub was soiled, the reverse side of the mat had dark-colored matter in areas. 2. When approached "main" resident (used by Residents #1, #2 and #4), observed the lower portion of the two white door jambs and door had dark-colored scuff marks, the paint was chipping, and in areas the paint was gouged down to the wood. 3. The floor on the right side of the tub was excessively soiled. 4. In Resident #3's , the wall where the light switch was located was not fully painted. The above concerns were observed and acknowledged by the Administrator on at 4:17 PM. Class III 0055 - Medication - Storage and Disposal - 58A-5.0185(6) FAC Based on observations and interview, the facility failed to properly store resident medications in the facility's locked medication cabinet. Five loose pills were observed in the drawer (photographic evidence obtained). The findings included: On at 2:20 PM with the Administrator present, 5 loose medication pills were observed in the bottom drawer of the medication drawer (2 pills) and in a plastic storage bin inside the medication drawer (3 pills). These pills were identified as follows: 1. Imprinted with "IG 7 1/2" - , an medication 2. Imprinted with "M 103" - , an anti- medication 3. Imprinted with "14 1"- Bupropin, an medication 4. Imprinted with "3720 ", an medication 5. Imprinted with "Wats" - , an medication, 1/2 pill		

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This was discussed with and acknowledged by the Administrator at the time of observation . Class III 0056 - Medication - Labeling and Orders - 58A-5.0185(7) FAC Based on observations, interview and record review, the facility failed to place an alert label on the medication container when there was a change in directions for use for 1 of 2 sampled Residents (#2). The findings included: On at 11:50 AM, during medication reconciliation related to Resident #2, the following was revealed: 1. A pack of 1 milligram (MG) to be taken 3 times daily "as needed". There was no "alert" label attached to the medication container to alert staff to a change in the instructions printed on the medication container. 2. Review of the resident's medication observation record disclosed, "take one tablet 3 times daily", or routinely. 3. Review of the written Health Care Provider order dated called for "take one tablet 3 times daily", or routinely. This was discussed with and acknowledged by the Administrator at the time of observation . Class III 0077 - Staffing Standards - Administrators - 429.176 FS; 58A-5.019(1) FAC Based on record review and interview, the facility failed to ensure the Administrator took and passed the required Core Competency Test. The findings included: A change of ownership survey was conducted on . The Administrator purchased the facility on , nearly 4 months prior. Review of her personnel file revealed she had not taken and passed the required Core Competency Test within 90 days of becoming the facility Administrator.		

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In an interview conducted _____ at 3:41 PM, the Administrator was asked and stated she had yet not made an appointment for the Core Competency Test. Class III 0078 - Staffing Standards - Staff - 58A-5.019(2) FAC Based on record review and interview, the facility failed to ensure staff members submitted the required statements of health for 3 of 3 sampled Staff (A, B and C). The findings included: 1. Staff A, the facility's Administrator, purchased the facility on _____. Review of her personnel file revealed a Health Care Provider (HCP) written statement dated _____, more than 6 months prior to hire. 2. Staff B, a Caregiver and Medication Technician (CG/MT) was hired on _____. Her current HCP written statement of health was dated _____, more than 1 year prior. 3. Staff C, a CG/MT was hired on _____. Her current HCP written statement of health was dated _____, more than 1 year prior. This was discussed with and acknowledged by the Administrator on _____ at 3:40 PM. Class III 0093 - Food Service - Dietary Standards - 58A-5.020(2) FAC Based on observations, interviews and record review, the facility failed to plan meals weekly, document food substitutions, and retain regular and therapeutic menus for 6 months. This had the potential to affect all 4 current residents. The findings included: On _____ at 9:05 AM, review of a dietitian-approved menu posted next to the dining _____ it was not dated for the week. Facility staff was to serve 4 ounces of juice, 2 waffles with syrup and 8 ounces of milk for breakfast. The two resident's having breakfast were served porridge (corn meal, milk, sugar, vanilla and cinnamon), _____ cereal, and coffee and tea. Residents were not offered the scheduled meal laid out in the dietitian-approved menu. On _____ at 2:30 PM (residents eat on their own		

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schedule), review of the dietitian-approved menu called for baked ziti with beef, peas and carrots, mixed salad with salad dressin and pudding. Staff served 3 residents spaghetti with tomatoe and meat sauce, carrots and broccoli and buttered toast. No salad was offered or served. These concerns were with discussed with and acknowledged by Administrator on at 2:58 PM. In an interview conducted at 2:58 PM, the Administrator was asked and stated they did not currently have a system for recording menu substitutions. She further acknowledged that the menus were not posted with weekly dates, and staff did not maintain regular/therapeutic menus for 6 months. Class III 0160 - Records - Facility - 58A-5.024(1) FAC Based on record review and interview, the facility failed to maintain the required admission and discharge log for residents currently residing at the facility, and residents who were discharged from the facility. The findings included: On at 10:23 AM, the Administrator was asked for the facility's current admission and discharge log including the residents' names, dates of admission, where they came from, whether they had a upon admission, and as applicable, the dates of discharge and where the resident was discharged to or date of After 45 minutes, the Administrator stated she could not locate one, and she planned to make a new log. Class III 0162 - Records - Resident - 58A-5.024(3) FAC Based on record review and interview, the facility failed to maintain resident semi-annual weight records for 2 of 2 sampled Residents (#1 and #2). No weights were recorded back to 2016. Also Resident #2 had no record of a Power of Attorney (POA) or Health Care Surrogate (HCS). The findings included: 1. Resident #1 was admitted to the facility on Review of his records revealed the last time he was weighed was 2016, nearly 1 year prior. 2. Resident #2 was admitted to the facility on Review of her records revealed the last time she		

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was weighed was 2016. Also, a dated was signed by the resident's family member. Further review of her records revealed no evidence that the family member nor anyone else was appointed as Resident #2's POA or HCS. These concerns were discussed with and acknowledged by the Administrator on at 12:05 PM. Class III 0167 - Resident Contracts - 58A-5.025 FAC Based on record review and interview, the facility failed to issue new contracts or an addendum documenting the facility's change in ownership effective when the facility was sold to a new owner for 2 of 2 sampled Residents (#1 and #2). The findings included: 1. Resident #1 was admitted to the facility on . Review of his records revealed a contract signed by his Adult Protective Services Conservator with the prior owner signed . There was no evidence showing the facility issued new contracts or an addendum documenting the facility's change in ownership effective when the facility was sold to a new owner. 2. Resident #2 was admitted to the facility on . Review of her records revealed a contract signed by the resident with the prior owner signed . There was no evidence showing the facility issued new contracts or an addendum documenting the facility's change in ownership effective when the facility was sold to a new owner. These concerns were discussed with and acknowledged by the Administrator on at 12:05 PM. Class III		