STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11911836	**11/06/2017**
NAME OF PROVIDER OR SUPPLIER **DEERFOOT MANOR ALF**	STREET ADDRESS, CITY, STATE, ZIP CODE **374 DEERFOOT ROAD** **DELAND, FL 32720**	

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

0000 - Initial Comments

On , 2017, a biennial relicensure survey was conducted at Deerfoot Manor Assisted Living Facility (License #4744). Deficient practice was identified during the survey.

0008 - Admissions - Health Assessment - 429.26(4-6) FS; 58A-5.0181(2) FAC

Based on observations, review of resident records, and interview with staff, the facility failed to obtain a completed resident health assessment (AHCA form 1823) 1 for resident (Resident #7) out of 2 resident records sampled.

The findings include:

A record review was conducted for Resident # 7 which revealed a date of admission of . A Florida Health Assessment Form (1823) was found dated which indicated the resident requires assistance from staff for all Activities of daily living (ADL's). It did not list the type of assistance needed for medications.

An observation was conducted on at 11:25 AM of the Administrator trying to transfer Resident #7 from the couch to her wheelchair (w/c). The resident was not able to bear weight and was lifted into her w/c by the Administrator.

An observation was conducted on at 11:35 AM of Resident # 7 sitting at the dining and was not able to feed herself and was being fed by Employee A as required.

An interview with the Administrator on 11/ at 11:51 AM confirmed the resident needed total care and had to be lifted to get into the wheelchair. The Administrator was asked how long the resident was no longer able to assist staff and she said for about 2 months.

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An interview with the Administrator on 11/ at 11:53 AM confirmed the facility provider assistance to Resident #7 with her medications, and is not marked on the resident 1823 form.

CLASS III

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

Based on observation, and interviews with resident and staff, the facility failed to provide personal dignity and need for privacy for 1 Resident (Resident #1) out of 6 resident sampled.

The findings include:

An observation was conducted on at 8:20 AM of Resident #1's . The mini blinds covering the window had multiple blinds missing, learning a 2-3 inch gap in the blinds. (photographic evidence obtained) This allowed Resident #1's be visible from the outside.

An interview with Resident #1 on at 8:21 AM confirmed she has informed Employee D the blinds were not in good repair, and needed to be fixed. The resident stated she can dress/undress herself and has to stand in the corner so she won't be seen by guest and staff entering the house.

An interview with Employee D and the Administrator on 11/ at 8:40 AM confirmed the blinds in Resident #1's not ensure full privacy.

CLASS III

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

Based on observation, record review and interview with the Administrator , the facility failed to have staff properly assist residents with medication assistance pursuant to the training requirements of Rule 58A-5.0191,F.A.C. for 1 Resident (Resident #5) out of 3 residents observed with medication assistance.

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The findings include:

An observation was conducted on at 8:30 AM of Employee D, obtaining a clear medicine cup filled which was already with multiple medications, from the facility medication cart. The employee placed additional pills into the medicine cup, and walked over to Resident #5 and stated "I have your pills".

A review of Resident #5 Florida Health Assessment form (1823) signed and dated by the physician on revealed the resident required assistance from staff for medications. (photographic evidence obtained)

An interview with Employee D, on at 8:32 AM confirmed he prepared the medications for Resident #5 earlier in the morning (pre-poured) and gave the medications to the resident without informing her of the medications she was taking.

CLASS III

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

Based on observation, record review and staff interviews, the facility failed to maintain an accurate daily Medication Observation Record (MOR) for residents who receive assistance with self-administration of medications for 1 Resident (Resident #5) out of 2 residents sampled for medication assistance.

The findings include:

A record review was conducted for Resident #5 which revealed a physician order dated for 40 mg, Z-Pack (Zithromycin), dose Pak, and inhaler.

An observation was conducted on at 9:30 AM of Resident #5 being assisted with her AM medication by Employee D. The resident received 20 mg, 1 tablet, and did not receive her Z-pack, dose pack, or inhaler.

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A review of the Medication Observation Record reveals the resident has an order for 20 mg 1 by mouth daily and does not list the Z-pack, dose pack, or inhaler ordered on

An interview with the Administrator on 11/ at 9:30 AM confirmed Resident #5's MOR was not accurate and new medications ordered by the Physician on had not been entered on the MOR.

2) A review of the MOR for Resident #5 revealed Employee D, initialed the MOR that the resident received Inhaler 2 puffs on

An observation was conducted on at 8:30 AM of resident #5 being assisted with her AM medications by Employee D and was not assisted with Inhaler.

An interview with the Resident on at 9:30 AM confirmed she did not receive her Inhaler.

An interview with the Administrator on 11/ at 9: 35 AM confirmed the MOR was not accurate and should have not been signed by Employee D until the resident received the medication.

An interview with Employee D on at 11:10 AM confirmed he signed the MOR for Resident #5's and did not yet assist her with the medication.

CLASS III

0056 - Medication - Labeling and Orders - 58A-5.0185(7) FAC

Based on medication observation, resident record reviews and staff interviews, the facility failed to

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ensure that prescriptions for residents who receive assistance with self Administration are refilled in a timely manner for Resident #5, out of 3 resident records that were sampled for medications.

The findings include:

A record review was conducted for Resident #5 which reveals a physician order dated . . . for 40 mg, Z-Pack (Zithromycin), dose Pak, and inhaler.

An observation was conducted on at 9:30 AM of Resident #5 being assisted with her AM medication by Employee D. The resident received 20 mg 1 tablet and did not receive her Z-pack, . . . dose pack, or . . . inhaler.

A review of the Medication Observation Record revealed the resident had an order for 20mg 1 by mouth daily.

An interview with Resident #5 confirmed the physician came and saw her on and knew she received an order for medications, but she had not received them yet.

An interview with the Administrator on 11/ at 9:30 AM confirmed Resident #5 did not receive the right dosage of . . . . The Administrator also confirmed the facility had not received the residents new dose nor her Z-pack, dose pak or inhaler. She stated "The Dr. came in late on Saturday and I faxed it over this morning but we haven't received them yet."

CLASS III

0076 - ( ) - 58A-5.0186 FAC

Based on record reviews and interviews with the Administrator, the facility failed to have written policy and procedures that explain implementation of state laws and rules relative to . . . . . ( ) with the potential to affect all 12 residents currently living at the facility.

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The findings include.

A review of the facilities policies and procedures revealed no documentation that explained the implementation of state laws and rules relative to ( ).

An interview with the Administrator on 11/ at 11:45 AM confirmed the facility has policy and procedures related to for staff or residents.

CLASS III

0093 - Food Service - Dietary Standards - 58A-5.020(2) FAC

Based on observation, record reviews and staff interviews, the facility failed to have a 3 day supply of non-perishable food items on hand at all times and to maintain a substitution log for 6 months affecting all 11 residents currently living in the facility.

The findings include:

An observation was conducted on at 8:30 AM of 3 residents still eating breakfast which included, biscuits and gravy, tater tots. The breakfast listed on the menu was dry or hot cereal, bread, margarine and milk.

An interview with the Administrator on 11/ at 9:15 AM was asked for the facility substitution log.

A review of the facility substitution log reveals it was blank, and no entries were entered on the log.

An interview with the Administrator on 11/ at 9:25 AM confirmed the substitution log for the facility was left blank and no entries had been entered when substitutions were made.

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3) An observation was conducted of facility food supply and the facility did not have 3 day supply of non-perishable food on hand in the event of an emergency. (photographic evidence obtained)

An interview with the Administrator on 11/ at 12:30 PM confirmed the facility did not have 3 day supply of non-perishable food on hand in the even of an emergency. She stated " The food was expired and I just haven't gone shopping yet."

CLASS III