

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11953671	(X3) DATE SURVEY COMPLETED R 01/08/2018
NAME OF PROVIDER OR SUPPLIER AM GRAND COURT LAKES, LLC	STREET ADDRESS, CITY, STATE, ZIP CODE 280 SIERRA DRIVE NORTH MIAMI BEACH, FL 33179	

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

0000 - Initial Comments

A Fourth Revisit Survey was conducted on 01/08/18. AM Grand court Lakes, LLC (License #8390) had the following deficiencies identified at the time of the survey:

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

Based on observation and interview, the facility failed to keep all medications locked at all times.

Findings included:

During the facility tour on 01/08/18 at 02:15 PM, the following medications were found on a night stand in shared suite D112: 1 pain relieving cream 2 oz, 2 bottles of Tylenol PM 200 mg, 1 Tylenol PM 200 mg, 1 Orasol, 1 Dry Eye Relief.

During an interview on 01/08/18 at 02:16 PM, Staff T acknowledged the medications were on Resident #12's night stand and the doors had no lock.

Uncorrected
Class III

0057 - Medication - Over The Counter (OTC) Products - 58A-5.0185(8) FAC

Based on observation, record review, and interview, the facility failed to maintain all medications properly labeled and locked at all times.

Findings included:

On 01/08/18 at 2:15 PM during the facility's tour, the following over the counter (OTC) medications, not labeled with the resident's name, were observed on a night stand in shared suite D112: 1 pain relieving cream 2 oz, 2 bottles of Tylenol PM 200 mg, 1 Tylenol PM 200 mg, 1 Orasol, 1 Dry Eye Relief.

A review of Resident #12's Health Assessment dated 01/08/18 stated the Resident "needs assistance with self-administration of medication."

During an interview on 01/08/18 at 2:16 PM, Staff T acknowledged that the OTC medication were unlocked and unlabeled.

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

**PRINTED: 01/29/2018
FORM APPROVED**

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