STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11968537	**03/07/2018**
NAME OF PROVIDER OR SUPPLIER **ELITE MANOR-KISSIMMEE**	STREET ADDRESS, CITY, STATE, ZIP CODE **4034 SUNNY DAY WAY** **KISSIMMEE, FL 34744**	

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

0000 - Initial Comments

Relicensure survey conducted on . . . . . . Elite Manor-Kissimmee license # 12424 had deficiencies found at the time of the visit.

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

Based on observations and interview the facility failed to ensure the unlicensed staff (A) who assisted 2 of 2 sampled residents (2 and 4) with self-administration of medications followed the correct procedure.

Findings:

Observations during the facility tour on . . . . . at 9 AM noted a cup with medications on top of the breakfast table. The cup contained 6 pills. The administrator stated not all residents had taken their medications. She took the medication cup to resident #4. The resident was in her . . . ; the administrator gave the resident the cup and observed the resident take the medications in the cup.

Observations on at 10:19 AM during the medication pass noted the medications were given after the resident ate breakfast. The administrator, an unlicensed staff, took medications to resident #2. She put the medications in a cup, told the resident what the medications were but did not read label aloud to resident. She observed the resident take the medications and then signed the Medication Observation Record.

In an interview with the administrator on at 10:30 who said resident #2 was hard of hearing and spoke Spanish only. She . . . . not hear or understand what the label said.

Class III

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

Based on observations and interviews, the facility failed to make sure that centrally stored medications were kept in a locked cabinet, locked cart, or other locked storage receptacle, . . . , or area at all times.

Findings:

Observations during the facility tour on . . . . . at 9 AM noted a cup with medications on top of the breakfast table. The cup contained 6 pills. The administrator stated not all residents had taken their

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medications. She took the medication cup to resident #4. The resident was in her ; the administrator gave the resident the cup and observed the resident take the medications in the cup.

Continued observations noted a bottle of tears on a desk by the breakfast table. The administrator said the bottle of eye drops belonged to resident # 2. The family brought the eye drops for her and she found them in the laundry.

In an interview with the administrator on at 10:30 who said resident #3 walked away before taking the medications and resident #1 was hard of hearing and spoke Spanish only and the resident would not understand what was said.

Class III

0078 - Staffing Standards - Staff - 58A-5.019(2) FAC

Based on interview and record review the facility failed to ensure that staff were assigned duties consistent with their level of education, training, preparation, and experience and allowed unlicensed staff to administer medications to 1 of 2 sampled residents (1).

Findings:

Health assessment report 1823 dated for resident #2 indicated she needed medication administration. An updated health assessment report dated indicated the resident needed assistance with self -administration of medications. Continued review revealed no evidence the health care provider was contacted regarding clarification as to whether or not the resident needed medication administration.

Based on the health assessment and record review the resident needed medication administration from until .

In an interview on at 1:30 PM with the administrator who said the facility did not have a nurse to administer medications. She explained only unlicensed staff assisted with self-administration of medications to the residents including resident #2. Her health assessment was incorrect.

Class III

0162 - Records - Resident - 58A-5.024(3) FAC

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Based on observations, record review and interview the facility failed to ensure that 2 of 2 sampled resident records (1 & 2) reviewed contained all the required components.

Findings:

Resident record review for resident #1 revealed an informed consent form regarding assistance with medications from unlicensed staff dated ; however, the form did not indicate whether the unlicensed staff who provided the assistance would be or not be supervised by a licensed staff . The health assessment report 1823 dated indicated the resident needed assistance with self-administration of medications.

Resident record review for resident #2 revealed a health assessment report 1823 dated that indicted the resident needed assistance with self-administration of medications. The review revealed an informed consent form regarding assistance with medications from unlicensed staff , however the form did not indicate whether the unlicensed staff who provided the assistance would be or not be supervised by a licensed staff.

During an interview at 3 PM on , the assistant administrator said the information was overlooked.

Class III

0181 - Emergency Plan Approval - 58A-5.026(2) FAC

Based on interview and record review the facility failed to submit the Comprehensive Emergency Management Plan (CEMP) to the local emergency management annually for review and approval.

Findings:

In an interview with the administrator on at 10 AM who said, she submitted the CEMP for review in , 2018 but has not received the letter of approval. She would contact them today to see about the approval letter.

She provided a letter dated that indicated the Fire safety plan was approved.
At approximately 1 PM, the administrator said the emergency management office called her to inform her that he CEMP needed to be revision that included the mutual agreement and fire safety among other things.

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Class III

Z815 - Background Screening; Prohibited Offenses - 408.809; 435.02(2); 435.06 FS

Based on facility interview and record review and the facility failed to ensure 1 of 3 staff (C), whom were in a role that required a background screening did not have any disqualifying offenses and allowed the staff to continue to work without knowledge of background screening results.

Findings:

Personnel record review staff C revealed a hire date of and was a caregiver. Continued review revealed a background screening result that indicated "Awaiting privacy policy".

In an interview with the administrator on at 2 PM who said, she did not realized the background screening indicated awaiting privacy policy. She explained that she had not seen the background screening results but knew the staff was eligible.

Unclassified