STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11910382	**06/06/2018**
NAME OF PROVIDER OR SUPPLIER **ATRIA MERIDIAN**	STREET ADDRESS, CITY, STATE, ZIP CODE **3061 DONNELLY DRIVE** **LANTANA, FL 33462**	

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

0000 - Initial Comments

An unannounced relicensure survey was completed on 06/05/2018 and 06/06/2018 at Atria Meridian (Lic#4898). There were deficiencies at the time of the survey.

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

Based on record review and interview, the facility failed to ensure that all residents Agency for Health Care Administration Health Assessment (AHCA Form 1823) was complete and reflective of the resident medication care needs, for 1 of 2 sampled residents (Resident#8).

The Findings Included:

Resident record review was completed for Resident#8 and revealed, a ACHA Form 1823 dated . . . . . . The form documented that Resident#8 was able to Administer medication without assistance and the comments documented "daughter manages medications". Further review revealed a new AHCA Form 1823 was completed on and the medication section that addresses the level of assistance needed for medication administration was left blank.

During the observational tour on at approximately 10:30AM, and interview was conducted with Resident#8, and she stated she takes her own medication and her daughter manages her medications.

During an interview with the Administrator on 06/06/2018 at approximately 2:00PM, she acknowledged the findings and provided no additional documentation for review.

Class III

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

Based on observation, interview and record review, the facility failed to ensure that a resident's Health Assessment form (AHCA form 1823) was accurate and reflective of all care needs and nursing needs, for 1 of 3 sampled residents (Resident # 5).

The findings included:

Review of Resident # 5's record revealed that he suffers from the following infirmities ,

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, and a of the (Left) . He requires daily oversight. He is with the following Activities of Daily Living (ADL's): bathing, dressing, eating, self-care grooming, toileting, transferring, and ambulating. He is He was initially admitted into the facility on .

On at 11:50 AM, an interview was conducted with Resident # 5. He stated he was scheduled to take at 01:00 PM.

Further review of Resident #5's AHCA form 1823 dated does not reflect that the resident receives . In the section of Nursing/treatment/ service requirements state: medication management and screen annually.

On 06/06/2018 at 02:00 PM, an interview was conducted with the Administrator, She was requested to provide notes from the medical record to reflect . She stated she could not produce any records. She acknowledged that the AHCA 1823 form should have been updated to reflect Third Party Services for . She also confirmed the facility should maintain progress notes.

Class III

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

Based on observational and interview, the facility failed to post required important phone numbers in full view and in a common area accessible to all residents.

The Findings Included:

During the observation tour on 06/05/2018 between the hours of 9:40AM and 11:00AM, there was no observation of the following required important phone numbers: Disability Rights Florida, Agency Consumer Hotline, and Florida Abuse hotline posted in the facility.

During an interview on 06/06/2018 at approximately 2:00 PM with the Administrator, she acknowledged the findings.

Class IV

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

Based on observation and interview, the facility failed to ensure that all staff followed the required

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SUMMARY STATEMENT OF DEFICIENCIES
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process for assisting with self-administration of medications, for 2 of 5 sampled residents (Resident#'s 13 and 14).

The Findings Included:

During observation of the medication pass on at 7:49AM, with Resident#13 revealed, Staff A failed to take Resident#13's medications (, 81mg. Chewable Tablet, 20mg, 12.5mg. 10mg. 75Mcg. 100mg, Tablet, 10mg. , 220mg. Tablet, , 325mg) in it's previously dispensed, properly labeled container, to the resident, and in the presence of the resident, reading the label, opening the container, removing the prescribed amount of medication from the container, and closing the container in front of the resident.

Further observation on at 8:25AM with Resident#14 revealed, Staff A failed to take Resident#14's medications , Powder (527), , 20mg Tablet, , DR 20mg., 25-100mg. Tablet, 300mg, 100mg. Capsule, D3 1000 Unit, 20mg., 8.6mg, 120mg) in it's previously dispensed, properly labeled container, to the resident, and in the presence of the resident, reading the label, opening the container, removing the prescribed amount of medication from the container, and closing the container in front of the resident. During an interview with Staff A at this time, she stated: "so we can take the medication packages into the residents rooms"? She stated se would inform everyone.

During an interview with the Administrator on 06/06/2018 at approximately 2:00PM, she acknowledged the findings.

Class III

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

Based on record review and interview, the facility failed to submit a Comprehensive Emergency Management Plan (CEMP) to the local Emergency Management Agency for review and approval.

The Findings Included:

During a facility record review, an attempt was made to review the facilities approved Comprehensive Emergency Management Plan for 2018. There was a approved CEMP on file dated 9/30/2016. The CEMP was approved through July 2017. The plan year was July 1 through July 31 2017. Further review

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revealed the recommended submission date as 5/01/2017. There was no approved CEMP on file for 2018.

During an interview with the Administrator on 06/06/2018 at approximately 2:00PM, she stated the facility was working with a consultant and acknowledged the CEMP has not been submitted for review. At this time, she acknowledged the findings and provided no additional documentation for review.

Class III