STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11966804	R 06/19/2018
NAME OF PROVIDER OR SUPPLIER **LEDGE MANOR**	STREET ADDRESS, CITY, STATE, ZIP CODE **12006 MCINTOSH ROAD THONOTOSASSA, FL 33592**	

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

0000 - Initial Comments

Assisted Living Facility

A revisit to Complaint CCR#2018003715 was conducted at Ledge Manor on in conjunction with a 2nd revisit to and biennial survey and a complaint investigation (CCR 2018007052). Ledge Manor had a deficiency at the time of the visit.

(License # 11289)

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

Based on observation, interview and record review, the facility failed to ensure that (1) prescriptions were filled or refilled in a timely manner for two Resident (#9 and #10) and (2) medications were properly labeled and dispensed for one Resident (#8) of six sampled Residents, who need assistance with self-administration of medication.

Findings Included:

During a medication observation record review for Resident #9 conducted on it was observed on the medication observation record (MOR) that the following medications for this resident were not available:
20 mg tablet taken daily 8:00 am not available to
25 mg one tablet daily 8:00 am not available to and to

During an interview with the director of nursing (DON) on at 2:30 PM, the DON stated that the resident's medications were supplied by hospice and they was not aware that the medications were not available.

During a MOR review for Resident #10 conducted on it was observed on the MOR for 2018 that the following medications were not available:
Floranex 1 tablet by mouth two times daily at 8:00 -am 8:00 PM-not available to (Photographic evidence obtained). A MOR review for 2018 revealed that the following medications were not available: 40 mg daily at 8:00 am- not available - to and 40 mg daily at 8:00 am- not available to (Photographic evidence obtained)

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In an interview conducted with the DON on 06 / at 2:25 PM, they stated that the family supplied the medication. There was no documentation on record that the family had been notified that medications had run out.

During a medication observation conducted on at 11:08 am, it was discovered that Resident #8's medication label did not match the MOR. The label stated mg take one by mouth every six hours as needed for pain (photographic evidence obtained). The MOR stated take one tab 4 times daily 4:00 am, 8:00 am, 12:00 PM and 4:00 PM (photographic evidence obtained).

During an interview with the DON on at 2:18 PM, they acknowledged that there was a discrepancy between the medication label and the MOR for Resident #8's prescription.

Class III