STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11932670	**04/03/2018**
NAME OF PROVIDER OR SUPPLIER **GRANDVIEW RETIREMENT CENTER**	STREET ADDRESS, CITY, STATE, ZIP CODE **1706 OLIVE ROAD** **PENSACOLA, FL 32514**	

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

0000 - Initial Comments

An unannounced Change Of Ownership(CHOW) survey and a Limited Nursing Services (LNS) monitoring visit was conducted in conjunction with a complaint survey for allegations contained within CCR#2018002110 at Grandview Retirement Center, state license #7371, in Pensacola, FL on . . . . . At the time of the survey, deficient practice was identified related to the CHOW portion of the survey.

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

Based on staff interview and record review, the facility failed to ensure the resident health assessment for assisted living facilities (AHCA Form 1823) was completed to indicate the type of assistance required with medications for 1 of 2 residents reviewed (# 9).

The findings are:

A record review was completed for resident #9. The record showed she went out to the hospital and returned to the facility on . The resident's health assessment, AHCA Form 1823, did not indicate the type of assistance the resident required with medications in Section B on page 4, as the section was completely blank.

An interview was conducted with the Licensed Practical Nurse Wellness Director on about 10:15 am. She looked at page 4 Section B of the health assessment for resident #9 and stated, "No, that is not complete." She then said when a resident returned to the facility, the staff were supposed to check that it was complete and notify the medical provider if needed. She confirmed the resident returned to the facility on , and that there was no indication on the resident assessment of what type of assistance resident # 9 needed with medications."

Class III

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

Based on observation, record review and staff interview, the facility failed to ensure that centrally stored expired medications were stored separately from resident medications currently in use for 1 of 2 residents observed (#12).

The findings are:

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On at 4:35 pm, Medication Tech (MT) Employee E was observed assisting resident #12 with sugar monitoring. Employee E gathered the items needed for the resident to check his sugar, and resident #12 completed his sugar testing after the items were given to him. Resident #12 then read the Medication Observation Record (MOR) and noted he was to give himself 6 units of , according to his physician ordered sliding scale coverage.

Employee E was observed to remove the resident's flex pen from the medication cart and give it to the resident. Resident #12 put the cap on the pen and dialed the pen to 6 units before injecting himself with 6 units of in the right arm. When the resident was done with the pen, employee E then handed the pen to this surveyor. The open date, written on the flex pen was observed as . Employee E was then asked to read the date on the pen. She read the date as and stated, "Yes, that is expired. It expires 30 days after the open date." She was then asked if that was the pen the resident had just injected himself with and she stated, "yes."

A review of the MOR for resident #12 revealed he was ordered to have sugar readings performed before meals at 6am , 11am, and 4pm with sliding scale coverage.

The licensed practical nurse (LPN) Wellness Director viewed the pen for resident #12 about 4:52 pm on . She stated, "That expired in . It expires 28 days after it is opened."

Class III

0082 - Training - / - 58A-5.0191(3) FAC

Based on record review and staff interview, the facility failed to ensure direct care staff received a one-time education course on / (/) within 30 days of employment for 1 of 4 sampled employees (Employee A).

The findings are:
Review of the personnel file for direct care employee A revealed a hire date of . There was no evidence of / training on file for the employee.

An interview was conducted with the administrator on at approximately 8:45am. She stated, "I know employee A has completed the training, but I do not know where the documentation is for that training."

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Class III