STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11966445	C 12/28/2017
NAME OF PROVIDER OR SUPPLIER **CRYSTAL GEM MANOR ALF**	STREET ADDRESS, CITY, STATE, ZIP CODE **10845 WEST GEM STREET** **CRYSTAL RIVER, FL 34428**	

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

0000 - Initial Comments

On and 28, 2017, an unannounced complaint survey (CCR # 2017010637 and CCR # 2017011646) was conducted at Crystal Gem Manor Assisted Living Facility (license # 10687), Crystal River, FL. Deficient practices were identified at the time of survey.

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

Based on record review and interview, the facility failed to provide assistance with self-administration of medications for 2 of 50 residents (resident #7 and #8).

Findings:

On , a record review of Medication Observation Record (MOR) of for resident #7 revealed that the resident was not receiving his medication as follows:

, 0.44%/20.625% (apply to every 6 hours). On the of the Medication Observation Record, there was a remark reading "not on cart and not given" on the following dates: , 8:00 AM, 12 PM and 6 PM; , 8:00 AM, , 8:00 AM and 6:00 PM; , 4:00 PM; , 4:00 PM; and . (total 7 dosages).

On , a record review of Medication Observation Record of for resident #8 revealed that the resident was not receiving his medication as follows:

, , ( ) 5 mg Tablet (one tablet by two times a day): On the of the Medication Observation Record, there was a remark reading "not in cart and not given" on the following dates: , 8:00 AM; , 8:00 AM; , 8:00 AM; , 8:00 PM (total 4 dosages)

On , at approximately 11:10 AM, an interview was conducted with the assistant administrator, who stated: "The medications are on the medication cart and the medication technicians did not find and did not give the medications by mistake." As observed, the medications were in the cart for the respective dates. The assistant administrator was requested to provide documentaion for notifying the physician according to the facility's "Resident Refusal of Medication Protocol". The assistant administrator confirmed that the facility failed to notify the physician.

Class III

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11966445	C 12/28/2017
NAME OF PROVIDER OR SUPPLIER **CRYSTAL GEM MANOR ALF**	STREET ADDRESS, CITY, STATE, ZIP CODE **10845 WEST GEM STREET** **CRYSTAL RIVER, FL 34428**	

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

0152 - Physical Plant - Safe Living Environ/Other - 58A-5.023(3) FAC

Based on interview and observations the facility failed to provide a safe living environment pursuant to Section 429.28(1)(a), F.S.; the facility must be maintained free of hazards with in a memory care unit for 21 of 21 residents; and ensure that all existing architectural, mechanical, electrical and structural systems, and appurtenances are maintained in good working order.

Findings:

In an interview with maintenance personnel, on at 11:10 am he informed the survey team member he removed the portion of the ceiling that had been effected by the water and placed a patch over the area to make sure the leakage has stopped. He stated that he has not fixed that portion of the ceiling yet.

On , this survey team member observed a large black square shaped board attached to the ceiling. The location of this board was in the Memory walk hallway of the secured memory care (level II) portion of the facility.

In an interview with the maintenance personnel, on at 8:55 am he stated he was contacted by the Assistant Administrator on Saturday , regarding the leak. The maintenance personnel staff states upon his inspection of the leakage. He observed that the leak was a result of loose bolts on the 3" coupling from the fire protection sprinkler system.

During observations conducted by The Florida Health Department Environmental Supervisor, she instructed the facilities maintenance personnel the area of the ceiling in question was still wet. She suggested to him before he completed any further repairs he should remove slightly more of the ceiling to ensure the wet portions of the ceiling are completely removed.

Class III