STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11969276	01/03/2019
NAME OF PROVIDER OR SUPPLIER **AZALEA GARDENS SPECIAL CARE**	STREET ADDRESS, CITY, STATE, ZIP CODE **2724 OX BOTTOM RD** **TALLAHASSEE, FL 32312**	

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

0000 - Initial Comments

An unannounced monitoring survey for Limited Nursing Services was conducted in conjunction with an initial survey for Extended Congregate Care services and a generator assessment on at Azalea Gardens Special Care Center. At the time of the survey, deficient practice was identified.

N277 - LNS - Resident Care Standards - 58A-5.031(2) FAC

Based on record review and staff interview, the facility failed to ensure required monthly nursing assessments for Limited Nursing Services (LNS) were conducted by a qualified registered nurse in accordance with state standards of practice for 2 of 12 residents sampled (#3 & #8).

The findings included:

Review of physician orders revealed resident #8 was admitted to LNS on and resident #3 was admitted to LNS on .

Review of the medical records for each of these residents revealed daily documentation by nursing staff regarding the treatment provided and also showed an "ECC/LNS Monthly Nursing Evaluation" form for each resident that was being completed on a monthly basis. Review of this form showed it to be 3 pages long and included various information on the resident to include: nursing services being provided, elimination pattern, vital signs, medications, nutritional status, activities of daily living, and mental status. On the page of the form there were two signature lines observed. The first line indicated it was where the nurse would sign, date and indicate the shift they worked at the facility. Under that, there was a second line for signature that was labeled "reviewed by" with a line to the right for the date of the signature.

On at 12:54PM, the administrator was asked to provide a copy of the contract between the facility and the registered nurse who conducted their monthly LNS assessments. The administrator stated that she had emailed the contract RN to see if there was ever a contract completed because she only remembered the nurse giving her a list of prices for the various services offered, but didn't remember a specific contract. At 1:01PM, she returned and stated she had just spoken to the RN and there was no contract, but did offer to show a sample invoice the RN provided to the facility monthly. Review of the invoice showed that the nurse was being paid for "chart audits for LNS compliance with a written report of findings from audits."

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On at 2:10pm, a follow-up interview was conducted with the facility Administrator and Director of Nursing (DON). The DON stated that the LNS services for each resident were listed on the resident's Medication Observation Record (MOR) and the facility administrator was responsible for admitting and discharging residents from the LNS program. She stated LNS orders were also maintained in the resident charts and there was a 24 hour report book that detailed any issues and an up-to-date LNS log with services provided to each resident. Both were asked about the monthly assessments of the LNS residents and stated that the facility Licensed Practical Nurses (LPNs) were responsible for filling out the monthly evaluation forms on each resident receiving services and to providing those forms to the Registered Nurse (RN) when she visited the facility. The DON stated that the RN would review all documentation on each of the residents and the data on the evaluation form and verify that records were being maintained correctly and then would sign each of the monthly evaluation forms behind the facility LPN. When asked if the information gathered and documented on the form was collected at the time the RN was in the building, she confirmed that the evaluation forms were filled out by the LPNs prior to the monthly RN visit. When asked if the RN made rounds to verify the information on the forms, filled out by the LPNs, or to recheck areas, such as vital signs, that change frequently to ensure the accuracy of the evaluation forms, the DON confirmed that the RN did not go to verify information, even if it had been obtained days prior to her visit.

According to the Florida Board of Nursing 2018 Florida Nursing Statutes (Chapter 464), the assessment of a resident is not within the scope of practice for a Licensed Practical Nurse. According to legal definition, the practice of practical nursing means the performance of selected acts, including the administration of treatments and medications, in the care of the ill, injured, or infirm; the promotion of wellness, maintenance of health and prevention of illness under the direction of a registered nurse or licensed physician." The statutes go on to define the role of the RN, or "practice of professional nursing", as "the performance of those acts requiring substantial specialized knowledge, judgement, and nursing skill based upon applied principles of , biological, physical and social sciences which shall include, but not be limited to: The observation, assessment, nursing diagnosis, planning, intervention, and evaluation of care."

Class III