

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 01/28/2019
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11965596	(X3) DATE SURVEY COMPLETED 01/11/2019
NAME OF PROVIDER OR SUPPLIER HAINES MANOR ALF	STREET ADDRESS, CITY, STATE, ZIP CODE 301 SOUTH 10TH STREET HAINES CITY, FL 33844	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION)		
0000 - Initial Comments ASSISTED LIVING FACILITY On, a biennial re-licensure survey with limited nursing services (LNS) was conducted at Haines Manor Assisted Living Facility. Haines Manor had deficient practice identified at the time of the survey. (License# 9965) 0010 - Admissions - Continued Residency - 429.26(1&9) FS; 58A-5.0181(4) FAC Based on observation, record review and interview the facility failed to ensure that two of four sampled residents (#14 and #15) continued to meet the criteria for continued residency. Additionally, they failed to obtain documentation of a . . . -to- . . . medical examination (1823) after a significant change of condition. Findings included: During a medication pass observation conducted on, Residents #14 and #15 were observed requiring medication administration of their noon medications. Record reviews conducted on for Residents #14 and #15 revealed that their 1823 health assessments, both dated, stated that both residents required assistance with self-administration of medication. The residents current 1823 did not reflect the requirement for medication administration for both residents. During an interview with Staff B conducted on at 3:41 PM, Staff B confirmed that Resident #14 was not capable of assistance with self-administration of her medications and that Resident #15 shake too much to participate in assistance with self-administration of her medication. In an interview with the Administrator conducted on at 3:50 PM confirmed that the facility does not have licensed nurses to administer medication to the residents. Class III		

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

0053 - Medication - Administration - 58A-5.0185(4) FAC

Based on observation, record review and interview, the facility failed to provide licensed staff to administer medication to two Residents (#3 and #6) of four sampled residents.

Findings included:

During a medication pass observation conducted on . . . at 11:50 am Staff B was observed administering medication to Resident #14. Staff B pulled medication cards from the drawer and compared labels to the medication records, then popped pills into a sleeve and crushed pills. The pill powder was mixed with pudding in a small cup. Staff B returned the medication cards to the cart. Staff B walked across the dining room to Resident #14 and addressed them. Staff B scooped a small amount of the pudding onto a spoon and fed it to Resident #14 until the mixture was finished. Resident #14 kept her . . . crossed in her . . . during this process. Resident #14 did not attempt to assist Staff B with the medication.

During a medication pass observation conducted on . . . at 11:42 am, Staff B was observed administering medication to Resident #15. Staff B identified the resident standing by her cart. The medication labels were compared to the medication records. The pills were popped into a sleeve and crushed. The pill powder was mixed with pudding. Staff B scooped the pudding mixture onto a spoon and fed the mixture to Resident #15. The resident kept her . . . at her side and did not attempt to assist Staff B with the medication.

A record review for Staff B conducted on . . . revealed that they were not a licensed professional qualified to administer medications.

During an interview with the Administrator conducted on . . . at 3:50 PM they confirmed that Staff B is an unlicensed med tech trained and is not a licensed professional qualified to administer medications.

Class III

0078 - Staffing Standards - Staff - 58A-5.019(2) FAC

Based on record review and interview, the facility failed to have documentation in the files of 2 (Staff A and Staff C) of 3 direct care staff a written statement from a health care provider stating Staff A and Staff C were free from communicable . . .

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Findings included: Record review on of the personnel file for direct care Staff A revealed she was hired on and there was no free from communicable statement completed in her file within 30 days of being hired at the facility. Record review on of the personnel file for direct care Staff C revealed she was hired on and there was no free from communicable statement completed in her file within 30 days of being hired at the facility. When interviewed on at 1:45 pm., the administrator verified the free from communicable statements for direct care staff A and C were not in their personnel files. Class III		