STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11965650	**02/04/2019**
NAME OF PROVIDER OR SUPPLIER **RES-CARE PREMIER**	STREET ADDRESS, CITY, STATE, ZIP CODE **12981 SW 52ND STREET FORT LAUDERDALE, FL 33330**	

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

0000 - Initial Comments

An unannounced Relicensure survey was conducted on at Res- Care Premier ALF (Lic#10009). The facility had deficiencies identified at the time of the survey.

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

Based on observation, interview and review of policy and procedure, it was determined that the facility failed to properly secure/lock the refrigerated medications for (1) of (4) residents (Resident #1). And, the facility failed to promptly discard expired resident medications for (3) of (4) residents (Resident #2, #3 and #4).

The findings included:

During an observation on at 09:50 AM of the facility's kitchen refrigerator, it was noted that there was a black, combination nylon zippered pack containing a total of three different for Resident #1, being stored there in the "unsecured/unlocked" refrigerator in an "un-secured/un-locked" black, combination nylon zippered pack (see attached photos). The following 4 were noted: Flex Touch x3 ordered as: inject 25 units twice daily for diagnosis of: , with expiration dates of: . And, there was a ordered as: inject per three times daily at breakfast, lunch and dinner, before meals with an expiration date of: .

On at 09:53 AM An interview was conducted with the Administrator regarding the "un-locked/un-secured" combination nylon pack with Resident#1's three and he admitted that this black, combination nylon zippered pack with Resident #1's medications, should be kept locked, at all times.
Review of facility policy and procedure on at 2:50 PM for Medication Storage provided by the Administrator dated indicated that to ensure the safety of all individuals, Premier will ensure that medications are appropriately stored ...All prescription medication will be kept in a locked enclosure.

During an observation on at 10 AM of the locked medication file cabinet, it was noted that there were three current residents (Resident #2, #3 and #4) with the following expired medications (all of which were kept/stored in the exact same location as Resident #2, #3 and #4's other current prescription medications) noted: For Resident #2, there was a Bingo pack of 5 500mg tablets ordered as: give one tablet twice daily as needed for with an expiration date of: and

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Resident #2 also has a prescription tube of Gel 1% ordered as: apply 2 grams to both sides of the three times a day as needed for with an expiration date of: ; neither of these medications have been used within the past month, per Staff B, CNA medication technician. For Resident # 3, there was a Bingo pack of 37 325mg tablets ordered as: give two tablets every six hours as needed for with an expiration date of: and Resident #3 also had a prescription tube of dental cream of 1.1% to use as directed at bedtime with an expiration date of: ; neither of these medications have been used within the past month, per Staff B, CNA medication technician. And, for Resident # 4, there were two full Bingo packs of 30 0.1mg tablets ordered as: give every eight hours as needed for greater than 170 for a diagnosis of: with an expiration date of: and respectively. It was noted that this medication had not been given---the resident had not had a reading greater than 170 during his facility stay, per Staff B, CNA medication technician. (see attached pictures)

An interview was conducted with both Staff A, Administrator and Staff B on at 10 AM regarding the medications and they both admitted that the medications were expired and should have been discarded.

Review of facility policy and procedure on at 2:55 PM for Medication Destruction provided by Staff A, Administrator, reviewed indicated that all medication, which has been dropped, refused at time of observation or discontinued, shall be disposed of appropriately. Medication should be disposed of as quickly as possible, but no less frequently than one time per month. Medication that needs to be disposed of is returned to the Pharmacy for disposal if is it is not a .

Class Level III

0200 - Emergency Environmental Control - 58A-5.036 FAC

Based on record review and interview, the facility failed to ensure create and implement Environment Emergency Control Plan (EECP) policy and procedures to ensure the facility can effectively and immediately activate, operate, and maintained the alternate power source and any fuel required. The facility also failed to ensure that all residents and /or guardians received a written notice of the facility EECP implementation.

The Findings Included:

On at approximately 1:00PM the facility EECP was requested and the policy and

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procedures were not attached. The facilities EECP was approved and there was no policy and procedures created that described how the facility would effectively and immediately activate, operate, and maintained the alternate power source and any fuel required. The Administrator stated he had and to check to see if the facility has any policy and procedures regarding the EECP. Further review revealed the facility's EECP was implemented on and the facility had not given any written notification of the EECP implementation the residents or their guardians. At this time the Administrator was provided an opportunity to locate the documentation.

During an interview with the Administrator and the Executive Director on at approximately 2:45PM, they acknowledged the findings and provided no additional documentation for review.

Class III

Z814 - Background Screening Clearinghouse - 435.12(2)(b-d), FS

Based on record review and interview, the facility failed to ensure all staff were registered and maintained in the Agency for Health Care Administration (AHCA) background screening clearinghouse within 10 days of hire or separation from the facility, for 4 of 7 sampled staff (Staff D, E, F, G).

The Findings Included:

On at approximately 1:30PM, the facility background screening clearinghouse roster was reviewed and was not consistent with the facility's current staffing schedule. The following employees were on the facility roster, but were not on the facility staff schedule:

a) Staff D's hire date was . . . . . and the end date was , there was no end date entered in the clearinghouse.
b) Staff E's hire date documented as . . . , at this time during an interview with the Administrator he stated Staff E was processed but never worked at the facility. There was no end date entered in the clearinghouse.
ac) Staff F's hire date was . . . . . , at this time the Administrator stated Staff F has never worked at this location, but works at another facility.
d) Staff G's hire date was . . . . . at this time during an interview with the Administrator he stated Staff G has not worked for the facility for a while, no end date was provided. There was no end date entered in the clearinghouse.

During an interview with the Administrator on . . . . . at approximately 2:40PM, he acknowledged

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the findings and provided additional documentation for review.

Unclassified

Z816 - Background Screening-Compliance Attestation - 408.809(2)(a-c); 59A-35.090(2)(d)-(3)

Based on record review and interview, the facility failed to ensure all staff signed and dated a Affidavit of Compliance to Background Screening requirements.

The Ingrid Included:

On at approximately 1:00PM, an employee record review was completed for Staff B and revealed, Staff B's whose hire date was and the most current Level II background screening was completed on . Further review revealed the employee file did not have a singed and dated Affidavit of Compliance to the background screening requirements. At this this time the Administrator was provided an opportunity to locate the documentation.

During an interview with the Administrator on at approximately 2:30PM, he acknowledged the findings and provided no documentation for review.

Unclassified