Agency for Health Care Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	AL11932515	A. BUILDING: _____ B. WING _____	07/17/2019

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
OAKVIEW TERRACE	7220 BAILLIE DRIVE NEW PORT RICHEY, FL 34653

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
A 000	Initial Comments A Complaint Investigation (Complaint Number: 2019008179) and an Extended Congregate Care and a Limited Nursing Services Monitoring Visit were conducted at Oakview Terrace Assisted Living Facility on . Deficiencies were identified at the time of survey.	A 000		
A 054 SS=D	58A-5.0185(5) FAC Medication - Records (5) MEDICATION RECORDS. (a) For residents who use a pill organizer managed in subsection (2), the facility must keep either the original labeled medication container; or a medication listing with the prescription number, the name and address of the issuing pharmacy, the health care provider's name, the resident's name, the date dispensed, the name and strength of the drug, and the directions for use. (b) The facility must maintain a daily medication observation record for each resident who receives assistance with self-administration of medications or medication administration. A medication observation record must be immediately updated each time the medication is offered or administered and include: 1. The name of the resident and any known [illegible] the resident may have; 2. The name of the resident's health care provider and the health care provider's telephone number; 3. The name, strength, and directions for use of each medication; and, 4. A chart for recording each time the medication is taken, any missed dosages, refusals to take medication as prescribed, or medication errors. (c) For medications that serve as chemical [illegible], the facility must, pursuant to section 429.41, F.S., maintain a record of the prescribing	A 054		

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A 054	Continued From page 1 physician's annual evaluation of the use of the medication. This Statute or Rule is not met as evidenced by: Based on record review and interview, the Facility failed to maintain Medication Observation Records (MORs) free from errors and failed to update MORs immediately when medications were offered to two Residents (# 5 and #6) of four sampled residents that required assistance with self-administration of medications. Findings Included: A review of MORs for Resident #5, conducted on , revealed that Resident #5's MORs had medications not documented as offered or given to the resident. Resident #5's prescribed medications 5mg, 40mg, and 500mg were not documented as given to the resident on at 08:00am and 05:00pm. Resident #5's prescribed testing ( ) was documented on the resident's MORs as twice every day and the order showed that the was ordered every day. A review of MORs for Resident #6, conducted on , revealed that Resident #6's MORs had medications not documented as offered or given to the resident. Resident #6's prescribed medications. Resident #6's prescribed medication 1mg was not documented as given to the resident on , , and at 08:00am, 12:00pm, and 05:00pm. Resident #6's prescribed medication 60mg was not documented as given to the resident on , , and at 08:00am. Resident #6's prescribed medication 20mg was	A 054		

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A 054	Continued From page 2 not documented as given to the resident on , , , and at 08:00am and 05:00pm. Resident #6's prescribed medication inject 5units was not documented as given to the resident on , , , , , and at 08:00pm. Resident #6's prescribed medication per before meals and at bedtime was not documented as given to the resident on (at 11:00am and 08:00pm), (at 11:00am), and , , , and (at 11:00am, 04:00pm, and 08:00pm). During an interview with Staff G (Licensed Practical Nurse), conducted on at 03:20pm, Staff G stated that Resident #6 went out of the Facility with family frequently and that "we provide medications for residents to take with them and the nurses must not have documented this". During an interview with the Administrator, conducted on at 04:30pm, the Administrator agreed that Residents #5 and #6 had prescribed medications that were not documented as offered or given to the residents. The Administrator verified the frequency error on Resident #5's MORs. Class III	A 054		
A 162 SS=D	58A-5.024(3) FAC Records - Resident (3) RESIDENT RECORDS. Resident records must be maintained on the premises and include: (a) Resident demographic data as follows: 1. Name; 2. ;	A 162		

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A 162	Continued From page 3 3. Race; 4. Date of birth; 5. Place of birth, if known; 6. Social security number; 7. Medicaid and/or Medicare number, or name of other health insurance ; 8. Name, address, and telephone number of next of kin, legal representative, or individual designated by the resident for notification in case of an emergency; and 9. Name, address, and telephone number of the health care provider and case manager, if applicable. (b) A copy of the Resident Health Assessment form, AHCA Form 1823 described in Rule 58A-5.0181, F.A.C. (c) Any orders for medications, nursing services, therapeutic diets, , or other services to be provided, supervised, or implemented by the facility that require a health care provider ' s order. (d) Documentation of a resident's refusal of a therapeutic diet pursuant to Rule 58A-5.020, F.A.C., if applicable. (e) The resident care record described in paragraph 58A-5.0182(1)(e), F.A.C. (f) A record that is initiated on admission. Information may be taken from AHCA Form 1823 or the resident's health assessment. Residents receiving assistance with the activities of daily living must have their recorded semi-annually. (g) For facilities that will have unlicensed staff assisting the resident with the self-administration of medication, a copy of the written informed consent described in Rule 58A-5.0181, F.A.C., if such consent is not included in the resident's contract. (h) For facilities that manage a pill organizer,	A 162		

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A 162	Continued From page 4 assist with self-administration of medications or administer medications for a resident, copies of the required medication records maintained pursuant to Rule 58A-5.0185, F.A.C. (i) A copy of the resident's contract with the facility, including any addendums to the contract as described in Rule 58A-5.025, F.A.C. (j) For a facility whose owner, administrator, staff, or representative thereof, serves as an attorney in fact for a resident, a copy of the monthly written statement of any transaction made on behalf of the resident as required in Section 429.27, F.S. (k) For any facility that maintains a separate trust fund to receive funds or other property belonging to or due a resident, a copy of the quarterly written statement of funds or other property disbursed as required in Section 429.27, F.S. (l) If the resident is an recipient, a copy of the Department of Children and Families form Alternate Care Certification for , ( ), CF-ES 1006, , which is hereby incorporated by reference and available for review at: http://www.flrules.org/Gateway/reference.asp?No =Ref-04004. The absence of this form will not be the basis for administrative action against a facility if the facility can demonstrate that it has made a good faith effort to obtain the required documentation from the Department of Children and Families. (m) Documentation of the of a health care surrogate, health care proxy, guardian, or the existence of a power of attorney, where applicable. (n) For hospice patients, the interdisciplinary care plan and other documentation that the resident is a hospice patient as required in Rule 58A-5.0181, F.A.C. (o) The resident ' s ,	A 162		

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A 162	Continued From page 5 DH Form 1896, if applicable. (p) For independent living residents who receive meals and occupy beds included within the licensed capacity of an assisted living facility, but who are not receiving any personal, limited nursing, or extended congregate care services, record keeping may be limited to the following at the discretion of the facility: 1. A log listing the names of residents participating in this arrangement; 2. The resident demographic data required in this paragraph; 3. The health assessment described in Rule 58A-5.0181, F.A.C.; 4. The resident's contract described in Rule 58A-5.025, F.A.C.; and 5. A health care provider's order for a therapeutic diet if such diet is prescribed and the resident participates in the meal plan offered by the facility. (q) Except for resident contracts, which must be retained for 5 years, all resident records must be retained for 2 years following the departure of a resident from the facility unless it is required by contract to retain the records for a longer period of time. Upon request, residents must be provided with a copy of their records upon departure from the facility. (r) Additional resident records requirements for facilities holding a limited mental health, extended congregate care, or limited nursing services license are provided in Rules 58A-5.029, 58A-5.030 and 58A-5.031, F.A.C., respectively. This Statute or Rule is not met as evidenced by: Based on record review and interview, the Facility failed to obtain a Resident Health Assessment form, Agency for Health Care Administration Form 1823 (1823) complete with all required data as described in Rule 58A-5.0181, Florida	A 162		

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A 162	Continued From page 6 Administrative Code for one Resident (#5) of three sampled residents. Findings Included: A record review for Resident #5, conducted on . . , revealed that Resident #5's 1823 was not dated and did not included the Examiner's title, address, or telephone number as required. During an interview with the Administrator, conducted on at 04:30pm, the Administrator agreed that Resident #5's 1823 did not include the date of the examination, the Examiner's title, address, and telephone number as required. Class III	A 162		