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
	AL11966496	A. BUILDING _____ B. WING _____	

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
WINDSOR OF LAKEWOOD RANCH (THE)	8220 NATURES WAY BRADENTON, FL 34202

(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 Assisted Living Facility A change of ownership (CHOW) state licensure survey was conducted on . The Windsor of Lakewood Ranch, assisted living facility, had deficiencies found at the time of the visit.	A 000		
A 050	58A-5.0185(1) FAC Medication - Self Administered Medications Medication Practices. Pursuant to Sections 429.255 and 429.256, F.S., and this rule, licensed facilities may assist with the self-administration or administration of medications to residents in a facility. A resident may not be compelled to take medications but may be counseled in accordance with this rule. (1) SELF ADMINISTERED MEDICATIONS. (a) Residents who are capable of self-administering their medications without assistance shall be encouraged and allowed to do so. (b) If facility staff note deviations which could reasonably be attributed to the improper self-administration of medication, staff shall consult with the resident concerning any problems the resident may be experiencing with the medications; the need to permit the facility to aid the resident through the use of a pill organizer, provide assistance with self-administration of medications, or administer medications if such services are offered by the facility. The facility shall contact the resident ' s health care provider when observable health care changes occur that may be attributed to the resident ' s medications. The facility shall document such contacts in the resident ' s	A 050		

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A 050	Continued From page 1 records. This Statute or Rule is not met as evidenced by: Based on interview, observation and record review the facility failed to complete the self-administration assessment for two of ten residents, Resident #2 and #5. By not completing the self-administration assessment, Resident #2 and #5 may not be able to correctly administer the medications needed, potentially leading to an adverse outcome for the residents. Findings include: Resident #2 was found to have medications at the bedside: ' ' ' ' ' (pill), numoisyn (pill), and l ( ). The resident states that she has certain medications that she takes herself and she also takes on her own. Record review for the resident revealed on the health assessment (AHCA form 1823) that the resident " needs assistance with self-administration of medications " . The form was dated l/ and signed by the facility ' s registered nurse (RN) on . An order dated on stating that the resident may take own 10 mg by mouth 5 times a day. There was no orders or information on the health assessment (AHCA form 1823) that the resident may self-administer numoisyn and l.Record review of the medication observation record(MOR) found that the facility marked the MOR that lotemax 0.5% one drop in both eyes daily and albuteraol 1 vial twice daily states as " self " . The MOR did not have and numoisyn not listed as the residents current medications. The resident notes on revealed that the resident " wants her pills at non-scheduled times " , but no other notes since this date. There was no record that the resident had the facility ' s " self-administration of medications review "	A 050		

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A 050	Continued From page 2 completed to be able to self-administer the numoisyn and and no orders from the physican stating that the resident was able to safely self-administer these medications. Interview with the registered nurse on at 10:02 am revealed the facility is doing the medications for Resident #2. There is not a self-assessment form in her chart, since the facility is assisting with the resident s medications. Resident #5 revealed during an interview on at approximately 11:30 am that the resident does not get assistance with medications. The resident stated that she does her own medications. Record review for Resident #5 revealed that the resident did not have a self-administration form, per interview with the RN it was in the " back of her chart " . The facility form for self-administration of medications was found to be incomplete. Per the health assessment (AHCA form 1823) it states that the resident needs help with taking medications, but the type of assistance is left blank. It is unknown of the resident is able to safely give her own medications. The facility places the residents at risk by not properly assessing for self-administration of medications. The resident may not take the medications correctly leading to adverse effects of the medications taken improperly.	A 050		
A 055	58A-5.0185(6) FAC Medication - Storage and Disposal (6) MEDICATION STORAGE AND DISPOSAL. (a) In order to accommodate the needs and preferences of residents and to encourage residents to remain as independent as possible,	A 055		

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A 055	Continued From page 3	A 055		

residents may keep their medications, both prescription and over-the-counter, in their possession both on or off the facility premises; or in their [illegible] or apartments, which must be kept locked when residents are absent, unless the medication is in a secure place within the or apartments or in some other secure place which is out of sight of other residents. However, both prescription and over-the-counter medications for residents shall be centrally stored if:

1. The facility administers the medication;
2. The resident requests central storage. The facility shall maintain a list of all medications being stored pursuant to such a request;
3. The medication is determined and documented by the health care provider to be hazardous if kept in the personal possession of the person for whom it is prescribed;
4. The resident fails to maintain the medication in a safe manner as described in this paragraph;
5. The facility determines that because of physical arrangements and the conditions or habits of residents, the personal possession of medication by a resident poses a safety hazard to other residents; or
6. The facility ' s rules and regulations require central storage of medication and that policy has been provided to the resident prior to admission as required under Rule 58A-5.0181, F.A.C.

(b) Centrally stored medications must be:

1. Kept in a locked cabinet, locked cart, or other locked storage receptacle, [illegible], or area at all times;
2. Located in an area free of dampness and abnormal temperature, except that a medication requiring refrigeration shall be refrigerated. Refrigerated medications shall be secured by being kept in a locked container within the refrigerator, by keeping the refrigerator locked, or

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A 055	Continued From page 4	A 055		

by keeping the area in which refrigerator is located locked;
3. Accessible to staff responsible for filling pill-organizers, assisting with self-administration, or administering medication. Such staff must have ready access to keys to the medication storage areas at all times; and
4. Kept separately from the medications of other residents and properly closed or sealed.
(c) Medication which has been discontinued but which has not expired shall be returned to the resident or the resident ' s representative, as appropriate, or may be centrally stored by the facility for future resident use by the resident at the resident ' s request. If centrally stored by the facility, it shall be stored separately from medication in current use, and the area in which it is stored shall be marked " discontinued medication. " Such medication may be reused if re-prescribed by the resident ' s health care provider.
(d) When a resident ' s stay in the facility has ended, the administrator shall return all medications to the resident, the resident ' s family, or the resident ' s guardian unless otherwise prohibited by law. If, after notification and waiting at least 15 days, the resident ' s medications are still at the facility, the medications shall be considered abandoned and may disposed of in accordance with paragraph (e).
(e) Medications which have been abandoned or which have expired must be disposed of within 30 days of being determined abandoned or expired and disposition shall be documented in the resident ' s record. The medication may be taken to a pharmacist for disposal or may be destroyed by the administrator or designee with one witness.
(f) Facilities that hold a Special-ALF permit issued

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A 055	Continued From page 5 by the Board of Pharmacy may return dispensed medicinal drugs to the dispensing pharmacy pursuant to Rule 64B16-28.870, F.A.C. This Statute or Rule is not met as evidenced by: Based on observation, interview and record review the facility failed to dispose of expired medications that had expired based on the manufactured expiration date in use for one of ten sampled residents, Resident #6. Having medications that are no longer in use could lead to the resident receiving the incorrect medications, leading to potentially adverse outcomes. Findings include: Observation of the medication carts on found , Balance eye drops, opened for use, with manufacturer expiration on the box for . . . . . The eye drops were for Resident #6. Record review of the Medication Observation Recorded (MOR) found that resident #6 had a current order for , Balance eye drops to be used as needed. Per the MOR, the drops are to be used as followed: " one drop both eyes twice daily as needed for dry eye irritation " . The MOR states to use the resident supply first. Interview with the registered nurse (RN) at 9:15 am on revealed that a local pharmacy comes monthly to do random monthly audits. The facility will also look at the carts as needed. The RN states that she tries to go through them weekly and a weekend nurse will also go through the carts periodically. The weekend nurse will also help with orders when needed to get medications discontinued that have not been used in a while. Leaving expired medication and out of date medication in the medication carts for use by the residents could lead to an adverse outcome if used by the resident.	A 055		

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A 055	Continued From page 6	A 055		

AHCA
FLORIDA AGENCY FOR HEALTH CARE ADMINISTRATION

RICK SCOTT
GOVERNOR

Better Health Care for all Floridians

ELIZABETH DUDEK
SECRETARY

, 2013

Administrator
Windsor of Lakewood Ranch (The)
8220 Natures Way
Bradenton, FL 34202

Dear Administrator:

This letter reports the findings of a change of ownership (CHOW) state licensure survey that was conducted on ', 2012, by a representative of this office.

Attached is the provider's copy of the State (3020) Form, which indicates the deficiencies that were identified on the day of the visit. Section 408.811(4), Florida Statutes, requires that you correct these deficiencies within thirty days of the date of this letter unless the Agency has approved another timeframe. Staff from this office will conduct a review to verify that the necessary corrections are in place to correct the deficiencies identified on your survey.

The Quality Assurance Questionnaire has long been employed to obtain your feedback following survey activity. This form has been placed on the Agency's website at http://ahca.myflorida.com/Publications/Forms.shtml as a first step in providing a web-based interactive consumer satisfaction survey system. You may access the questionnaire through the link under **Health Facilities and Providers** on this page. Your feedback is encouraged and valued, as our goal is to ensure the professional and consistent application of the survey process.

Thank you for the assistance provided to the surveyor. Should you have any questions please call **Paul Brown**, HFES, at 727-552-2000.

Sincerely,

for Patricia Reid Caufman
Field Office Manager

PRC/kpr

Enclosure: State Form 3020

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