

DEPARTMENT OF HEALTH AND HUMAN SERVICES  
CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 03/21/2025  
FORM APPROVED  
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>105508</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>02/19/2025</b>
NAME OF PROVIDER OR SUPPLIER  <b>EAST RIDGE RETIREMENT VILLAGE INC</b>			STREET ADDRESS, CITY, STATE, ZIP CODE <b>19228 SW 87TH AVE CUTLER BAY, FL 33157</b>	
(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) COMPLETION DATE
F 000	INITIAL COMMENTS  A recertification survey was conducted at East Ridge Retirement Village on _____ through _____. The facility was not in compliance with 42 CFR 483, Requirements for Long Term Care Facilities.  The following is a description of the non-compliance.	F 000		
F 755 SS=D	Pharmacy Svcs/Procedures/Pharmacist/Records CFR(s): 483.45(a)(b)(1)-(3)  §483.45 Pharmacy Services The facility must provide routine and emergency drugs and biologicals to its residents, or obtain them under an agreement described in §483.70(f). The facility may permit unlicensed personnel to administer drugs if State law permits, but only under the general supervision of a licensed nurse.  §483.45(a) Procedures. A facility must provide pharmaceutical services (including procedures that assure the accurate acquiring, receiving, dispensing, and administering of all drugs and biologicals) to meet the needs of each resident.  §483.45(b) Service Consultation. The facility must employ or obtain the services of a licensed pharmacist who-  §483.45(b)(1) Provides consultation on all aspects of the provision of pharmacy services in the facility.  §483.45(b)(2) Establishes a system of records of receipt and disposition of all controlled drugs in sufficient detail to enable an accurate	F 755		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

Electronically Signed

/2025

Any deficiency statement ending with an asterisk (\*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

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F 755	<p>Continued From page 1 reconciliation; and</p> <p>§483.45(b)(3) Determines that drug records are in order and that an account of all controlled drugs is maintained and periodically reconciled. This REQUIREMENT is not met as evidenced by:</p> <p>Based on observation interview and record review the facility failed to follow pharmaceutical procedures as per facility policy. As evidenced by during observations of one of two Medication storage rooms reviewed, the lock box in the medication refrigerator was noted unlocked, and Resident #180's medication was being given in tablet form and the order documented capsule. There were 74 residents residing at the facility at the time of the survey.</p> <p>The findings included:</p> <p>On at 10:00 AM during observation of the medication storage room on the facility's second floor with the Assistant Director of Nursing (ADON); the lock box in the medication refrigerator was left unlocked. The lock box contained an emergency kit with 5 vials of and one (1) vial of The ADON, attempted to close the lock box with several keys available and was unsuccessful unable to close the lockbox.</p> <p>Interview on at 10:00 AM, the ADON stated: "The lock for the lock box in the refrigerator is warped (unable to be locked), I will need to put a work order in for it to be repaired, this issue was not reported to me prior to today."</p> <p>On at 9:20 AM during medication administration observation for Resident #180 with</p>	F 755			

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F 755	<p>Continued From page 2</p> <p>Licensed Practical Nurse (LPN), (Staff B) the Electronic Medication Administration Record (EMAR) documented 7.5 Milligram (MG), give 1 capsule twice a day for . . . Review of Resident #180's Bingo Card for . . . 7.5 MG documented 7.5 MG, give 1 tablet twice a day for , . . .</p> <p>Interview on . . . at 10:32 AM regarding the 7.5 MG tablet, Staff B, LPN stated: "I will call pharmacy to verify the order, if the order should be capsule or tablet. The resident has been administered tablets since twice a day."</p> <p>Interview on . . . at 10:32 AM; the facility's Consultant Pharmacist stated: "The 7.5 MG tablet can be given to the resident with physician authorization because it is the same dose, and we can get an order to correct the EMAR, chances are the documentation is human error."</p> <p>Review of the facility's policy and procedure titled "Storage of Medications" revised . . . states: The facility shall store all drugs and biologicals in a safe, secure, and orderly manner. Policy Interpretation and Implementation 7. Compartments (including, but not limited to, drawers, cabinets, rooms, refrigerators, carts, and boxes.) containing drugs and biologicals shall be locked when not in use, and trays or carts used to transport such items shall not be left unattended if open or otherwise potentially available to others.</p> <p>Review of the facility policy and procedure titled "Administering Medications" revision date . . . states: Medications shall be</p>	F 755			

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F 755	Continued From page 3 administered in a safe and timely manner, and as prescribed. Policy Interpretation and Implementation 3. Medications must be administered in accordance with the orders, including any required time frame. 7. The individual administering the medication must check the label THREE (3) times to verify the right resident, right medication, right dosage, right time and right route of administration before giving the medication.	F 755			
F 761 SS=D	Label/Store Drugs and Biologicals CFR(s): 483.45(g)(h)(1)(2)  §483.45(g) Labeling of Drugs and Biologicals Drugs and biologicals used in the facility must be labeled in accordance with currently accepted professional principles, and include the appropriate accessory and cautionary instructions, and the expiration date when applicable.  §483.45(h) Storage of Drugs and Biologicals  §483.45(h)(1) In accordance with State and Federal laws, the facility must store all drugs and biologicals in locked compartments under proper temperature controls, and permit only authorized personnel to have access to the keys.  §483.45(h)(2) The facility must provide separately locked, permanently affixed compartments for storage of controlled drugs listed in Schedule II of the Comprehensive Drug Prevention and Control Act of 1976 and other drugs subject to _____, except when the facility uses single unit package drug distribution systems in which the quantity stored is minimal and a missing dose can	F 761			

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F 761	<p>Continued From page 4</p> <p>be readily detected.</p> <p>This REQUIREMENT is not met as evidenced by:</p> <p>Based on observations interviews and record review, the facility failed to provide appropriate storage of medications on the medication cart for one (1) of three (3) medication carts observed. As evidenced by during observation of one out of three (3) medication carts loose pills were noted in different compartments of the medication drawer and in one out of two medication rooms</p> <p>Lock Box was left unlocked. There were 74 residents residing at the facility at the time of the survey.</p> <p>The findings included:</p> <p>On _____ at 9:00 AM during observation of medication Cart # 3400 with Registered Nurse (RN), (Staff C), three (3) round white pills and several pieces of empty medication packaging were found in the second drawer of the medication cart.</p> <p>Interview on _____ at 9:05 AM Registered Nurse (RN), (Staff C) revealed she would don gloves, pick up the pills, try to identify the pills and dispose them in the drug buster in the medication cart. Furthermore, the medication carts are cleaned daily on every shift.</p> <p>On _____ at 10:00 AM, observation of the medication storage room on the facility's second floor with the Assistant Director of Nursing (ADON) (Staff A). The _____ lock box in the medication refrigerator noted unlocked. The ADON, Staff A attempted to close the lock box with several keys available and was unable to close the lockbox. The lockbox contained an</p>	F 761		

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F 761	<p>Continued From page 5</p> <p>emergency kit with 5 vials of _____ and one (1) vial of _____.</p> <p>Interview on _____ at 10:00 AM ADON, Staff A stated: "The lock for the _____ lockbox in the refrigerator is warped (unable to be locked), I will need to put a work order in for it to be repaired, this issue was not reported to me prior to today."</p> <p>Review of the facility policy and procedures titled "Storage of Medications" revised _____ states: The facility shall store all drugs and biologicals in a safe, secure, and orderly manner. Policy Interpretation and Implementation</p> <ol style="list-style-type: none"> <li>1. Drugs and biologicals shall be stored in the packaging, containers or other dispensing systems in which they are received. Only the issuing pharmacy is authorized to transfer medications between containers.</li> <li>2. The nursing staff shall be responsible for maintaining medication storage and preparation areas in a clean, safe, and sanitary manner.</li> </ol>	F 761			

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N 000	<p><b>INITIAL COMMENTS</b></p> <p>A re-licensure survey was conducted at East Ridge Retirement Village on through . Deficiencies were identified at the time of the survey.</p> <p>The following is a description of the non-compliance.</p>	N 000		
N 090 SS=D	<p>59A-4.112(1), FAC Pharmacy Policies and Procedures</p> <p>(1) The nursing home licensee must adopt procedures that assure the accurate acquiring, receiving, dispensing, and administering of all drugs and biologicals, to meet the needs of each resident.</p> <p>This Statute or Rule is not met as evidenced by: Based on observation interview and record review the facility failed to follow pharmaceutical procedures as per facility policy. As evidenced by during observations of one of two Medication storage rooms reviewed, the lock box in the medication refrigerator was noted unlocked, and Resident #180's medication was being given in tablet form and the order documented capsule. There were 74 residents residing at the facility at the time of the survey.</p> <p>The findings included:</p> <p>On at 10:00 AM during observation of the medication storage room on the facility's second floor with the Assistant Director of Nursing (ADON); the lock box in the medication refrigerator was left unlocked. The lock box contained an emergency kit with 5 vials of and one (1) vial of The ADON, attempted</p>	N 090		

AHCA Form 3020-0001 LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE  Electronically Signed	TITLE	(X8) DATE  /25
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N 090	<p>Continued From page 1</p> <p>to close the lock box with several keys available and was unsuccessful unable to close the lockbox.</p> <p>Interview on _____ at 10:00 AM, the ADON stated: "The lock for the _____ lock box in the refrigerator is warped (unable to be locked)...This issue was not reported to me prior to today."</p> <p>On _____ at 9:20 AM during medication administration observation for Resident #180 with Licensed Practical Nurse (LPN), (Staff B) the Electronic Medication Administration Record (EMAR) documented _____ 7.5 Milligram (MG), give 1 capsule twice a day for , . . . Review of Resident #180's Bingo Card for _____ 7.5 MG documented _____ 7.5 MG, give 1 tablet twice a day for , . . .</p> <p>Interview on _____ at 10:32 AM regarding the _____ 7.5 MG tablet, Staff B, LPN stated: "I will call pharmacy to verify the order, if the order should be capsule or tablet. The resident has been administered tablets since _____ twice a day."</p> <p>Interview on _____ at 10:32 AM; the facility's Consultant Pharmacist stated: "The 7.5 MG tablet can be given to the resident with physician authorization because it is the same dose, and we can get an order to correct the EMAR, chances are the documentation is human error."</p> <p>Review of the facility's policy and procedure titled "Storage of Medications" revised _____ states: The facility shall store all drugs and biologicals in a safe, secure, and orderly manner. Policy Interpretation and Implementation 7. Compartments (including, but not limited to,</p>	N 090		

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N 090	<p>Continued From page 2</p> <p>drawers, cabinets, rooms, refrigerators, carts, and boxes.) containing drugs and biologicals shall be locked when not in use, and trays or carts used to transport such items shall not be left unattended if open or otherwise potentially available to others.</p> <p>Review of the facility policy and procedure titled "Administering Medications" revision date states: Medications shall be administered in a safe and timely manner, and as prescribed.</p> <p>Policy Interpretation and Implementation 3. Medications must be administered in accordance with the orders, including any required time frame.</p> <p>7. The individual administering the medication must check the label THREE (3) times to verify the right resident, right medication, right dosage, right time and right route of administration before giving the medication.</p> <p>Class III</p>	N 090		
N 095 SS=D	<p>59A-4.112(6), FAC Drug Storage</p> <p>(6) Prescription drugs and non-prescription medications requiring refrigeration must be stored in a refrigerator. The refrigerator must be locked or located within a locked medication room and accessible only to licensed staff.</p> <p>This Statute or Rule is not met as evidenced by: Based on observations interviews and record review, the facility failed to provide appropriate storage of medications on the medication cart for one (1) of three (3) medication carts observed. As evidenced by during observation of one out of</p>	N 095		

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N 095	<p>Continued From page 3</p> <p>three (3) medication carts loose pills were noted in different compartments of the medication drawer and in one out of two medication rooms the lock box was left unlocked. There were 74 residents residing at the facility at the time of the survey.</p> <p>The findings included:</p> <p>On at 9:00 AM during observation of medication Cart # 3400 with Registered Nurse (RN), (Staff C), three (3) round white pills and several pieces of empty medication packaging were found in the second drawer of the medication cart.</p> <p>Interview on at 9:05 AM; Staff C, RN revealed the medication carts are cleaned daily on every shift.</p> <p>On at 10:00 AM, during observation of the medication storage room on the facility's second floor with the Assistant Director of Nursing (ADON) the lock box in the refrigerator was noted unlocked. The lockbox contained an emergency kit with 5 vials of and one (1) vial of . The ADON attempted to close the lock box with several keys available and was unsuccessful.</p> <p>Interview on at 10:00 AM, the ADON stated: "The lock for the lockbox in the refrigerator is warped (unable to be locked) ...This issue was not reported to me prior to today."</p> <p>Review of the facility policy and procedures titled "Storage of Medications" revised , states: The facility shall store all drugs and biologicals in a safe, secure, and orderly manner.</p>	N 095		

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N 095	<p>Continued From page 4</p> <p>Policy Interpretation and Implementation</p> <p>1. Drugs and biologicals shall be stored in the packaging, containers or other dispensing systems in which they are received. Only the issuing pharmacy is authorized to transfer medications between containers.</p> <p>2. The nursing staff shall be responsible for maintaining medication storage and preparation areas in a clean, safe, and sanitary manner.</p>	N 095		

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STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>105508</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>02/19/2025</b>
NAME OF PROVIDER OR SUPPLIER  <b>EAST RIDGE RETIREMENT VILLAGE INC</b>			STREET ADDRESS, CITY, STATE, ZIP CODE <b>19225 SW 87TH AVE CUTLER BAY, FL 33157</b>	
(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) COMPLETION DATE
F 755	<p>Continued From page 1 reconciliation; and</p> <p>§483.45(b)(3) Determines that drug records are in order and that an account of all controlled drugs is maintained and periodically reconciled. This REQUIREMENT is not met as evidenced by:</p> <p>Based on observation interview and record review the facility failed to follow pharmaceutical procedures as per facility policy. As evidenced by during observations of one of two medication storage rooms reviewed, the lock box in the medication refrigerator was noted unlocked, and Resident #180's medication was being given in tablet form and the order documented capsule. There were 74 residents residing at the facility at the time of the survey.</p> <p>The findings included:</p> <p>On at 10:00 AM during observation of the medication storage room on the facility's second floor with the Assistant Director of Nursing (ADON); the lock box in the medication refrigerator was left unlocked. The lock box contained an emergency kit with 5 vials of and one (1) vial of The ADON, attempted to close the lock box with several keys available and was unsuccessful unable to close the lockbox.</p> <p>Interview on at 10:00 AM, the ADON stated: "The lock for the lock box in the refrigerator is warped (unable to be locked), I will need to put a work order in for it to be repaired, this issue was not reported to me prior to today."</p> <p>On at 9:20 AM during medication administration observation for Resident #180 with</p>	F 755	<p>DISCLAIMER STATEMENT: Preparation and/or execution of this plan of correction in general, or this corrective action in , does not constitute an admission or agreement by this facility of the facts alleged or conclusions set forth in this statement of deficiencies. The plan of correction and specific corrective actions are prepared and/or executed in compliance with state and federal laws. This plan of correction constitutes a written allegation of substantial compliance with Federal Medicare and Medicaid requirements.</p> <p>1. On , the lock box was repaired. On , the lock box was replaced with a new lock box. On , the physician ARNP was contacted, and order was revised; medication was received matching revised order for Resident #180 on the same day.</p> <p>2. All residents have the potential to be affected by this deficient practice. Facility conducted an audit of all lock boxes to ensure all lock boxes were working correctly and address, if needed. Facility conducted an audit of all orders to</p>	

DEPARTMENT OF HEALTH AND HUMAN SERVICES  
CENTERS FOR MEDICARE & MEDICAID SERVICES

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F 755	<p>Continued From page 2</p> <p>Licensed Practical Nurse (LPN), (Staff B) the Electronic Medication Administration Record (EMAR) documented 7.5 Milligram (MG), give 1 capsule twice a day for . . . Review of Resident #180's Bingo Card for . . . 7.5 MG documented 7.5 MG, give 1 tablet twice a day for , . . .</p> <p>Interview on . . . at 10:32 AM regarding the 7.5 MG tablet, Staff B, LPN stated: "I will call pharmacy to verify the order, if the order should be capsule or tablet. The resident has been administered tablets since twice a day."</p> <p>Interview on . . . at 10:32 AM; the facility's Consultant Pharmacist stated: "The 7.5 MG tablet can be given to the resident with physician authorization because it is the same dose, and we can get an order to correct the EMAR, chances are the documentation is human error."</p> <p>Review of the facility's policy and procedure titled "Storage of Medications" revised . . . states: The facility shall store all drugs and biologicals in a safe, secure, and orderly manner. Policy Interpretation and Implementation</p> <p>7. Compartments (including, but not limited to, drawers, cabinets, rooms, refrigerators, carts, and boxes.) containing drugs and biologicals shall be locked when not in use, and trays or carts used to transport such items shall not be left unattended if open or otherwise potentially available to others.</p> <p>Review of the facility policy and procedure titled "Administering Medications" revision date . . . states: Medications shall be</p>	F 755	<p>ensure physician order matched the type of medication provided by the pharmacy.</p> <p>3. The Director of Nursing, or designee(s) will educate all staff on Pharmacy Services, Procedures, Pharmacist, Records CFR(s): 483.45(a)(b)(1)-(3), 59A-4.112(1), FAC Pharmacy Policies and Procedures and facility's Storage of Medications and Administering Medications policies and procedures.</p> <p>4. The Nurses will conduct medication cart and lock box check daily. The Director of Nursing and/or designee will conduct a weekly medication cart and medication room quality review. The findings will be reported to the Quality Assurance Process Improvement (QAPI) committee monthly and then quarterly once substantial compliance has been achieved.</p>		

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NAME OF PROVIDER OR SUPPLIER  <b>EAST RIDGE RETIREMENT VILLAGE INC</b>			STREET ADDRESS, CITY, STATE, ZIP CODE <b>19228 SW 87TH AVE CUTLER BAY, FL 33157</b>		
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F 755	Continued From page 3 administered in a safe and timely manner, and as prescribed. Policy Interpretation and Implementation 3. Medications must be administered in accordance with the orders, including any required time frame. 7. The individual administering the medication must check the label THREE (3) times to verify the right resident, right medication, right dosage, right time and right route of administration before giving the medication.	F 755			
F 761 SS=D	Label/Store Drugs and Biologicals CFR(s): 483.45(g)(h)(1)(2)  §483.45(g) Labeling of Drugs and Biologicals Drugs and biologicals used in the facility must be labeled in accordance with currently accepted professional principles, and include the appropriate accessory and cautionary instructions, and the expiration date when applicable.  §483.45(h) Storage of Drugs and Biologicals  §483.45(h)(1) In accordance with State and Federal laws, the facility must store all drugs and biologicals in locked compartments under proper temperature controls, and permit only authorized personnel to have access to the keys.  §483.45(h)(2) The facility must provide separately locked, permanently affixed compartments for storage of controlled drugs listed in Schedule II of the Comprehensive Drug Prevention and Control Act of 1976 and other drugs subject to _____, except when the facility uses single unit package drug distribution systems in which the quantity stored is minimal and a missing dose can	F 761			

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F 761	<p>Continued From page 4</p> <p>be readily detected.</p> <p>This REQUIREMENT is not met as evidenced by:</p> <p>Based on observations interviews and record review, the facility failed to provide appropriate storage of medications on the medication cart for one (1) of three (3) medication carts observed. As evidenced by during observation of one out of three (3) medication carts loose pills were noted in different compartments of the medication drawer and in one out of two medication rooms</p> <p>Lock Box was left unlocked. There were 74 residents residing at the facility at the time of the survey.</p> <p>The findings included:</p> <p>On _____ at 9:00 AM during observation of medication Cart # 3400 with Registered Nurse (RN), (Staff C), three (3) round white pills and several pieces of empty medication packaging were found in the second drawer of the medication cart.</p> <p>Interview on _____ at 9:05 AM Registered Nurse (RN), (Staff C) revealed she would don gloves, pick up the pills, try to identify the pills and dispose them in the drug buster in the medication cart. Furthermore, the medication carts are cleaned daily on every shift.</p> <p>On _____ at 10:00 AM, observation of the medication storage room on the facility's second floor with the Assistant Director of Nursing (ADON) (Staff A). The _____ lock box in the medication refrigerator noted unlocked. The ADON, Staff A attempted to close the lock box with several keys available and was unable to close the lockbox. The lockbox contained an</p>	F 761	<p>DISCLAIMER STATEMENT: Preparation and/or execution of this plan of correction in general, or this corrective action in _____, does not constitute an admission or agreement by this facility of the facts alleged or conclusions set forth in this statement of deficiencies. The plan of correction and specific corrective actions are prepared and/or executed in compliance with state and federal laws. This plan of correction constitutes a written allegation of substantial compliance with Federal Medicare and Medicaid requirements.</p> <p>1. On _____, Staff C immediately discarded the 3 round white pills and empty medication packaging found in the second drawer of Medication Cart #3400. Staff C and ADON immediately deep clean Medication Cart #3400. On _____, the _____ lock box was repaired. On _____, the _____ lock box was replaced with a new _____ lock box.</p> <p>2. All residents have the potential to be affected by this deficient practice. Facility conducted an audit of all medication carts to ensure cleanliness of all medication carts. Facility conducted an audit of all _____ lock boxes to ensure all lock boxes were working correctly and address, if needed.</p>	

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F 761	<p>Continued From page 5</p> <p>emergency kit with 5 vials of _____ and one (1) vial of _____</p> <p>Interview on _____ at 10:00 AM ADON, Staff A stated: "The lock for the _____ lockbox in the refrigerator is warped (unable to be locked), I will need to put a work order in for it to be repaired, this issue was not reported to me prior to today."</p> <p>Review of the facility policy and procedures titled "Storage of Medications" revised _____ states: The facility shall store all drugs and biologicals in a safe, secure, and orderly manner. Policy Interpretation and Implementation</p> <p>1. Drugs and biologicals shall be stored in the packaging, containers or other dispensing systems in which they are received. Only the issuing pharmacy is authorized to transfer medications between containers.</p> <p>2. The nursing staff shall be responsible for maintaining medication storage and preparation areas in a clean, safe, and sanitary manner.</p>	F 761	<p>3. The Director of Nursing, or designee(s) will educate all staff on Label, Store Drugs and Biologicals CFR(s): 483.45(g)(h)(1) (2), 59A-4.112(6), FAC Drug Storage and facility's Storage of Medications and Administering Medications policies and procedures.</p> <p>4. The Nurses will conduct medication cart and _____ lock box check daily. The Director of Nursing and/or designee will conduct a weekly medication cart and medication room quality review. The findings will be reported to the Quality Assurance Process Improvement (QAPI) committee monthly and then quarterly once substantial compliance has been achieved.</p>	

Agency for Health Care Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>111358</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>02/19/2025</b>
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NAME OF PROVIDER OR SUPPLIER  
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STREET ADDRESS, CITY, STATE, ZIP CODE  
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N 000

INITIAL COMMENTS

A re-licensure survey was conducted at East Ridge Retirement Village on through . Deficiencies were identified at the time of the survey.

The following is a description of the non-compliance.

N 000

N 090  
SS=D

59A-4.112(1), FAC Pharmacy Policies and Procedures

(1) The nursing home licensee must adopt procedures that assure the accurate acquiring, receiving, dispensing, and administering of all drugs and biologicals, to meet the needs of each resident.

This Statute or Rule is not met as evidenced by: Based on observation interview and record review the facility failed to follow pharmaceutical procedures as per facility policy. As evidenced by during observations of one of two Medication storage rooms reviewed, the lock box in the medication refrigerator was noted unlocked, and Resident #180's medication was being given in tablet form and the order documented capsule. There were 74 residents residing at the facility at the time of the survey.

The findings included:

On at 10:00 AM during observation of the medication storage room on the facility's second floor with the Assistant Director of Nursing (ADON); the lock box in the medication refrigerator was left unlocked. The lock box contained an emergency kit with 5 vials of and one (1) vial of The ADON, attempted

N 090

DISCLAIMER STATEMENT: Preparation and/or execution of this plan of correction in general, or this corrective action in , does not constitute an admission or agreement by this facility of the facts alleged or conclusions set forth in this statement of deficiencies. The plan of correction and specific corrective actions are prepared and/or executed in compliance with state and federal laws. This plan of correction constitutes a written allegation of substantial compliance with Federal Medicare and Medicaid requirements.

1. On , the lock box was repaired. On , the lock box was replaced with a new lock box. On

AHCA Form 3020-0001

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X8) DATE

Electronically Signed

/25

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N 090	<p>Continued From page 1</p> <p>to close the lock box with several keys available and was unsuccessful unable to close the lockbox.</p> <p>Interview on _____ at 10:00 AM, the ADON stated: "The lock for the _____ lock box in the refrigerator is warped (unable to be locked)...This issue was not reported to me prior to today."</p> <p>On _____ at 9:20 AM during medication administration observation for Resident #180 with Licensed Practical Nurse (LPN), (Staff B) the Electronic Medication Administration Record (EMAR) documented _____ 7.5 Milligram (MG), give 1 capsule twice a day for _____ Review of Resident #180's Bingo Card for _____ 7.5 MG documented _____ 7.5 MG, give 1 tablet twice a day for _____</p> <p>Interview on _____ at 10:32 AM regarding the 7.5 MG tablet, Staff B, LPN stated: "I will call pharmacy to verify the order, if the order should be capsule or tablet. The resident has been administered tablets since _____ twice a day."</p> <p>Interview on _____ at 10:32 AM; the facility's Consultant Pharmacist stated: "The 7.5 MG tablet can be given to the resident with physician authorization because it is the same dose, and we can get an order to correct the EMAR, chances are the documentation is human error."</p> <p>Review of the facility's policy and procedure titled "Storage of Medications" revised _____ states: The facility shall store all drugs and biologicals in a safe, secure, and orderly manner. Policy Interpretation and Implementation</p> <p>7. Compartments (including, but not limited to,</p>	N 090	<p>17, 2025, the physician ARNP was contacted, and order was revised; medication was received matching revised order for Resident #180 on the same day.</p> <p>2. All residents have the potential to be affected by this deficient practice. Facility conducted an audit of all _____ lock boxes to ensure all lock boxes were working correctly and address, if needed. Facility conducted an audit of all orders to ensure physician order matched the type of medication provided by the pharmacy.</p> <p>3. The Director of Nursing, or designee(s) will educate all staff on Pharmacy Services, Procedures, Pharmacist, Records CFR(s): 483.45(a)(b)(1)-(3), 59A-4.112(1), FAC Pharmacy Policies and Procedures and facility's Storage of Medications and Administering Medications policies and procedures.</p> <p>4. The Nurses will conduct medication cart and _____ lock box check daily. The Director of Nursing and/or designee will conduct a weekly medication cart and medication room quality review. The findings will be reported to the Quality Assurance Process Improvement (QAPI) committee monthly and then quarterly once substantial compliance has been achieved.</p>	
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N 090	<p>Continued From page 2</p> <p>drawers, cabinets, rooms, refrigerators, carts, and boxes.) containing drugs and biologicals shall be locked when not in use, and trays or carts used to transport such items shall not be left unattended if open or otherwise potentially available to others.</p> <p>Review of the facility policy and procedure titled "Administering Medications" revision date states: Medications shall be administered in a safe and timely manner, and as prescribed.</p> <p>Policy Interpretation and Implementation 3. Medications must be administered in accordance with the orders, including any required time frame.</p> <p>7. The individual administering the medication must check the label THREE (3) times to verify the right resident, right medication, right dosage, right time and right route of administration before giving the medication.</p> <p>Class III</p>	N 090		
N 095 SS=D	<p>59A-4.112(6), FAC Drug Storage</p> <p>(6) Prescription drugs and non-prescription medications requiring refrigeration must be stored in a refrigerator. The refrigerator must be locked or located within a locked medication room and accessible only to licensed staff.</p> <p>This Statute or Rule is not met as evidenced by: Based on observations interviews and record review, the facility failed to provide appropriate storage of medications on the medication cart for one (1) of three (3) medication carts observed. As evidenced by during observation of one out of</p>	N 095	<p>DISCLAIMER STATEMENT: Preparation and/or execution of this plan of correction in general, or this corrective action in _____, does not constitute an admission or agreement by this facility of</p>	

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N 095

Continued From page 3

three (3) medication carts loose pills were noted in different compartments of the medication drawer and in one out of two medication rooms the lock box was left unlocked. There were 74 residents residing at the facility at the time of the survey.

The findings included:

On at 9:00 AM during observation of medication Cart # 3400 with Registered Nurse (RN), (Staff C), three (3) round white pills and several pieces of empty medication packaging were found in the second drawer of the medication cart.

Interview on at 9:05 AM; Staff C, RN revealed the medication carts are cleaned daily on every shift.

On at 10:00 AM, during observation of the medication storage room on the facility's second floor with the Assistant Director of Nursing (ADON) the lock box in the refrigerator was noted unlocked. The lockbox contained an emergency kit with 5 vials of and one (1) vial of . The ADON attempted to close the lock box with several keys available and was unsuccessful.

Interview on at 10:00 AM, the ADON stated: "The lock for the lockbox in the refrigerator is warped (unable to be locked) ...This issue was not reported to me prior to today."

Review of the facility policy and procedures titled "Storage of Medications" revised , states: The facility shall store all drugs and biologicals in a safe, secure, and orderly manner.

N 095

the facts alleged or conclusions set forth in this statement of deficiencies. The plan of correction and specific corrective actions are prepared and/or executed in compliance with state and federal laws. This plan of correction constitutes a written allegation of substantial compliance with Federal Medicare and Medicaid requirements.

- On , Staff C immediately discarded the 3 round white pills and empty medication packaging found in the second drawer of Medication Cart #3400. Staff C and ADON immediately deep clean Medication Cart #3400. On , the lock box was repaired. On , the lock box was replaced with a new lock box.
- All residents have the potential to be affected by this deficient practice. Facility conducted an audit of all medication carts to ensure cleanliness of all medication carts. Facility conducted an audit of all lock boxes to ensure all lock boxes were working correctly and address, if needed.
- The Director of Nursing, or designee(s) will educate all staff on Label, Store Drugs and Biologicals CFR(s): 483.45(g)(h)(1)(2), 59A-4.112(6), FAC Drug Storage and facility's Storage of Medications and Administering Medications policies and procedures.
- The Nurses will conduct medication

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N 095	<p>Continued From page 4</p> <p>Policy Interpretation and Implementation</p> <p>1. Drugs and biologicals shall be stored in the packaging, containers or other dispensing systems in which they are received. Only the issuing pharmacy is authorized to transfer medications between containers.</p> <p>2. The nursing staff shall be responsible for maintaining medication storage and preparation areas in a clean, safe, and sanitary manner.</p>	N 095	<p>cart and lock box check daily. The Director of Nursing and/or designee will conduct a weekly medication cart and medication room quality review. The findings will be reported to the Quality Assurance Process Improvement (QAPI) committee monthly and then quarterly once substantial compliance has been achieved.</p>	
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