STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11912077	06/06/2017
NAME OF PROVIDER OR SUPPLIER **BROOKDALE PALM BEACH GARDENS**	STREET ADDRESS, CITY, STATE, ZIP CODE **11381 PROSPERITY FARMS ROAD** **PALM BEACH GARDENS, FL 33410**	

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

0000 - Initial Comments

An unannounced Relicensure survey was conducted on at Brookdale Palm Beach Gardens, License #7375. The facility had deficiencies found at the time of the survey.

0052 - Medication - Assistance with Self-Admin - 58A-5.0185 (3)

Based on observations and interviews, the assisted living facility failed to ensure unlicensed staff followed the appropriate procedure for assistance with self-administration of medication for 2 of 2 residents (Resident #13 and Resident # 14). Specifically, the assistant living facility staff failed to read the medication and prepare the medication in the presence of Resident #13 and Resident #14.

Findings include:

1. During an observation on , 2017 at 4:31 pm, Staff D was observed providing assistance with self-administration of medication to Resident #13 by the medication cart in the hallway. Staff did not read label to Resident#13 before providing assistance with the eye drops.
Resident #13 then sat down next to the medicine cart and Staff D assisted Resident#13 with her eye drops. Staff D documented Resident #13's medication observation record (MOR).

2. During an observation on , 2017 at 4:40 pm, Staff D was observed providing assistance with self-administration of medication to Resident #14. Staff D was observed standing at the medication cart located in the hallway. Staff D reviewed Resident # 14's medication observation record (MOR) and compared it to the medication label to ensure the correct medication was being given. Staff D then poured the pills into a small cup. Staff D went into Resident # 14's stated that she has her medication. Staff D ensured that Resident # 14 took the medications visually with water.

3. During an interview on , 2017 at 4:41 pm, Resident #14 was asked by the Surveyor if she knew what medications she had taken. Resident#14 response was she didn't know.

4. During an interview on , 2017 at 4:42 pm, Staff D reported that she was trained by two other Medication Technician's on how to pass medication however was not trained to read medication labels or prepare medication in the presence of the residents.

Class III

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11912077	**06/06/2017**
NAME OF PROVIDER OR SUPPLIER **BROOKDALE PALM BEACH GARDENS**	STREET ADDRESS, CITY, STATE, ZIP CODE **11381 PROSPERITY FARMS ROAD** **PALM BEACH GARDENS, FL 33410**	

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

Z815 - Background Screening; Prohibited Offenses - 408.809; 435.02(2); 435.06 FS

Based on a review of personnel files, and interview with staff, the facility failed to obtain the required level 2 background screen for 1 of 3 sampled employees (Staff A) who provided care and services to the residents.

Findings include:

On . . . . . , a review of Staff A employment record revealed a date of hire of . . . . . .

On . . . . . , a review of Staff A file revealed that Staff A Level II background screening was cleared on . . . . . .

On . . . . . , a review of the Agency's Background Screen website revealed an eligible background screen results for Staff A dated . . . . . .

On . . . . . at 03:45pm, an interview was conducted with the facility's business Manager. The business manager confirmed that Staff A needed an updated level II background screening and that the current Level II background screening expired ion . . . . . .

Unclassified