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
	AL11910784	A. BUILDING _____ B. WING _____	

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
ST MARK VILLAGE	2655 NEBRASKA AVENUE PALM HARBOR, FL 34684

(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 An extended congregate care (ECC) monitoring visit was conducted on ..... St. Mark Village assisted living facility had deficiencies found at the time of the visit.	A 000		
A 092	58A-5.020(1) FAC Food Service - General Responsibilities Food Service Standards. (1) GENERAL RESPONSIBILITIES. When food service is provided by the facility, the administrator or a person designated in writing by the administrator shall: (a) Be responsible for total food services and the day to day supervision of food services staff. (b) Perform his/her duties in a safe and sanitary manner. (c) Provide regular meals which meet the nutritional needs of residents, and therapeutic diets as ordered by the resident ' s health care provider for resident ' s who require special diets. (d) Maintain the in-service and continuing education requirements specified in Rule 58A-5.0191, F.A.C. This Statute or Rule is not met as evidenced by: Based on observation and interview, the facility failed to ensure that maintained safe food and drink product handling practices in regards to the presence of 5 cartons of expired drink products and one undated container of pudding like food product in 1 of 2 refrigeration units located on the Extended Care congregate unit.	A 092		

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A 092	Continued From page 1 Findings include: During the tour of the Extended Care Congregate unit on at 12:05 a.m. with Staff member B, the refrigeration unit located in the hall of the unit was observed to have the following: 1-Ready Care Thickened carton of orange juice, 46 oz., expired . 2-Ready Care Thickened Cranberry juice cartons, 46 oz., one expired on ; one expired on . 1-Nectar Consistency juice product, 32 oz., expired . 1-Thick and easy nectar concentrate, 32 oz., expired . 1-Un-dated brown pudding like container. An interview conducted at the time of observation with Staff member B, she agreed that the products were expired. Staff member B stated that the refrigerator was shared by Activities, Nursing and residents. Class III	A 092		
AE210	58A-5.0191(7) FAC ECC - Training Staff Training Requirements and Competency Test. (7) EXTENDED CONGREGATE CARE TRAINING. (a) The administrator and extended congregate care supervisor, if different from the administrator, must complete core training and 4 hours of initial training in extended congregate care prior to the facility ' s receiving its extended congregate care license or within 3 months of	AE210		

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AE210	Continued From page 2	AE210		

beginning employment in the facility as an administrator or ECC supervisor. Successful completion of the assisted living facility core training shall be a prerequisite for this training. ECC supervisors who attended the assisted living facility core training prior to , 1998, shall not be required to take the assisted living facility core training competency test.
(b) The administrator and the extended congregate care supervisor, if different from the administrator, must complete a minimum of 4 hours of continuing education every two years in topics relating to the physical, , or social needs of frail elderly and persons, or persons with or related

(c) All direct care staff providing care to residents in an extended congregate care program must complete at least 2 hours of in-service training, provided by the facility administrator or ECC supervisor, within 6 months of beginning employment in the facility. The training must address extended congregate care concepts and requirements, including statutory and rule requirements, and delivery of personal care and supportive services in an extended congregate care facility.

This Statute or Rule is not met as evidenced by:
Based on record review and interview, the facility failed to ensure that 2 (C and E) of 5 sampled direct care staff members of the Extended Care Congregate (ECC) unit had received an initial ECC training within 6 months of their date of hire by the facility.

Findings include:

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AE210	Continued From page 3 A record review of the facility's Daily ALF Staffing Schedule for the ECC unit revealed that direct care staff member C was assigned to work the 3 p.m. to 11 p.m. shift and staff member E was assigned to work the 11 p.m. -7p.m. shift. An interview conducted on at approximately 1:30 p.m. with the Supervisor of the ECC unit, she confirmed that both C and E worked in the ECC unit as scheduled. A record review of Staff member C's personnel file revealed a date of hire of , no Extended Care Congregate training was available for review in her personnel file. A record review of Staff member E's personnel file revealed a date of hire of , no Extended Care Congregate training was available for review in her personnel file. During an interview conducted on at approximately 1:30 p.m. with the ECC Supervisor, she confirmed that Staff member C and E did not have ECC training. Class III	AE210		

RICK SCOTT
GOVERNOR

AHCA
FLORIDA AGENCY FOR HEALTH CARE ADMINISTRATION

Better Health Care for all Floridians

ELIZABETH DUDEK
SECRETARY

, 2012

Administrator
St Mark Village
2655 Nebraska Avenue
Palm Harbor, FL 34684

Dear Administrator:

This letter reports the findings of an extended congregate care (ECC) monitoring visit 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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