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
	AL11965138	A. BUILDING: _____ B. WING _____	

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
ORLANDO MADISON HOUSE	8001 PIN OAK DRIVE ORLANDO, FL 32819

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A 000	Initial Comments . Extended Congregate Care (ECC) and Limited Nursing Services (LNS) monitoring was conducted. The facility had deficiencies found pertaining to ECC, during the visit.	A 000		
A 078	58A-5.019(2) FAC Staffing Standards - Staff (2) STAFF. (a) Newly hired staff shall have 30 days to submit a statement from a health care provider, based on a examination conducted within the last six months, that the person does not have any signs or symptoms of a communicable . including . Freedom from . must be documented on an annual basis. A person with a positive . test must submit a health care provider ' s statement that the person does not constitute a risk of communicating . Newly hired staff does not include an employee transferring from one facility to another that is under the same management or ownership, without a break in service. If any staff member is later found to have, or is suspected of having, a communicable , he/she shall be removed from duties until the administrator determines that such condition no longer exists. (b) All staff shall be assigned duties consistent with his/her level of education, training, preparation, and experience. Staff providing services requiring licensing or certification must be appropriately licensed or certified. All staff shall exercise their responsibilities, consistent with their qualifications, to observe residents, to document observations on the appropriate resident ' s record, and to report the observations to the resident ' s health care provider in	A 078		

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A 078	Continued From page 1 accordance with this rule chapter. (c) All staff must comply with the training requirements of Rule 58A-5.0191, F.A.C. (d) Staff provided by a staffing agency or employed by a business entity contracting to provide direct or indirect services to residents must be qualified for the position in accordance with this rule chapter. The contract between the facility and the staffing agency or contractor shall specifically describe the services the staffing agency or contractor will be providing to residents. (e) For facilities with a licensed capacity of 17 or more residents, the facility shall: 1. Develop a written job description for each staff position and provide a copy of the job description to each staff member; and 2. Maintain time sheets for all staff. This Statute or Rule is not met as evidenced by: Based on record reviews and interviews the facility failed to ensure staff were assigned duties consisted with training and education in accordance with Chapter 464, F.S., (Nurse Practice Act) and the prevailing standard of practice in the nursing community and allowed a Licensed Practical Nurse (LPN) to conduct nursing assessments for 1 resident (1) who received Extended Congregate Care (ECC). Findings: The facility Licensed Practical Nurse (LPN) stated at approximately 10:15 AM that she conducted the nursing assessment about the 11th or 12th of each month. Resident record review at approximately 11AM for resident #1, who received ECC services noted the Extended Congregate Care monthly nursing assessments dated and were conducted and signed by an LPN and co- signed by Registered Nurse (RN).	A 078		

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A 078	Continued From page 2 The LPN stated at approximately 2 PM that she did not know than an LPN could not conduct assessments and would inform the Executive Director about it, as she was at a corporate meeting. Class III	A 078		
A 161	58A-5.024(2) FAC Records - Staff (2) STAFF RECORDS. (a) Personnel records for each staff member shall contain, at a minimum, a copy of the original employment application with references furnished and verification of freedom from communicable including In addition, records shall contain the following, as applicable: 1. Documentation of compliance with all staff training required by Rule 58A-5.0191, F.A.C.; 2. Copies of all licenses or certifications for all staff providing services which require licensing or certification; 3. Documentation of compliance with level 1 background screening for all staff subject to screening requirements as required under Rule 58A-5.019, F.A.C.; 4. A copy of the job description given to each staff member pursuant to Rule 58A-5.019, F.A.C., for facilities with a licensed capacity of seventeen (17) or more residents; and 5. Documentation of facility direct care staff and administrator participation in resident elopement drills pursuant to paragraph 58A-5.0182(8)(c), F.A.C. (b) The facility shall not be required to maintain personnel records for staff provided by a licensed staffing agency or staff employed by a business entity contracting to provide direct or indirect services to residents and the facility. However, the facility must maintain a copy of the contract between the facility and the staffing agency or	A 161		

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A 161	Continued From page 3 contractor as described in Rule 58A-5.019, F.A.C. (c) The facility shall maintain the facility ' s written work schedules and staff time sheets as required under Rule 58A-5.019, F.A.C., for the last 6 months. This Statute or Rule is not met as evidenced by: Based on personnel record review and interview the facility failed to ensure 1 of 3 staff (A) provided freedom from communicable statement. Findings: Personnel record review at approximately 1 PM for staff A, hired in 2010 revealed no evidence to confirm she provided the facility a freedom from communicable statement 30 days after she was hired. The office manager stated at approximately 1:30 PM that she searched, but was unable to locate any documentation. Class III	A 161		
AE205	58A-5.030(6) FAC ECC - Health Assessment (6) HEALTH ASSESSMENT. Prior to admission to an ECC program, all persons. including residents transferring within the same facility to that portion of the facility licensed to provide extended congregate care services, must be examined by a physician or advanced registered nurse practitioner pursuant to Rule 58A-5.0181, F.A.C. A health assessment conducted within 60 days prior to admission to the ECC program shall meet this requirement. Once admitted, a new health assessment must be obtained at least annually.	AE205		

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AE205	Continued From page 4 This Statute or Rule is not met as evidenced by: Based on record review and interview the facility failed to obtain a health assessment at least annually for 1 of 1 resident (#1) who received Extended Congregate Care (ECC) services. Findings: Resident record review at approximately 11 AM for resident #1, who received ECC services, noted the last health assessment report available for review was dated ..... A health assessment was not available for the year 2012. The LPN stated at approximately 2 PM that she was not aware that he needed a health assessment for 2012 and would inform the Executive Director about it, as she was at a corporate meeting. Class III	AE205		
AE206	58A-5.030(7) FAC ECC - Service Plans (7) SERVICE PLANS. (a) Prior to admission the extended congregate care supervisor shall develop a preliminary service plan which includes an assessment of whether the resident meets the facility ' s residency criteria, an appraisal of the resident ' s unique physical and psycho social needs and preferences, and an evaluation of the facility ' s ability to meet the resident ' s needs. (b) Within 14 days of admission the congregate care supervisor shall coordinate the development of a written service plan which takes into account the resident ' s health assessment obtained pursuant to subsection (6); the resident ' s unique physical and psycho social needs and preferences; and how the facility will meet the resident ' s needs including the following if	AE206		

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AE206	Continued From page 5 required: 1. Health monitoring; 2. Assistance with personal care services; 3. Nursing services; 4. Supervision; 5. Special diets; 6. Ancillary services; 7. The provision of other services such as transportation and supportive services; and 8. The manner of service provision, and identification of service providers, including family and friends, in keeping with resident preferences. (c) Pursuant to the definitions of " shared responsibility " and " managed risk " as provided in Section 429.02, F.S., the service plan shall be developed and agreed upon by the resident or the resident ' s representative or designee, surrogate, guardian, or attorney-in-fact, the facility designee, and shall reflect the responsibility and right of the resident to consider options and assume risks when making choices pertaining to the resident ' s service needs and preferences. (d) The service plan shall be reviewed and updated quarterly to reflect any changes in the manner of service provision, accommodate any changes in the resident ' s physical or mental status, or pursuant to recommendations for modifications in the resident ' s care as documented in the nursing assessment. This Statute or Rule is not met as evidenced by: Based on record review and interview the facility failed to ensure the Extended Congregate Care (ECC) service plan for 1 of 1 resident (#1), who received ECC services, was reviewed or up-dated quarterly. Findings:	AE206		

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AE206	Continued From page 6 Resident record review at approximately 11 AM for resident #1, who received ECC services, noted the Extended Congregate Care service plan was undated/reviewed on [redacted] and then on [redacted]. The plan needed to be reviewed in [redacted] 2013. The LPN stated at approximately 2 PM that she was not aware that the plan had not been reviewed or updated and would inform the Executive Director about it, as she was at a corporate meeting. Class III	AE206		
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 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 [redacted], 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, [redacted], or social needs of frail elderly and [redacted] persons, or persons with [redacted] or related	AE210		

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AE210	Continued From page 7 (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 personnel record review and interview the facility failed to ensure 1 of 3 direct care staff (B) who provided care to residents in the Extended Congregate Care (ECC) program complete D 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. Findings: Personnel record review at approximately 1PM for staff B, a resident attendant, hired in [redacted] revealed no evidence to confirm she completed 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 regarding the 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. The office manager stated at approximately 1:30 PM that she searched but was unable to locate any evidence of the training.	AE210		

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AE210	Continued From page 8 Class III	AE210		

AHCA
FLORIDA AGENCY FOR HEALTH CARE ADMINISTRATION

RICK SCOTT
GOVERNOR

Better Health Care for all Floridians

ELIZABETH DUDEK
SECRETARY

2013

Administrator
Orlando Madison House
8001 Pin Oak Drive
Orlando, FL 32819

Dear Administrator:

Re: ECC/LNS monitoring

This letter reports the findings of a state licensure survey that was conducted on , 2013 by representative(s) 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 after **, 2013,** 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(s). Should you have any questions please call Lorraine Henry at .

Sincerely,

Theresa DeCanio, RN
Field Office Manager

LH/be
Enclosure

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