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
	AL11967269	A. BUILDING: _____ B. WING _____	

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
SERENITY PLACE II ALF	256 BARBAROSSA RD NW PALM BAY, FL 32907

(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 Complaint inspection CCR# 2013002583 was conducted on [redacted]. There were deficiencies found at the time of 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 [redacted] including [redacted]. Freedom from [redacted] must be documented on an annual basis. A person with a positive [redacted] test must submit a health care provider ' s statement that the person does not constitute a risk of communicating [redacted]. 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 [redacted] 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 accordance with this rule chapter. (c) All staff must comply with the training	A 078		

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A 078	Continued From page 1 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 personnel record review and interview the facility failed to ensure the personnel records for 2 of 5 sampled staff (A & B) contained verification of freedom from communicable ... including ... Findings: Personnel Record review on ... at approximately 11:30 AM for Staff A hired on ... and Staff B hired on ... and last worked at the facility in ... had no documentation to confirm that they were free from communicable ... including ... The administrator stated on ... at approximately 1 PM that the above staff did not have the freedom communicable including ... documentation as required.	A 078		

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A 078	Continued From page 2 Class III	A 078		
A 081	58A-5.0191(2) FAC Training - Staff In-Service (2) STAFF IN-SERVICE TRAINING. Facility administrators or managers shall provide or arrange for the following in-service training to facility staff: (a) Staff who provide direct care to residents, other than nurses, certified nursing assistants, or home health aides trained in accordance with Rule 59A-8.0095, F.A.C., must receive a minimum of 1 hour in-service training in control, including universal precautions, and facility sanitation procedures before providing personal care to residents. Documentation of compliance with the staff training requirements of 29 CFR 1910.1030, relating to borne may be used to meet this requirement. (b) Staff who provide direct care to residents must receive a minimum of 1 hour in-service training within 30 days of employment that covers the following subjects: 1. Reporting major incidents. 2. Reporting adverse incidents. 3. Facility emergency procedures including chain-of-command and staff roles relating to emergency evacuation. (c) Staff who provide direct care to residents, who have not taken the core training program, shall receive a minimum of 1 hour in-service training within 30 days of employment that covers the following subjects: 1. Resident rights in an assisted living facility. 2. Recognizing and reporting resident neglect, and (d) Staff who provide direct care to residents, other than nurses, CNAs, or home health aides trained in accordance with Rule 59A-8.0095,	A 081		

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A 081	Continued From page 3 F.A.C., must receive 3 hours of in-service training within 30 days of employment that covers the following subjects: 1. Resident behavior and needs. 2. Providing assistance with the activities of daily living. (e) Staff who prepare or serve food, who have not taken the assisted living facility core training must receive a minimum of 1-hour-in-service training within 30 days of employment in safe food handling practices. (f) All facility staff shall receive in-service training regarding the facility ' s resident elopement response policies and procedures within thirty (30) days of employment. 1. All facility staff shall be provided with a copy of the facility ' s resident elopement response policies and procedures. 2. All facility staff shall demonstrate an understanding and competency in the implementation of the elopement response policies and procedures. This Statute or Rule is not met as evidenced by: Based on personnel record review and interview the facility failed to have evidence that 5 of 5 sampled staff (A, B, C, D and E) received the required in- service training. Findings: Personnel record review conducted on [redacted] at approximately 11:30 AM revealed the following: Staff A hired on [redacted] and provided direct care to the resident and there was no documentation to confirm that she had received 3 hours in-service training that covered Resident behavior	A 081		

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A 081	Continued From page 4 and needs and providing assistance with the activities of daily living, Resident elopement response policies and procedures and a copy of the facility's resident elopement response policies and procedures. Staff A also prepared and served food, Staff A was asked on at approximately 9:30 had she obtained food service training and she stated that she did not. Staff B hired on and terminated her employment in had no documentation to confirm that she had received training that covered Resident rights in an assisted living facility. The administrator stated on at approximately 1 PM that she could not locate the above training certificates. Staff D was hired in and there was no documentation to confirm that she had received 3 hours in-service training that covered Resident behavior and needs and providing assistance with the activities of daily living. Further personnel record review revealed that there were copies of the Food service training certificates for staff A, C and E in the file with the signature of the Registered Dietitian and the only original handwriting was the staff's name. A telephone call was made to Dietitian on at approximately 12:30 PM, she stated that she was driving and she would go to check her invoices to see if she had given the training. She stated she would have an invoice if she did. The administrator was informed of the above findings. She stated on at approximately 1 PM, that Dietitian gave her the blank certificates and she would give the training to the employees and use the Dietitians certificate, she did not know she could not do that.	A 081		

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A 081	Continued From page 5 Class III	A 081		
A 082	58A-5.0191(3) FAC Training - ..... (3) .... Pursuant to Section 381.0035, F.S., all facility employees, with the exception of employees subject to the requirements of Section 456.033, F.S., must complete a one-time education course on ... and ... including the topics prescribed in the Section 381.0035, F.S. New facility staff must obtain the training within 30 days of employment. Documentation of compliance must be maintained in accordance with subsection (12) of this rule. This Statute or Rule is not met as evidenced by: Based on review of personnel files and interview the facility failed to ensure that 1 of 5 sampled staff (B) had completed a one-time education course on ... and .... Findings: Personnel record review on ... at approximately 11:30 AM revealed that staff B was hired on ... and last worked at the facility in ... and there was no documentation to confirm that she had a completed a one-time education course on ... and .... The administrator reviewed the personnel record for staff B and stated on ... at approximately 1 PM, that she could not locate any documentation to confirm that the staff had received the above training.	A 082		

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A 082	Continued From page 6 Class III	A 082		
A 083	58A-5.0191(4) FAC Training - First Aid and ... (4) FIRST AID AND ... A staff member who has completed courses in First Aid and ... and holds a currently valid card documenting completion of such courses must be in the facility at all times. (a) Documentation of attendance at First Aid or ... course offered by an accredited college, university or vocational school; a licensed hospital; the American Red Cross, American ... Association, or National Safety Council; or a provider approved by the Department of Health, shall satisfy this requirement. (b) A nurse shall be considered as having met the training requirement for First Aid. An emergency medical technician or paramedic currently certified under Part III of Chapter 401, F.S., shall be considered as having met the training requirements for both First Aid and ... This Statute or Rule is not met as evidenced by: Based on personnel record review and interview the facility failed to have evidence that a staff member who had completed courses in First Aid and ... held a currently valid card documenting completion of such courses was working in the facility at all times. Findings: On ... at approximately 9:30 PM, Staff A was observed working alone at the facility. Review of the staff schedule revealed that staff C	A 083		

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A 083	Continued From page 7 also worked alone on some days. Personnel records for staff A revealed that there was no documentation to confirm that she had completed a course in First Aid. Personnel records for staff C who was terminated revealed that there was no documentation that she had complete a course in The administrator reviewed the files and stated on at approximately 1 PM, that both employees had obtained the First Aid and course and she did not have the documentation. Staff A stated on at approximately 1 PM that she did receive a First Aid course and she did not have the documentation with her. Class III	A 083		
A 084	58A-5.0191(5) FAC Training - Assis Self-Admin Meds & Med Mgmt (5) ASSISTANCE WITH SELF-ADMINISTERED MEDICATION AND MEDICATION MANAGEMENT. Unlicensed persons who will be providing assistance with self-administered medications as described in Rule 58A-5.0185, F.A.C., must meet the training requirements pursuant to Section 429.52(5), F.S., prior to assuming this responsibility. Courses provided in fulfilment of this requirement must meet the following criteria: (a) Training must cover state law and rule requirements with respect to the supervision, assistance, administration, and management of medications in assisted living facilities; procedures and techniques for assisting the resident with self-administration of medication including how to read a prescription label;	A 084		

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A 084	Continued From page 8 providing the right medications to the right resident; common medications; the importance of taking medications as prescribed; recognition of side effects and adverse reactions and procedures to follow when residents appear to be experiencing side effects and adverse reactions; documentation and record keeping; and medication storage and disposal. Training shall include demonstrations of proper techniques and provide opportunities for hands-on learning through practice exercises. (b) The training must be provided by a registered nurse or licensed pharmacist who shall issue a training certificate to a trainee who demonstrates an ability to: 1. Read and understand a prescription label; 2. Provide assistance with self-administration in accordance with Section 429.256, F.S., and Rule 58A-5.0185, F.A.C., including: a. Assist with oral dosage forms, dosage forms, and and nasal dosage forms; b. Measure liquid medications, break scored tablets, and crush tablets in accordance with prescription directions; c. Recognize the need to obtain clarification of an " as needed " prescription order; d. Recognize a medication order which requires judgment or discretion, and to advise the resident, resident ' s health care provider or facility employer of inability to assist in the administration of such orders; e. Complete a medication observation record; f. Retrieve and store medication; and g. Recognize the general signs of adverse reactions to medications and report such reactions. (c) Unlicensed persons, as defined in Section 429.256(1)(b), F.S., who provide assistance with self-administered medications and have	A 084		

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A 084	Continued From page 9 successfully completed the initial 4 hour training, must obtain, annually, a minimum of 2 hours of continuing education training on providing assistance with self-administered medications and safe medication practices in an assisted living facility. The 2 hours of continuing education training shall only be provided by a licensed registered nurse, or a licensed pharmacist. This Statute or Rule is not met as evidenced by: Based on personnel record review and interview the facility failed to have evidence that 4 of 5 sampled unlicensed staff (A, B, C and E), who provided assistance with the resident's medications had obtained initial 4 hours training in providing assistance with self-administered medications and safe medication practices in an Assisted Living Facility (ALF) and 2 hour continuing education training that were not fraudulent. Findings: On at approximately 9:30 AM Staff A stated she had worked at the facility since . She stated that she also assisted with medications sometimes. She was asked at the time if she had received the medication training and she stated that she had not. Personnel record revealed that the staff training for the medication appeared to be altered the certificate was a copy with the signature of the Registered Nurse (RN) for staff A, B C, D and E. Staff A, D and E had the 4 hour training certificate, Staff B and C had the 2 hours training certificate. The only original handwriting was the staff's name. A telephone call was made to the	A 084		

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A 084	Continued From page 10 RN whose signature was on the certificate on [redacted] at approximately 1:15 PM. She stated that she remembered conducting training for a couple of staff at Serenity, she wanted the names of the staff and they were provided to her, she only recalled giving the training to one of the staff (Staff D). She wanted a copy of the certificates to review. A copy of the certificate was emailed to the RN. The RN returned the call on [redacted] at approximately 1:30 PM, she stated that the signature on the bottom was hers and she did not complete the certificates. She could not understand why the administrator would falsify the certificates. She stated all she had to do was call her and she would have given the staff the training. The administrator was informed of the above findings because there was no other documentation in the file to confirm that the above staff who had been assisting the resident's with their medication had received the required training. The administrator stated on [redacted] at approximately 1 PM, that either she or her daughter who was an RN would give the staff the medication training and use the certificate of the other RN. She was informed at the time that was falsification of documentation. Class III	A 084		
A 090	58A-5.0191(11) FAC Training - Do Not [redacted] Orders (11) [redacted] TRAINING. (a) Currently employed facility administrators, managers, direct care staff and staff involved in	A 090		

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A 090	Continued From page 11 resident admissions must receive at least one hour of training in the facility ' s policies and procedures regarding _____ within 60 days after the effective date of this rule. (b) Newly hired facility administrators, managers, direct care staff and staff involved in resident admissions must receive at least one hour of training in the facility ' s policy and procedures regarding _____ within 30 days after employment. (c) Training shall consist of the information included in Rule 58A-5.0186, F.A.C. This Statute or Rule is not met as evidenced by: Based on Personnel record review and interview the facility failed to ensure that 5 of 5 sampled staff (#A, B, C, D and E) had at least one hour of training in the facility's policies and procedures regarding _____ that included information in Rule 58A-5.0186, F.A.C. Findings: Personnel record review conducted on _____ at approximately 11:30 AM revealed that Staff A hired on _____ Staff A hired on _____ (no longer worked at the facility) Staff C hired _____ (no longer worked at the facility), Staff D hired _____ and Staff E was hired in _____ There was no documentation in their files to confirm that they had obtained at least one hour of training on the facility's policies and procedures regarding _____ that included information in Rule 58A-5.0186, F.A.C. The administrator confirmed the above findings.	A 090		

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A 090	Continued From page 12 Class III	A 090		
A 163	429.49 FS Records - Resident, Penalties for Alteration Resident records; penalties for alteration.- (1) Any person who fraudulently alters, defaces, or falsifies any medical or other record of an assisted living facility, or causes or procures any such offense to be committed, commits a misdemeanor of the second degree, punishable as provided in s. 775.082 or s. 775.083. (2) A conviction under subsection (1) is also grounds for restriction, suspension, or termination of license privileges. This Statute or Rule is not met as evidenced by: Based on Personnel record review and interview the facility altered and falsified a Food Safety training certificate for 3 of 5 sampled staff (A, C and E) and Medication Training Certificate for 4 of 5 sampled staff (A, B, C and E). Findings: On at approximately 9:30 AM Staff A stated she had worked at the facility since She stated that she also assisted with medications sometimes. She was asked at the time if she had received the medication training and she stated that she had not. Personnel record revealed that the staff training for the medication appeared to be altered the certificate was a copy with the signature of the Registered Nurse (RN) for staff A, B C D and E. The only original handwriting was the staff's name. A telephone call was made to the RN	A 163		

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A 163	Continued From page 13	A 163		

whose signature was on the certificate on at approximately 1:15 PM. She stated that she remembered conducting training for a couple of staff at Serenity, she wanted the names of the staff and they were provided to her, she only recalled giving the training to one of the staff , (Staff D). She wanted a copy of the certificates to review. A copy of the certificate was emailed to the RN. The RN returned the call on _____ at approximately 1:30 PM, she stated that the signature on the bottom was hers and she did not complete the certificates. She could not understand why the administrator would falsify the certificates. She stated all she had to do was call her and she would have given the staff the training.

Further personnel record review revealed that there were copies of the Food service training certificates for staff A, C and E in the file with the signature of the Registered Dietitian and the only original handwriting was the staff's name.

A telephone call was made to Dietitian on _____ at approximately 12:30 PM, she stated that she was driving and she would go to check her invoices to see if she had given the training. She stated she would have an invoice if she did.

The administrator was informed of the above findings. She stated that Dietitian gave her the blank certificates and she would give the training to the employees and use the Dietitians certificate, she did not know she could not do that.

She stated that she or either her daughter who was an RN would give the staff the medication training and use the certificate of the other RN. She was informed at the time that was falsification of documentation.

The administrator was shown in the regulations that noted the person that gave the actual training was the person who was to sign the certificate.

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NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
SERENITY PLACE II ALF	**256 BARBAROSSA RD NW PALM BAY, FL 32907**

(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 163	Continued From page 14 A telephone call was received from Dietitian at approximately 1 PM, she stated that she did not find an invoice for this facility and she had not been there for a couple of years. She stated that she would never leave a blank certificate at a facility for the staff to add names. In an attempt to deceive the agency, the administrator provided fraudulent documentation for the food safety training, and the assistance with the self-administration of medication training. Class II	A 163		

AHCA
FLORIDA AGENCY FOR HEALTH CARE ADMI

SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

2013

Administrator
Serenity Place II ALF
256 Barbarossa Rd NW
Palm Bay, FL 32907

Dear Administrator:

Re: CCR #2013002583

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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