

AGENCY FOR HEALTH CARE
ADMINISTRATION

PRINTED: 12/03/2013
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER: AL11965472	(X3) DATE SURVEY COMPLETED 11/20/2013
NAME OF PROVIDER OR SUPPLIER Belvedere Commons Of Fort Walton Beach	STREET ADDRESS, CITY, STATE, ZIP CODE 2000 Principal Lane Fort Walton Beach, FL 32547	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAG AND REGULATORY IDENTIFYING INFORMATION)		

Revisit Corrected Tags:

0078-Staffing Standards - Staff-11/20/2013

Revisit Repeat Tags:

0083-Training - First Aid And 5.0191(4) Fac

0000-Initial Comments

On 11/20/2013 at Belvedere Commons of Fort Walton Beach assisted living facility, an unannounced Directive Plan of Correction revisit survey was conducted. There were deficiencies found at the time of the visit.

0083-Training - First Aid and 58A-5.0191(4) FAC

Based on interviews and record reviews the assisted living facility failed to ensure 6 of 6 staff members working the 11 PM-7 PM shift received the First Aid training course with an approved training provider. (A, B, C, D, E, and F) The facility failed to ensure the First Aid training course was provided by the American Red Cross, American Safety Association, or National Safety Council; or a provider approved by the Department of Health.

Findings include:

1) A review of the night shift staff members First Aid online training course certificates revealed the following:

a. Staff member A - First Aid Certificate issued with American Academy of First Aid, Inc.

b. Staff member B- First Aid Certificate issued with American Academy of First Aid, Inc.

c. Staff member C- First Aid Certificate issued with American Academy of First Aid, Inc.

d. Staff member D- First Aid Certificate issued with American Academy of First Aid, Inc.

e. Staff member E-CP First Aid Certificate issued with American Academy of First Aid, Inc.

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f. Staff member F - First Aid Certificate issued _____ with American Academy of _____ & First Aid, Inc.

2) A review of the American Academy of _____ and First Aid, Inc. Online _____ Certification. net Webster revealed no indications the company was an approved _____/First Aid training course provider.

3) On _____ at approximately 9:55 AM an interview with the Executive Director was conducted. He stated he thought the American Academy of _____ and First Aid, Inc. Company was an approved provider. He confirmed that the training was online and there were no hands on training involved in the course. He stated he thought the training was approved because the Medical Director of American Academy of _____ & First Aid stated he was nationally certified.

Class II



RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

, 2013

Administrator
Belvedere Commons Of Fort Walton Beach
2000 Principal Lane
Fort Walton Beach, FL 32547

Dear Administrator:

This letter reports the findings of a revisit inspection survey conducted on _____, 2013, by representatives of the Agency for Health Care Administration (Agency). Attached is the provider's copy of the Statement of Deficiencies, which indicates there were deficiencies noted during the inspection. You are hereby responsible for complying with the Agency's Directed Plan of Correction (DPOC) within five business days of receipt of this hand delivered report.

The inspection resulted in findings of non-compliance in the following areas:
St - A - 0083 - 58a-5.0191(4) Fac - Training - First Aid And _____ S-S= G

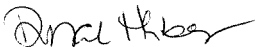
Directed Corrective Actions:

1. The Assisted Living Facility is required to ensure that there is at least one staff member within the facility at all times that has a valid _____ and First Aid Card from 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.

Please be advised that nothing in this DPOC limits the Agency's authority and responsibility to impose administrative sanctions as provided by law.

Should you have any questions, please call _____ Catherine Anne Avery, Survey and Certification Support Branch, at (850) 412-4505.

Sincerely,


Donah Heiberg
Field Office Manager

DH/dh