

AGENCY FOR HEALTH CARE
ADMINISTRATION

PRINTED: 01/28/2014
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER: AL11966624	(X3) DATE SURVEY COMPLETED 01/06/2014
NAME OF PROVIDER OR SUPPLIER Golden Wings Wendel	STREET ADDRESS, CITY, STATE, ZIP CODE 3116 Wendel Rd Se Melbourne, FL 32909	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAG AND REGULATORY IDENTIFYING INFORMATION)		

List of Tags Cited:

St - A - 0008 - 58a-5.0181(2) Fac - Admissions - Health Assessment S-S= B
 St - A - 0010 - 58a-5.0181(4) Fac - Admissions - Continued Residency S-S= D
 St - A - 0030 - 58a-5.0182(6) Fac; 429.28 Fs - Resident Care - Rights & Facility Procedures S-S= D
 St - A - 0052 - 58a-5.0185(3) Fac - Medication - Assistance With Self-Admin S-S= D
 St - A - 0053 - 58a-5.0185(4) Fac - Medication - Administration S-S= D
 St - A - 0054 - 58a-5.0185(5) Fac - Medication - Records S-S= D
 St - A - 0055 - 58a-5.0185(6) Fac - Medication - Storage And Disposal S-S= D
 St - A - 0078 - 58a-5.019(2) Fac - Staffing Standards - Staff S-S= D
 St - A - 0093 - 58a-5.020(2) Fac - Food Service - Dietary Standards S-S= D
 St - A - 0167 - 58a-5.025(1) Fac - Resident Contracts S-S= B

Specific Tag Findings:

0000-Initial Comments

..... re-licensure survey with Limited Nursing Services (LNS) was conducted.

The facility had deficiencies found during the visit.

0008-Admissions - Health Assessment 58A-5.0181(2) FAC

Based on record review and interview the facility failed to ensure that the medical examination; AHCA Form 1823 Resident Health Assessment for Assisted Living Facilities contained all the required information for 1 of 5 sampled residents (2).

Findings:

Resident record review at approximately 3 PM for resident #2 revealed a health assessment report AHCA form 1823 that was not dated. The resident was admitted to the facility on

In an interview with the administrator on at approximately 3:30 PM revealed she did not realize the assessment was not dated.

Class ...

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0010-Admissions - Continued Residency 58A-5.0181(4) FAC

Based on record review and interview the facility failed to ensure 1 of 5 sampled residents (#1) who was a hospice patient had an interdisciplinary care plan developed and implemented by a licensed hospice in consultation with the facility.

Findings:

Resident record review at approximately 3 PM for resident #1 revealed she was admitted to the facility on and admitted to hospice on Continued review that included the hospice record revealed the hospice interdisciplinary care plan was available and dated however it did not indicate the shared responsibility for the resident's care, medication administration that included administration, sugar testing, monitoring and parameters for administration of medication and the use half-bed rails.

In an interview with the administrator on at approximately 3:30 PM who stated she did not realize the plan was blank.

Class III

0030-Resident Care - Rights & Facility Procedures 58A-5.0182(6) FAC; 429.28 FS

Based on observations, record review and interview the facility failed to ensure the use of physical was limited to half-bed rails and only upon the written order of the resident's physician, who must review the order biannually for 1 of 5 sampled residents (#1).

Findings:

Observations during the tour at approximately 10 AM, noted that the bed of resident #1 had half-bed rails in place. The resident was debilitated and

Resident record review at approximately 3 PM revealed that resident #1 had a health assessment dated with diagnoses that included and poor memory. She was under the care of hospice Continued review revealed no evidence to confirm that an order for the use of the half-bed rails had been obtained by the facility.

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In an interview with the administrator on 01/06/2014 at approximately 3:30 PM, who stated she did not have the order for the rails.

Class III

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

Based on observations and interviews the facility failed to ensure that staff followed all the correct steps when providing assistance with self-administration of medications to 3 of 5 residents (#3, #4, and #5).

Findings:

Observations at approximately 1:10 PM of the medication pass noted staff A washed her hands and obtained medications from locked medication cabinet. (The medications were kept in a locked file cabinet drawer.) She retrieved the medication and left the drawer open. She walked away, took the medication to resident #5, put the medication in the resident's hand and observed her take the medication. The staff signed the Medication Observation Record (MOR) before the resident took the medication.

Continued observation of the medication pass at approximately 1:20 PM staff A washed her hands and obtained medications from the opened medication cabinet. She retrieved the medication for resident #4 and left the drawer open again. She crushed the medications and put it in apple sauce and mixed it. She signed the MOR. She brought the apple sauce to the resident and fed it to the residents. The resident was unable to take the medication by herself.

Observations during the medication pass at approximately 1:30 PM staff A washed her hands and obtained medications from the opened medication cabinet. She retrieved the medication and left the drawer open again. She got water for resident #3. She signed the MOR. She brought medications to the resident and told her "These are yours." She observed the resident take the medication.

In an interview with the administrator on 01/06/2014 at approximately 1:30 PM, who offered no comment when told the staff did not follow corrected procedure when assisting with

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self-administration of medications.

Class III

0053-Medication - Administration 58A-5.0185(4) FAC

Based on record review and interview the facility failed to ensure to have a staff member who was licensed to administer medications available to administer medications to include perform _____ sugar testing and monitor _____ in accordance with a health care provider's order for 3 of 5 sampled residents (#1, #3 and #5).

Findings:

In an interview on _____ with the administrator at approximately 10 AM, who stated resident #1 had _____ sugar testing 3 times a day by whomever worked that day. Resident #2 also got _____ sugar testing and was on _____ and used an _____ pen

In an interview with staff A on _____ at approximately 10:50 AM she stated resident 2 was on _____. She stated "I get her _____ ready and we do finger sticks".

In an interview with staff B on _____ at approximately 11:30 AM, she stated "resident #2 has sliding scale and we go by sliding scale and _____ sugar. We check the _____ sugar for resident #1"

In an interview with staff C on _____ at approximately 1 PM she stated she helped resident #2 with her _____ injection "I get it ready and she injects it. I get it ready and I turn the dial.

Assistance with self-administration of medications does not include the conducting of any examination or testing such as _____ glucose testing or other procedure necessary for the proper administration of medication that the resident cannot conduct himself and that can be performed by licensed staff.

Resident record review at approximately 3 PM for resident # 1 revealed a health assessment report dated _____ indicated _____ type II, high _____. She was alert with _____ poor memory and was receiving hospice services with Vitas. She needed administration of medications.

Hospice order dated _____ facility to monitor _____ twice a day, covering MD

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(doctor) to be called for _____ sugar greater than 400. Order dated _____ call MD greater than 300.

The _____ 2013 Medication Observation Record listed finger sticks _____ sugar in the morning and _____ sugar testing at noon. The MOR contained the initials of the care givers (staff), who were not nurses. The MOR was blank on _____. The MOR also listed Promethean 25 mg suppositories insert 1 per _____ every 6 hours as needed for _____ and _____. The MOR indicated as evident by the staff initials that the medication was given on 11/7, 11/9, _____ and from _____ to _____.

The _____ 2013 MOR listed finger sticks -morning, noon and evening and _____ AM and PM. _____ 10 mg one tablet by mouth twice daily and hold for _____ lower than 120 and _____ 25 mg 2 times a day, hold for _____ lower than 120. The morning finger sticks were blank on _____ & _____. The noon finger sticks were blank on _____ & _____ to _____.

The MOR dated _____ listed _____ 10 mg one tablet by mouth twice daily and hold for _____ lower than 120. Another MOR dated _____ indicated take _____ 2 times a day, if _____ pressure is less than 120 hold _____ and _____.

The _____ 2013 MOR also listed _____ 25 mg 2 times a day, hold for _____ lower than 120. The _____ was not documented as taken on _____ in AM and 12/5, 12/7, _____ and _____ in PM.

The _____ MOR listed AM and PM _____ and AM and PM _____ sugar. The AM _____ was taken on 1/5; the PM _____ was taken on 1/3 to _____.

The AM _____ sugar was taken on 1/5 & _____ and the PM _____ sugar was taken on 1/3 to _____. The MOR contained the initials of the facility staff, which were not nurses and not qualified to administer medications.

Resident record review for resident #2 revealed a health assessment, not dated, that indicated _____ II, _____ failure, _____ chronic _____ insufficiency and _____. Assistance was needed with self-administration of medications.

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Physician's orders dated _____ listed _____ 30 units daily and _____ 20 Units nightly and _____ sliding scale.

POS dated _____ indicated _____ sliding scale:

200-250- take 2 Units (U),

251-300 = 4 U

301-350= 6 U

351-400 8 U

400 =10 U and call MD

The _____ 2013 MOR listed the _____ sliding scale and was indicated as given by the unlicensed staff. The MOR was blank on 11/9, _____ AM & noon; _____ noon; _____ to _____ noon, _____ noon and _____ AM. _____ 30 Units in AM and 20 units in the evening were marked as given by the unlicensed staff from 11/1 to _____.

The _____ MOR listed the _____ sliding scale and was indicated as given by the unlicensed staff. The MOR was blank on 12/9, _____ and _____ to _____ AM. _____ 30 Units in AM and 20 units in the evening were marked as given by the unlicensed staff from 12/1 to _____.

The _____ 2014 listed _____ sliding scale and was indicated as given by the unlicensed staff. The MOR was blank at noon from 1/3 to _____ 30 Units in AM and 20 units in the evening were marked as given by unlicensed staff and were blank on 1/4/in AM.

Resident record review for resident #5 revealed a health assessment dated _____ that listed _____ Assistance was needed with self-administration of medications. Physician Order Sheet dated _____ indicated finger stick _____ sugar daily.

The _____ MOR listed one touch ultra -finger sticks once daily and was indicated as done by the unlicensed staff from 11/1/to _____.

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The MOR listed one touch ultra -finger sticks once daily and was indicated as done by the unlicensed staff from 12/1/to

The 2014 MOR listed one touch ultra -finger sticks once daily and was indicated as done by the unlicensed staff from 1/1/to

In an interview with the administrator on at approximately 5:30 PM, who stated she was not aware that the unlicensed staff could not help with the sugar testing or hold medications based on reading. When asked why the owners who were both nurses did not administer the medications, she offered no comment.

Class III

0054-Medication - Records 58A-5.0185(5) FAC

Based on record review and interview the facility failed to maintain up-to-date Medication Observation Records (MOR) for 2 of 8 sampled residents (#3 and #6).

Findings:

Resident record review at approximately 3 PM for resident # 1 revealed a health assessment report dated indicated type II, high She was alert with poor memory and was on Vitas (hospice). She needed administration of medications.

Hospice order dated facility to monitor twice a day, Physician to be called for sugar greater than 400. Order dated "call physician greater than 300".

The 2013 Medication Observation Record listed finger sticks sugar in the morning and sugar testing at noon. The MOR was blank on

The 2013 MOR listed finger sticks -morning, noon and evening and AM and PM. 10 mg one tablet by mouth twice daily and hold for lower than 120 and 25 mg 2 times a day; hold for lower than 120. The morning finger sticks were blank on , & The noon

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finger sticks were blank on _____ & _____ to _____

The MOR dated _____ listed _____ 10 mg one tablet by mouth twice daily and hold for _____ lower than 120. Another MOR dated _____ indicated Take _____ 2 times a day, if _____ pressure is less than 120 hold _____ and _____
The _____ 2013 MOR also listed _____ 25 mg 2 times a day, hold for _____ lower than 120. The _____ was not documented as taken on _____ in AM and 12/5, 12/7, _____ and _____ in PM.

Resident record review for resident #2 revealed a health assessment, not dated, that indicated _____ II, _____ failure, _____, _____ chronic _____ insufficiency and _____ Assistance was needed with self-administration of medications.

Physician's orders dated _____ listed _____ 30 units daily and _____ 20 Units nightly and _____ sliding scale

POS dated _____ indicated _____ sliding scale:

200-250- take 2 Units (U),

251-300 = 4 U

301-350= 6 U

351-400 8 U

400 =10 U and call MD

The _____ 2013 MOR listed the _____ sliding scale and was indicated as given by the unlicensed staff. The MOR was blank on 11/9, _____ AM & noon; _____ noon; _____ to _____ noon, _____ noon and _____ AM.

The _____ MOR listed the _____ sliding scale and was indicated as given by the unlicensed staff. The MOR was blank on 12/9, _____ and _____ to _____ AM.

The _____ 2014 listed _____ and was blank at noon from 1/3 to _____

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In an interview with the administrator on _____ at approximately 5:30 PM who stated the residents got the medications but the staff forgot to sign the MORs.

Class III

0055-Medication - Storage and Disposal 58A-5.0185(6) FAC

Based on observations and interview the facility failed to ensure all medications were secure at all times.

Findings:

Observations at approximately 1 PM during the medication pass; staff A unlocked the medication drawer and obtained the medication for resident #5 and walked away without closing the drawer and locking it. She continued to assist residents #4 and #3 with their medications and the drawer remained unlocked the entire time. The drawer was in a file cabinet by the foyer as you entered the facility.

In an interview with the administrator on _____ at approximately 1:30 PM she stated the staff was nervous.

Class III

0078-Staffing Standards - Staff 58A-5.019(2) FAC

Based on personnel record review and interview the facility failed to ensure all staff were assigned duties consistent with his/her level of education, training, preparation, and experience and allowed them to conduct _____ sugar testing, administer medications that included _____, and exercise judgment as to whether or not give a medication.

Findings:

In an interview on _____ with the administrator at approximately 10 AM, who stated resident #1 had _____ sugar testing 3 times a day by whomever worked that day. Resident #2 also got _____ sugar test and was on _____ and used an _____ pen

In an interview with staff A on _____ at approximately 10:50, she stated resident #2 was on _____. She stated "I get her _____ ready and we do finger sticks".

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In an interview with staff B on _____ at approximately 11:30 AM, she stated one resident needed sliding scale _____, "resident #2 has sliding scale and we go by sliding scale and _____ sugar. We check the _____ sugar for resident #1"

In an interview with staff C on _____ at approximately 1 PM she stated she helped resident # 2 with her _____ injection "I get it ready and she injects it. I get it ready I turn the dial".

1. Resident record review at approximately 3 PM for resident # 1 revealed a health assessment report dated _____ indicated _____ type II, _____ and high _____. She was alert with _____ poor memory, and was on Hospice with Vitas. She needed administration of medications.

Hospice order dated _____ facility to monitor _____ twice a day; the physician is to be called for _____ sugar greater than 400. Order dated _____ call MD greater than 300

The _____ 2013 Medication Observation Record (MOR) listed finger sticks _____ sugar in the morning and _____ sugar testing at noon. The MOR contained the initials of the care givers who were not nurses. The MOR was blank on _____. The MOR also listed Promethean 25 mg suppositories insert 1 per _____ every 6 hours as needed for _____ and _____. The MOR indicated as evident by the staff initials that the medication was given on 11/7, 11/9, _____ and from _____ to _____.

The _____ 2013 MOR listed finger sticks -morning, noon and evening and _____ AM and PM. _____ 10 mg one tablet by mouth twice daily and hold for _____ lower than 120 and _____ 25 mg 2 times a day, hold for _____ lower than 120. The morning finger sticks were blank on _____ & _____. The noon finger sticks were blank on _____ & _____ to _____.

The MOR dated _____ listed _____ 10 mg one tablet by mouth twice daily and hold for _____ lower than 120. Another MOR dated _____ indicated take _____ 2 times a day, if _____ pressure is less than 120 hold _____ and _____.

The _____ 2013 MOR also listed _____ 25 mg 2 times a day, hold for _____ lower than 120. The _____ was not documented as taken on _____.

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in AM and 12/5, 12/7, and in PM.

The MOR listed AM and PM and AM and PM sugar. The AM was taken on 1/5; the PM was taken on 1/3 to

The AM sugar was taken on 1/5 & and the PM sugar was taken on 1/3 to. The MOR contained the initials of the facility staff that were not nurses and not qualified to administer medications.

2. Resident record review for resident #2 revealed a health assessment, not dated indicated II, failure, chronic insufficiency and. Assistance was needed with self-administration of medications.

Physician's orders dated listed 30 units daily and 20 Units nightly and sliding scale.

POS dated indicated sliding scale:

200-250- take 2 Units (U),

251-300 = 4 U

301-350= 6 U

351-400 8 U

400 =10 U and call MD

The 2013 MOR listed the sliding scale and was given by the unlicensed staff. The MOR was blank on 11/9, AM & noon; noon; to noon, noon and AM. 30 Units in AM and 20 units in the evening were marked as given by the unlicensed staff from 11/1 to

The MOR listed the sliding scale and was given by the unlicensed staff. The MOR was blank on 12/9, and to AM. 30 Units in AM and 20 units in the evening were marked as given by the unlicensed staff from 12/1 to

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The 2014 listed sliding scale and was given by the unlicensed staff. The MOR was blank at noon from 1/3 to 30 Units in AM and 20 units in the evening were marked as given by unlicensed staff and were blank on 1/4/in AM.

3. Resident record review for resident #5 revealed a health assessment dated that listed Assistance was needed with self-administration of medications. Physician Order Sheet dated indicated finger stick sugar daily.

The MOR listed one touch ultra -finger sticks once daily and was indicated as done by the unlicensed staff from 11/1/to

The MOR listed one touch ultra -finger sticks once daily and was indicated as done by the unlicensed staff from 12/1/to

The 2014 MOR listed one touch ultra -finger sticks once daily and indicated given by the unlicensed staff from 1/1/to

In an interview with the administrator on at approximately 5:30 PM, who stated she was not aware that the unlicensed staff could not help with the sugar testing or hold medications based on reading.

Class III

0093-Food Service - Dietary Standards 58A-5.020(2) FAC
Based on observations and interview the facility failed to maintain a 3-day supply of nonperishable foods that included water.

Findings:

During the facility tour on at approximately 9 AM the administrator stated the facility census was 5 residents.

Review of the resident contract at approximately 1 PM revealed the facility would provide 3 meals a day.

Observations of the facility emergency food supply and the food pantry at approximately 2

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PM noted there were 10 gallons of water available.

Based on a census of 5 residents and the meals contracted to provide the facility needed 1 gallon of water per resident x 3 for a total of 18 gallons.

In an interview with the administrator on at approximately 2 PM she stated she did not realize that she was low on water.

Class III

0167-Resident Contracts 58A-5.025(1) FAC

Based on resident record review and interview the facility failed to ensure the resident contracts for 2 of 5 sampled residents (#1 & #2) contained all the necessary requirements.

Findings:

Individual resident record review for residents #1 and #2, at approximately 3 PM revealed that the contracts did not include a statement to inform the residents or responsible party that as part of the continued residency criteria, a resident must have a face-to-face medical examination by a licensed health care provider at least every 3 years after the initial assessment, or after a significant change, whichever came first.

In an interview with the administrator at approximately 3 PM who stated that the above information was not included in the resident's contract, as she was not aware of the change.

Class ...



RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

2014

Administrator
Golden Wings Wendel
3116 Wendel Rd Se
Melbourne, FL 32909

Dear Administrator:

Re: Biennial w/LNS

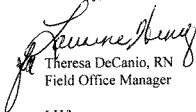
This letter reports the findings of a state licensure survey that was conducted on 2014 by representative(s) of this office.

Attached is the provider's copy of the State (5000-3547) 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 2014, 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

