



RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

2014

Administrator
Somerset
2450 Dora Avenue
Tavares, FL 32778

Dear Administrator:

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

Enclosed 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. Should you have any questions please call Jasmine Hayes, Health Facility Evaluator Supervisor at (386) 462-6201.

Sincerely,

Kriste J. Mennella
Field Office Manager

KJM/amw

Enclosure



AGENCY FOR HEALTH CARE
ADMINISTRATION

PRINTED: 03/10/2014
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER: AL11910627	(X3) DATE SURVEY COMPLETED 02/18/2014
NAME OF PROVIDER OR SUPPLIER Somerset	STREET ADDRESS, CITY, STATE, ZIP CODE 2450 Dora Avenue Tavares, FL 32778	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAG AND REGULATORY IDENTIFYING INFORMATION)		

List of Tags Cited:

St - A - 0078 - 58a-5.019(2) Fac - Staffing Standards - Staff S-S= D
 St - A - 0081 - 58a-5.0191(2) Fac - Training - Staff In-Service S-S= D
 St - A - 0082 - 58a-5.0191(3) Fac - Training - S-S= D
 St - A - 0090 - 58a-5.0191(11) Fac - Training - S-S= D

Specific Tag Findings:

0000-Initial Comments

An unannounced re-licensure survey was conducted on 2014 at Somerset, an Assisted Living Facility. Deficient practice was identified during the survey.

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

Based on record review and interview, the facility failed to ensure three of three staff reviewed submitted statements from a health-care provider indicating they were free from within 30 days of hire (Staff A, B, and C). The facility also failed to ensure two of three staff members submitted statements from a health-care provider indicating they were free from communicable within 30 days of hire (Staff B and C).

The findings include:

- On a review of Staff A's employee record revealed Staff A was hired on . Further review revealed Staff A had not submitted a statement from a health-care provider stating she was free from .
- On a review of Staff B's employee record revealed Staff B was hired on . Further review of Staff B's employee record revealed Staff B had not submitted a statement from a health-care provider stating she was free from communicable . Staff B had no submitted a statement from health care provider stating she was free from .
- On a review of Staff C's employee record revealed Staff C was hired on . had not submitted a statement from a health-care provider stating she was free from communicable . Staff C had no submitted a statement from health care provider stating she was free from .
- On at 6:37 PM, an interview was conducted with the administrator. She acknowledged that the required communicable statements and freedom from statements were never obtained.

Class III

0081-Training - Staff In-Service 58A-5.0191(2) FAC

Based on record review and interview, the facility failed to ensure that one of three staff members received a

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minimum of 1 hour in-service training in control prior to providing personal care to residents (Staff C).

The findings include

1. On , a review of staff C ' s employee record revealed Staff C had not received a minimum of 1 hour in-service training in control prior to providing personal care to residents.
2. On at 6:37 PM, an interview was conducted with the administrator. She acknowledged that staff C had never received the training.
Class III

0082-Training - 58A-5.0191(3) FAC

Based on record review and interview, the facility failed to ensure that one of three staff members received training in within 30 days of employment (Staff C).

The findings include:

1. On , a review of staff C ' s employee record revealed staff C was hired in Further review revealed Staff C had not received training in
2. On at 6:37 PM, an interview was conducted with the administrator. She acknowledged that Staff C had not received training.

Class III

0090-Training - 58A-5.0191(11) FAC

Based on record review and interview, the facility failed to ensure three of three staff members received training in within 30 days of employment (Staff A, B, and C).

The findings include:

1. On a review of Staff A ' s employee record revealed Staff A was hired on Further review revealed Staff A had not received training on
2. On a review of Staff B ' s employee record revealed Staff B was hired on Further review revealed Staff B had not received training on
3. On a review of Staff C ' s employee record revealed Further review revealed Staff C had not received training on
4. On at 6:37 PM, an interview was conducted with the administrator. She acknowledged that Staff A, B, and C had not received the training on

Class III