AHCA
FLORIDA AGENCY FOR HEALTH CARE ADMINISTRATION

RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

, 2014

Administrator
Henderson House
907 East Orange Avenue
Eustis, FL 32726

Dear Administrator:

This letter reports the findings of a state licensure survey that was conducted on , 2014 by representative(s) 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(s). Should you have any questions please call this office at (386) 462-6201.

Sincerely,

Kristie J. Mennella
Field Office Manager

KJM/amw
Enclosure

Headquarters
2727 Mahan Drive
Tallahassee, FL 32308
http://ahca.myflorida.com

Alachua Field Office
14101 N W Hwy 441, Suite 800
Alachua, FL 32615-5689
Phone (386) 462-6201; Fax (386) 418-5300

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11932557	03/11/2014
NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE	
Henderson House	907 E. Orange Avenue Eustis, FL 32726	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAG AND REGULATORY IDENTIFYING INFORMATION)		

List of Tags Cited:

St - A - 0026 - 58a-5.0182(2) Fac - Resident Care - Social & Leisure Activities S-S= D
St - A - 0081 - 58a-5.0191(2) Fac - Training - Staff In-Service S-S= D
St - A - 0093 - 58a-5.020(2) Fac - Food Service - Dietary Standards S-S= D
St - A - L243 - 58a-5.0191(8) Fac - Lmh - Training S-S= C

Specific Tag Findings:

0000-Initial Comments

On 10-11, 2014 a Change of Ownership with LMH and LNS licensure survey was conducted at Henderson House ALF. There were deficiencies as a result of this survey. The facility was not in compliance at this time.

0026-Resident Care - Social & Leisure Activities 58A-5.0182(2) FAC
Based on observations and interview the facility failed to offer ongoing scheduled activities for at least 12 hours per week for 37 of 37 residents in the facility.

Findings:

Observations of the resident upon entrance to the facility on at 10:00 am revealed that they were sitting outside smoking or inside sitting in chairs, one resident was observed watching television.

Review of the activity calendar revealed that it was non specific to how many hours the residents were to participate in each activity. Staff was not encouraging the residents to participate in an activity.

During the interview with employee #A on at 8:00 AM she stated that she was assigned to do the activities but with working on the floor she has not had the time.

Interview with resident #6 on at 8:19 am he stated that the facility will play games at times. During the interview with resident #5 on at 8:45 am she stated that they play bingo and throw a ball once a month.

Class III

0081-Training - Staff In-Service 58A-5.0191(2) FAC
Based on record review and interview the facility failed to ensure that 2 (A and B) of 3 employees received the required training within 30 days of hire.

Findings:

Review of the personnel files on for Employee A revealed a date of hire of . A review of Employee B's personnel file revealed a date of hire of . The files for Employee A and Employee B did not contain the required training for recognizing and reporting , neglect &

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During the interview with the administrator on at 1:00 pm she stated that she was unaware of the missing training.

Class III

0093-Food Service - Dietary Standards 58A-5.020(2) FAC
Based on observation, interview and facility document review, the facility does not have a plan for obtaining water in an emergency situation and is not coordinated with and reviewed by the local disaster preparedness authority.

Findings:

Interview with the facility consultant and President of the facility on at 2:30 PM stated that they have an emergency water supply for the residents and staff during an emergency. When asked to see the water supply, they proceeded to walk towards the rear of the facility.

Observations of the facility's water supply on at approximately 2:30 p.m. revealed A large 250 gallons container of a non potable water (water not safe for drinking) located at the rear of the facility.

Interview with the facility consultant on at 2:35 PM stated that the container is flushed everytime there is a hurricane alert and she does not maintain a log as to how often it is flushed. The facility does not have sufficient water for drinking during an emergency. Facility Consultant stated that the water supply was not part of the contract. Review of the Henderson House ALF Comprehensive Emergency Management Disaster Plan does not reveal a water emergency supply plan for obtaining water in an emergency. The facility Consultant concurred and agreed that water supply was not included in the contract.

Class III

L243-LMH - Training 58A-5.0191(8) FAC
Based on record review and interview the facility failed to ensure 1 (employee C) of 1 employees received the required Limited Mental Health (LMH) training within 6 months of employment.

Findings:

Review of the personnel files on for Employee C date of hire revealed that the files did not contain the required LMH training documentation that was to be conducted within 6 months of the employees hire date.

During the interview with the administrator on at 1:00 pm she stated that she was unaware of the missing training.

Class III