STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11922155	04/04/2014
NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE	
Belle Vista Bluffs	1138 Rosemary Drive Largo, FL 33770	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAG AND REGULATORY IDENTIFYING INFORMATION)		

List of Tags Cited:

St - A - 0055 - 58a-5.0185(6) Fac - Medication - Storage And Disposal S-S= D
St - A - 0077 - 58a-5.019(1) Fac - Staffing Standards - Administrators S-S= D
St - A - 0081 - 58a-5.0191(2) Fac - Training - Staff In-Service S-S= D
St - A - 0083 - 58a-5.0191(4) Fac - Training - First Aid And S-S= D
St - A - 0084 - 58a-5.0191(5) Fac - Training - Assis Self-Admin Meds & Med Mgmt S-S= D
St - A - 0086 - 58a-5.0191(9) Fac - Training - Adrd S-S= D
St - A - 0090 - 58a-5.0191(11) Fac - Training - S-S= D

Specific Tag Findings:

0000-Initial Comments

Assisted Living Facility

An abbreviated biennial state licensure survey was conducted on

The Belle Vista Bluffs, assisted living facility, had deficiencies at the time of the visit.

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

Based on observation and interviews, the facility failed to store residents' medications separately for all residents with centrally stored medications.

Findings include:

Observation of the medication cart during the medication pass on at approximately 12:15pm revealed that there was no separation of residents' medications in the drawer. Different residents' medications were side by side or back to back in the drawer.
Interview with Staff D on at approximately 12:15pm revealed that she was not sure why all residents medications were all together in the drawer.
In the interview with the administrator on at approximately 3:45pm, she stated that they ordered dividers for the medications from the pharmacy and they would be there on Monday.

Class III

0077-Staffing Standards - Administrators 58A-5.019(1) FAC

Based on interviews and record review, the facility failed to ensure that the facility manager (Staff A) had completed the assisted living core training requirement within 3 months of hire.

Findings include:

Review of Staff A's employee records did not reveal a certificate for the completion of core training or the required competency test. Staff A's date of hire was

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In the interview with Staff A on at approximately 2:35pm, he stated that he took core training in 2013, but had not yet taken the test. The administrator has two facility's and he helps manage both. The certificate for the core training was not at the facility, but he does have it.
Interview with the administrator on at approximately 3:45pm revealed that the manager will plan to complete the required test for core training.

Class III

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

Based on record reviews and interview, the facility failed to ensure that staff had completed all required in-service training within 30 days of hire for 3 (Staff A, B, and C) of 3 staff members sampled for employee review.

Findings include:

Review of the employee records for Staff A, B, and C revealed the following dates of hire:
Staff A -
Staff B - 11/2005
Staff C -
Review of Staff A's and B's employee records revealed no training certificate for recognizing and reporting resident , neglect, and (1 hour).
Review of Staff C's employee records revealed no training certificate for activities of daily living (3 hours).
In the interview with the administrator on at approximately 3:45pm, she stated that she believed the missing training was in another file at her other office.

Class III

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

Based on record reviews and interview, the facility failed to ensure that at least one staff member who had documentation of completion of valid and current first aid training, be in the facility at all times for 1 (Staff A) of 3 staff members sampled for employee review.

Findings include:

Review of Staff A's employee record revealed no valid certificate or documentation for first aid.
Review of the staff schedule dated 2014 (also reported as 2014 staff schedule by Staff A)revealed that Staff A was scheduled to work in the facility by himself from 2:00 p.m. to 3:30 p.m., Monday through Friday.
In the interview with Staff A on at approximately 3:45pm, he acknowledged that he needed to provide a copy of his first aid card that he had indicated he already possessed.

Class III

0084-Training - Assis Self-Admin Meds & Med Mgmt 58A-5.0191(5) FAC

Based on record review and interview, the facility failed to ensure that all staff who assist residents with

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medications had completed the initial 4 hours of training for assistance with self-administration of medication for 1 (Staff C) of 3 staff members sampled for employee review.

Findings include:

Review of Staff C's employee record revealed that she had completed 2 hours of update training for assistance with self-administration of medication on , but there was no documentation of the initial 4 hours of training.
Review of the staff schedule for 2014 revealed that Staff C was scheduled to work by herself Monday through Friday from 3:30 p.m. to 10:00 p.m.
Interview with the administrator on at approximately 3:45 p.m. revealed that she believed the missing training was in another file at her other office.

Class III

0086-Training - ADRD 58A-5.0191(9) FAC

Based on observation, record reviews and interview, the facility failed to ensure that all staff working in this secured memory care facility have completed 4 hours of Level I training for and related (ADRD) within 3 months of hire for 2 (Staff A and C) and 4 additional hours of ADRD Level II training within 9 months of hire for 1 (Staff B) of 3 staff members sampled for employee review.

Findings include:

Observation of the outside of the facility on at approximately 10:00am revealed a sign posted on the glass next to the front entrance that stated, "We are a secure memory care facility..."
Review of Staff A's employee records revealed that his date of hire was
Review of Staff C's employee records revealed that her date of hire was
There was no documentation of completion for ADRD Level I training in Staff A or Staff C's records.
Review of Staff B's employee records revealed that she was hired in She had a certificate for ADRD Level I training completed There was no documentation of completion for ADRD Level II training in Staff B's records.
Interview with the administrator on at approximately 3:45am revealed that she believed that the missing training was in another file in her other office.

Class III

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

Based record reviews and interview, the facility failed to ensure that staff had completed one hour of training for within 30 days of hire for 3 (Staff A, B, and C) of 3 staff members sampled for employee review.

Findings include:

Review of the employee record's for Staff A, B, and C revealed the following dates of hire:

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Staff A - , Staff B - , and Staff C -
There was no documentation of training for in Staff A, Staff B, or Staff C's records.
In the interview with the administrator on at approximately 3:45 p.m., she stated that she believed that training was done a year ago, but acknowledged Staff A and C would not have had it.

Class III

AHCA
FLORIDA AGENCY FOR HEALTH CARE ADMINISTRATION

RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

. 2014

Administrator
Belle Vista Bluffs
1138 Rosemary Drive
Largo, FL 33770

Dear Administrator:

This letter reports the findings of a biennial 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 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 **Paul Brown**, HFES, at 727-552-2000.

Sincerely,

Patricia Reid Caufman
FOV Field Office Manager

PRC/kpr

Enclosure: State (5000-3547) Form

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