STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11910538	04/07/2014
NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE	
Robinsons Residential Care	11921 Caruso Drive Panama City, FL 32404	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAG AND REGULATORY IDENTIFYING INFORMATION)		

Revisit Repeat Tags:
0000-Initial Comments-
0030-Resident Care - Rights & Facility Procedures-58a-5.0182(6) Fac; 429.28 Fs
0078-Staffing Standards - Staff-58a-5.019(2) Fac
0152-Physical Plant - Safe Living Environ/other-58a-5.023(3) Fac

Revisit New Tags:
0160-Records - Facility-58a-5.024(1) Fac
0164-Records - Inspection Availability-58a-5.024(4) Fac

0000-Initial Comments

On 7, 2014, an unannounced revisit survey was conducted at Robinson's Residential Care Assisted Living Facility in Callaway, Florida. Deficiencies were found at the time of the visit.

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

Based on observations and staff interviews, the facility failed to ensure all residents live in a safe and decent living environment for all residents.

The findings include:

On , 2014 at 3:05pm tour of the facility revealed the following and photographic evidence was obtained:

on the west hall revealed still not completely fixed. There are missing tiles on the floor around the toilet and light fixtures hanging from the ceiling with exposed wires. The air vent in the ceiling is missing. Interview with the Assistant Administrator at this time revealed the useable and the plumbing had been fixed; however, they only have one handyman working on the problems at the facility and he still has not been able to complete this).

The closet on the West Hall still has no door knob.

on the East Hall revealed a where the wood appears to be separating from from the frame of the vanity on the left side. There is also a black substance that covers the area where the wood has separated from the frame. The tile floor was also covered with dirt and debris.

on the East Hall has a dresser with no top drawer. Interview conducted with Resident #1 on at 3:08pm revealed this was his dresser and it has been missing a drawer "for a long time."

on the East Hall had a dresser with the drawer knobs/handles missing.

on the East Hall had a dresser with the drawer knobs/handles missing.

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on the East Hall had a dresser with broken drawers that did not appear to fit the dresser frame. On at 3:13pm an interview with the Assistant Administrator revealed there was a dresser in the hall that was supposed to replace the dresser in and the resident had moved that dresser into the hall and replaced it with the existing dresser. This surveyor then attempted to move the dresser in the hall away from the wall. At this time the top of the dresser came off revealing exposed nails and sharp edges.

on the East Hall had a strong smell of and broken drawers on white dresser.

on the East Hall had a broken dresser belonging to Resident #2. Interview at approximately 3:27pm with Resident #2 revealed the dresser has been broken for a long time.

On , 2014 at 3:30pm observation of at the rear end of the East Hall revealed the be in the same condition it was in during the last survey. The vanity was broken and separating. There was bug feces on the inside of the cabinet door and there were broken drawers.

On , 2014 at 3:51pm observation of the light fixtures hanging above the front inside entrance to the facility to be covered with brown dust/dirt. There was also a brownish/reddish substance splatered onto the ceiling above the desk just inside the front entrance. Interview with the Administrator at this time revealed this substance was a drink that had exploded and the facility is going to paint the ceilings.

Class III

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

Based on record review and staff interview, the facility failed to ensure staff had annual updated statement from a health care provider that the staff does not have ( ) for 7 of 7 staff reviewed.

The findings include:

On , 2014 at 3:31pm an interview was conducted with the Assistant Administrator revealed that none of the staff have obtained their updated statements. She stated it was because the nurse practitioner who sees the residents at the facility was supposed to conduct screenings on all staff at the facility; however, the nurse practitioner is no longer working for the health care provider who was providing medical care to the residents. They have not scheduled any staff to receive their screenings. The Assistant Administrator stated that none of the staff personnel folders were onsite at the facility because she has been working on organizing all staff records at me making them into binders so they are organized. She stated she has been working 12 hours a day trying to clean this place up so she took them home to work on them.

Class III

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0152-Physical Plant - Safe Living Environ/Other 58A-5.023(3) FAC

Based on observations, resident and staff interview, the facility failed to provide a safe living environment and failed to ensure that all existing arhitectural and structural systems were maintained in good working condition for 3 of 5 and failed to provide residents with working dressers for 6 of 30 residents.

The findings include:

On , 2014 at 3:05pm tour of the facility revealed the following and photographic evidence was obtained:

on the west hall revealed still not completely fixed. There are missing tiles on the floor around the toilet and light fixtures hanging from the ceiling with exposed wires. The air vent in the ceiling is missing. Interview with the Assistant Administrator at this time revealed the useable and the plumbing had been fixed; however, they only have one handyman working on the problems at the facility and he still has not been able to complete this .

The closet on the West Hall still has no door knob.

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black substance that appeared to be bug feces on the inside of the cabinet door and there were broken drawers.

Class III

0160-Records - Facility 58A-5.024(1) FAC
Based on staff interview and record review, the facility failed to keep an accurate, up to date admission and discharge log.

The findings include:

Record review of the admission and discharge log for the facility revealed Resident #3 admitted with no date of birth or admitted from information, #4 admitted and #5 admitted . None of these residents had a discharge date or information listed on the log.

On , 2014 at approximately 3:50pm an interview conducted with the Assistant Administrator revealed Resident #3 was some time ago and never returned to the facility. Resident #4 moved out about one month ago and Resident #5 was discharged from the facility on . She stated she was not aware that the log was not up to date. She stated that she has been working 12 hours a day trying to care for the residents as well as get all the facility records organized and up to date.

Class III

0164-Records - Inspection Availability 58A-5.024(4) FAC
Based on observations and staff interviews, the facility failed to ensure that all staff personnel records were available for inspection at all times for 7 of 7 staff reviewed for updated ( ) statements.

The findings include:

On , 2014 at 3:31pm an interview was conducted with the Assistant Administrator revealed that none of the staff have obtained their updated statements. She stated it was because the nurse practitioner who sees the residents at the facility was supposed to conduct screenings on all staff at the facility; however, the nurse practitioner is no longer working for the health care provider who was providing medical care to the residents. They have not scheduled any staff to receive their screenings. The Assistant Administrator stated that none of the staff personnel folders were onsite at the facility because she has been working on organizing all staff records at me making them into binders so they are organized. She stated she has been working 12 hours a day trying to clean this place up so she took them home to work on them.

Class III

AHCA
FLORIDA AGENCY FOR HEALTH CARE ADMINISTRATION

RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

, , 2014

Administrator
Robinsons Residential Care
11921 Caruso Drive
Panama City, FL 32404

Dear Administrator:

This letter reports the findings of a revisit survey conducted on , 2014 by a representative of this office. Enclosed is the provider's copy of the Statement of Deficiencies (State Form 5000-3547), which references the uncorrected deficiencies and new deficiencies identified during the revisit.

You will not receive a copy of this report in the mail; you will only receive this faxed report. **All deficiencies shall be corrected no later than , 2014.**

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 this office at 850-412-4540.

Sincerely,

Jonah Heiberg, M.S.W.
Field Office Manager

DH/pm
Enclosure

BBT7

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