STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11968530	06/18/2014
NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE	
Shangri-La Iii Alf, Llc	808 Gillen Ave Nw Palm Bay, FL 32907	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAG AND REGULATORY IDENTIFYING INFORMATION)		

List of Tags Cited:
St - A - 0081 - 58a-5.0191(2) Fac - Training - Staff In-Service S-S= D
St - A - 0090 - 58a-5.0191(11) Fac - Training - S-S= D

Specific Tag Findings:

0000-Initial Comments
Limited Nursing Services monitoring was conducted on Shangri-La III ALF LLC had deficiencies found at the time of the visit.

0081-Training - Staff In-Service 58A-5.0191(2) FAC
Based on personnel record review and interview the facility failed to ensure 1 of 2 staff (B) received the mandated in-services training within 30 days of hire.

Findings:

Review of the 2014 staff schedule on revealed the staff worked 24 hour shifts and worked as the sole caregiver and prepared and served food.

Personnel record review for staff B on at approximately 3 PM revealed she was hired in 2013. Continued review revealed no evidence to confirm she received an in-service training in safe food handling practices, nor was there evidence she attended the Assisted Living Core training, therefore exempt from the in-service. There was no evidence the staff received a 3 hour in-service training regarding 1. Resident behavior and needs and 2. Providing assistance with the activities of daily living. The review revealed no evidence she was a Certified Nursing Assistant (CNA) or a Home Health Aide exempt from the 3 hour in-service training.

In an interview with the administrator on at approximately 2:24 PM, who stated the staff had the training but a certificate was not available; it needed to be printed.

An opportunity was given to the administrator to print the certificates and submit them by electronic mail (e-mail) to the surveyor. It was explained to the administrator the documentation of training had to be dated within 30 days of hire to be accepted.

An e-mail was received on at approximately 4 PM included certificates for staff B that were dated (after the monitoring visit and over 30 days of hire). A call was received by the administrator's assistant, on at approximately 4 PM he stated he had just e-mailed

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the certificates; the staff just completed the in-services.

Class III

0090-Training - 58A-5.0191(11) FAC
Based on personnel record review and interview the facility failed to ensure 1 of 2 staff (B) received a 1hour in-service training within 30 days of hire, regarding the facility's policies and procedures regarding

Findings:

Personnel record review for staff B, on at approximately 3 PM revealed she was hired in 2013. Continued review revealed no evidence to confirm she received a 1 hour in-service training regarding the facility's policies and procedures regarding

In an interview with the administrator on at approximately 2:24 PM, who stated the staff had the training but a certificate was not available; it needed to be printed.

An opportunity was given to the administrator to print the certificates and submit them by electronic mail (e-mail) to the surveyor. It was explained to the administrator the documentation of training had to be dated within 30 days of hire, to be accepted.

An e mail was received on at approximately 4 PM. Included was the certificate for the training for staff B that was dated (after the monitoring visit and over 30 days of hire). A call was received by the administrator's assistant, on at approximately 4 PM he stated he had just e-mailed the certificates; the staff just completed the in-services.

Class III

RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

, 2014

Administrator
Shangri-La III ALF, LLC
808 Gillen Ave NW
Palm Bay, FL 32907

RE: LNS monitoring

Dear Administrator:

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 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

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