| STATEMENT OF DEFICIENCIES | (X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER: | (X3) DATE SURVEY COMPLETED |
|---|---|---|
| | AL11910126 | 06/11/2014 |
| NAME OF PROVIDER OR SUPPLIER | STREET ADDRESS, CITY, STATE, ZIP CODE | |
| Grand Villa Of Altamonte Springs | 433 Orange Drive Altamonte Springs, FL 32701 | |
| 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 - [redacted] 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 - [redacted] S-S= D
St - A - 0091 - 58a-5.0191(12) Fac - Training - Documentation & Monitoring S-S= D
St - A - 0161 - 58a-5.024(2) Fac - Records - Staff S-S= D

**Specific Tag Findings:**

0000-Initial Comments
Limited Nursing Services monitoring visit was conducted on [redacted] Grand Villa of Altamonte Springs had deficiencies found at the time of the visit.

0078-Staffing Standards - Staff 58A-5.019(2) FAC
Based on record review and interview the facility failed to ensure 2 of 6 sampled staff (B & D) had freedom from [redacted] documented annually.

Findings:

Review of personnel records revealed Staff B had a negative chest x-ray on [redacted] and Staff D had a negative chest x-ray on [redacted] There was no documentation to review that indicated Staff B and Staff D had freedom from [redacted] documented annually.

In an interview with the administrator on [redacted] at approximately 12 PM who stated there was no documentation in the personnel files for annual [redacted] results for Staff B and Staff D.

Class III

0081-Training - Staff In-Service 58A-5.0191(2) FAC
Based on record review and interview the facility failed to ensure staff had the required in-service training for 2 of 6 sampled staff (C & D) within 30 days of hire.

Findings:

Review of personnel files for direct care staff revealed the following staff did not have the required in-service training within 30 days of hire:

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1. Staff C - date of hire , needed training in Elopement Response Policy and Procedures and one hour of Emergency Preparedness and Evacuation and Incident Reporting (due

2. Staff D - date of hire , needed training in Elopement Response Policy and Procedures, one hour of Emergency Preparedness and Evacuation and Incident Reporting and one hour of Resident Rights and Recognizing and Reporting and Neglect (due

In an interview with the administrator on at approximately 12 PM who stated the training certificates were not in Staff C and Staff D's personnel files.

Class III

0082-Training - 58A-5.0191(3) FAC
Based on record review and interview the facility failed to ensure 1 of 6 sampled staff (D) completed a one-time education course on and that included the topics prescribed in the Section 381.0035, F.S., within 30 days of employment.

Findings:

Review of personnel files revealed Staff D, who was hired on , did not have documentation she completed an education course on within 30 days of employment (due

In an interview with the administrator on at approximately 12 PM who stated the above training was not in the staff's personnel file and he did not indicate if the staff received the training.

Class III

0086-Training - ADRD 58A-5.0191(9) FAC
Based on record review and interview the facility failed to ensure 2 of 6 sampled direct staff (C &D) had 4 hours of training in and Related (ADRD) Level I, within 3 months of hire and an additional 4 hours of ADRD Level II training and a 4 hour annual update in ADRD by an approved provider within 9 months of hire.

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| NAME OF PROVIDER OR SUPPLIER | STREET ADDRESS, CITY, STATE, ZIP CODE | |
| Grand Villa Of Altamonte Springs | 433 Orange Drive Altamonte Springs, FL 32701 | |
| SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAG AND REGULATORY IDENTIFYING INFORMATION) | | |

Findings:
The facility provided a secure unit to their residents.

Review of personnel files revealed for staff that had direct contact and provided direct care to residents in the memory care unit:

1. Staff C who was hired on , did not have documentation that she had received the initial ADRD Level I training within 3 months of hire or the ADRD Level II training within 9 months of hire and the annual 4 hour update in 2014. Review of a certificate dated revealed the staff had 3 hours of training in . The certificate did not indicate the training was ADRD Level I.

2. Staff D who was hired on did not have documentation that she had received the initial ADRD Level I training within 3 months of hire or the ADRD Level II training within 9 months of hire and the annual 4 hour update in ADRD in 2014.

In an interview with the administrator on at approximately 12 PM at approximately 12 PM who stated the above training was not in the staff's personnel file and he did not indicate if the staff received the training

Class III

0090-Training - 58A-5.0191(11) FAC
Based on record review and interview the facility failed to ensure currently employed direct care staff received at least one hour of training in the facility's policies and procedures regarding within 30 days of employment for 2 of 6 sampled staff (C & D).

Findings:

Review of personnel files revealed there was no documentation to indicate Staff C, date of hire (due and Staff D, date of hire (due who provided direct care, had 1 hour of training within 30 days of hire.

In an interview with the administrator on at approximately 12 PM who stated the above training was not in the staff's personnel file and he did not indicate if the staff received the training.

Class III

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0091-Training - Documentation & Monitoring 58A-5.0191(12) FAC
Based on record review and interview the facility failed to ensure training certificates included the number of hours of the training for 1 of 6 sampled staff (A).

Findings:

Personnel record review for Staff A, date of hire revealed an Control test dated However, there was no certificate available for review with the number of hours of training and the trainer's name.

In an interview with the administrator on at approximately 12 PM who stated he was not aware a certificate was not completed for the training.

Class III

0161-Records - Staff 58A-5.024(2) FAC
Based on record review and interview the facility failed to ensure personnel records contained a copy of the original employment application with references for 1 of 6 sampled staff (D).

Findings:

Review of personnel files revealed staff D, date of hire , did not have a copy of the original employment application with references in her file

In an interview with the administrator on at approximately 12 PM who stated the job description was not in the above employee's personnel file.

Class III

RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

, 2014

Administrator
Grand Villa Of Altamonte Springs
433 Orange Drive
Altamonte Springs, FL 32701

**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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