STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11968401	08/12/2014
NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE	
S&b Kingdom Care, Llc	53 Riviere Lane Palm Coast, FL 32164	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAG AND REGULATORY IDENTIFYING INFORMATION)		

List of Tags Cited:
St - A - 0000 - - Initial Comments
St - A - 0051 - 58a-5.0185(2) Fac - Medication - Pill Organizers S-S= D
St - A - 0052 - 58a-5.0185(3) Fac - Medication - Assistance With Self-Admin S-S= D
St - A - 0057 - 58a-5.0185(8) Fac - Medication - Over The Counter (otc) Products S-S= D
St - A - 0078 - 58a-5.019(2) Fac - Staffing Standards - Staff S-S= D
St - A - 0079 - 58a-5.019(3) Fac - Staffing Standards - Levels 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 - 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 - 0090 - 58a-5.0191(11) Fac - Training - S-S= D
St - A - Z815 - 408.809, 435.02(2), 435.06 - Background Screening; Prohibited Offenses S-S= C

Specific Tag Findings:

0000-Initial Comments
A biennial licensure survey was conducted on S&B Kingdom Care had Licensure deficiencies found at the time of the visit.

0051-Medication - Pill Organizers 58A-5.0185(2) FAC
Based on observation, record review and staff interview the facility failed to ensure only residents who have been determined to be able to self-administer medications used pill organizers and that only a nurse or pharmacist can manage the pill organizer for 3 residents out of 3 sampled residents (#1,#2 and #3).

The findings include:

Observation of a medication pass on at 12:00 pm for Resident #3 revealed Employee B had put Resident #3 ' s medications into a pill crusher prior to the medication pass observation.

Record review of the Resident Health Assessment for Assisted Living Facilities, Agency for Health Care Administration (AHCA) Recommended Form 1823 for Residents #1, #2 and #3 revealed that each resident requires assistance with self-administration of medication.

An interview with Employee B was held on on at 12:01 pm. When asked where the medications containers were stored for the pills in the pill crusher she stated got them out of a pill organizer and started to walked to a locked filing cabinet in another the house. She opened the cabinet to show this surveyor where the medications were stored. Observed inside the cabinet were multiple pill organizers with medications stored inside them. Employee B stated she takes the pill organizer out of the filing cabinet for each resident for that day and time. She stated, she takes it to the kitchen where she empties the contents into the pill crusher, and crushes the medications for Resident #3 prior to mixing it with applesauce. She stated the other two residents don't need their medications crushed. She explained that Employee A fills the pill organizers ahead of time and then they are already pre-filled and ready for her to use when she is working.

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An interview with Employee A on at 12:03 pm revealed she sets up the pill organizers for Employee B to use when she ' s not in the facility. She stated " It cuts down on medication errors. " Employee A confirmed she was not a nurse or pharmacist.

Class III

0052-Medication - Assistance with Self-Admin 58A-5.0185(3) FAC
Based on observation, and staff interview the facility failed to ensure unlicensed staff assisting with self-administration of medications verbally prompted one resident (#3) out of 3 sampled residents, to take medication by reading the label to the resident prior to assisting with medication administration.

The findings include:

Observation of a medication pass on at 12:00 pm for Resident #3 revealed Employee B had put the Resident #3 ' s medications into a pill crusher prior to the medication pass observation. She then mixed the crushed medications with applesauce in a coffee cup and gave the cup and a spoon to the Resident #3 and told her to eat her applesauce. The resident took the spoon and ate the applesauce. Employee B did not read the labels of the medications to the resident or tell her that there was medication in the applesauce.

In a interview with Employee B on at 1:10 pm, she stated knew she had not read the labels to the resident prior to assisting the resident with her medications. She stated she knew she was supposed to do that because that was how she had been trained. She indicated the medication containers are locked in the filing cabinet and she only takes out the pre-filled pill organizer when she's conducting medication pass. She stated she was trained to read the labels to the resident from the medication containers and she will do it from now on.

Class III

0057-Medication - Over The Counter (OTC) Products 58A-5.0185(8) FAC
Based on observation, record review and staff interview the facility failed to properly label an Over the Counter (OTC) medication for one out of three sampled residents (#3).

The findings include:

During a medication pass observation on at 12:00 pm, Employee B crushed the prescribed medications for Resident #3 and gave them to her mixed in applesauce. Upon review of the medication vials for the medications given it was observed that an OTC medication was given. The manufacturer's label read: oral tablet 287-180-15.

An interview was conducted with Employee A on 8/12/2014 at 12:30 pm in which she confirmed that Resident #3's name was not on the OTC medication given to the resident.

Class III

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0078-Staffing Standards - Staff 58A-5.019(2) FAC
Based on record review and staff interview the facility failed to ensure the administrator had proof of freedom from documented annually and failed to have two employees (A and B) submitted a statement completed by a health care provider that they are free of communicable including and that they had proof of freedom from documented annually.

The findings include:

A review of the employee files was conducted during the survey on The review revealed no proof of freedom from documented annually for the administrator and Employees A and B. Further review revealed Employees A (Date of hire and B (Date of hire did not have a statement completed by a health care provider that they are free of communicable including

An interview was conducted with Employee A on at 9:00 am in which she confirmed that there is no proof of freedom from documented annually for the administrator and no statement completed by a health care provider that she and Employee B are free of communicable including

Class III

0079-Staffing Standards - Levels 58A-5.019(3) FAC
Based on observation and staff interview the facility failed to maintain a written work schedule that reflected its 24-hour staffing pattern for a given time period.

The findings include:

A tour of the facility was conducted on at 8:35 am. It was observed that no staff schedule was posted.

An interview was conducted with Employee A on at 9:00 am in which she confirmed that there is no staff schedule for the facility.

Class III

0081-Training - Staff In-Service 58A-5.0191(2) FAC
Based on record review and staff interview the facility failed to ensure one employee (B) received training on Recognizing/Reporting , Neglect & , Resident Rights, Activities of Daily Living (ADL), Behavioral Needs and Control within 30 days of hire.

The findings include:

A review of the employee files was conducted during the survey on The review revealed no proof of training on Recognizing/Reporting , Neglect & , Resident Rights, Activities of Daily Living (ADL), Behavioral Needs and Control for Employee B.

An interview was conducted with Employee A on at 4:00 pm in which she confirmed, after she reviewed

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the employee files, that she could not find proof of trainings on Recognizing/Reporting Neglect & Resident Rights, Activities of Daily Living (ADL), Behavioral Needs and Control for Employee B. (Date of hire

Class III

0082-Training - 58A-5.0191(3) FAC
Based on record review and staff interview the facility failed to ensure two employees (A and B) received training on within 30 days of hire.

The findings include:

A review of the employee files was conducted during the survey on The review revealed no proof of training on for Employee A (Date of Hire or Employee B (Date of Hire

An interview was conducted with Employee A on at 4:00 pm in which she confirmed, after she reviewed the employee files, that she could not find proof of a training on for herself or Employee B.

Class III

0083-Training - First Aid and 58A-5.0191(4) FAC
Based on record review and staff interview the facility failed to ensure one employee (B), who is in the facility alone with residents, received training in First Aid.

The findings include:

A review of the employee files was conducted during the survey on The review revealed no proof of First Aid training for Employee B (Date of Hire

An interview was conducted with Employee A on at 4:00 pm in which she confirmed, after she reviewed the employee files, that she could not find proof of a training in First Aid for Employee B.

An interview with Employee B on at 4:10 pm revealed she stated she does not have a valid current card documenting completion of a First Aid course. She confirmed she was been left alone at the facility with the residents.

Class III

0084-Training - Assis Self-Admin Meds & Med Mgmt 58A-5.0191(5) FAC
Based on observation, record review and staff interview the facility failed to ensure the administrator and two employees (A and B) that provide assistance with self-administration of medication, obtained a minimum of 2 hours of continuing education annually.

The findings include:

A review of the employee files was conducted during the survey on The review revealed no proof of

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continuing education training for the administrator (Date of Hire Employee A (Date of Hire and Employee B (Date of Hire for assistance with self-administration of medications annually.

An interview was conducted with Employee A on at 4:00 pm in which she confirmed, after she reviewed the employee files, that she could not find proof of continuing education training for assistance with self-administration of medications annually for herself, the administrator and Employee B.

Class III

0090-Training - 58A-5.0191(11) FAC
Based on record review and staff interview the facility failed to ensure one employee (B) received one hour of training on Policy and Procedures

The findings include:

A review of the employee files was conducted during the survey on . The review revealed no proof of training for Employee B (Date of Hire

An interview was conducted with Employee A on at 4:00 pm in which she confirmed, after she reviewed the employee file for Employee B, that she could not find proof of a training on .

Class III

Z815-Background Screening; Prohibited Offenses 408.809, 435.02(2), 435.06
Based on record review and staff interview the facility failed to conduct background screenings for two employees (A and B).

The findings include:

A review of the employee files was conducted during the survey on . The review revealed no background screening done for Employee A (Date of Hire or Employee B (Date of Hire

An interview was conducted with Employee A on at 4:00 pm in which she stated after she reviewed the employee files that she could not find a copy of the screenings.

Unclassified

RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

2014

Administrator
S&B Kingdom Care, LLC
53 Riviere Lane
Palm Coast, FL 32164

Dear Administrator:

This letter reports the findings of a state biennial licensure survey that was conducted on 2014 by a representative 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 **09/25/2014** 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. Should you have any questions please call this office at

Sincerely,

Robert Dudek for
Jana Meyering, QIDP
Health Facility Evaluator Supervisor
Division of Health Quality Assurance

JD/JM/sm
Enclosure

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