STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11968432	08/25/2014
NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE	
The Village Alf I Corp	301 Kamal Parkway Cape Coral, FL 33904	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAG AND REGULATORY IDENTIFYING INFORMATION)		

List of Tags Cited:
St - A - 0077 - 58a-5.019(1) Fac - Staffing Standards - Administrators S-S= B
St - A - 0080 - 58a-5.0191(1) Fac - Training - Core & Competency Test S-S= D
St - A - 0161 - 58a-5.024(2) Fac - Records - Staff S-S= D

Specific Tag Findings:
This is the result of the Relicensure and Limited Nursing Service (LNS) survey conducted at The Village Corp I in Cape Coral on .

The following is a description of the deficiencies:

0077-Staffing Standards - Administrators 58A-5.019(1) FAC
Based on observation, record review and interview, the facility failed to provide documentation of a high school diploma or GED for the Administrator.

The findings include:

On record review of the Administrator's personal file revealed that it did not include the required High School Diploma or GED.

On at 1:30 p.m., the Owner stated that he doesn't know what happened to this documentation.

Class

0080-Training - Core & Competency Test 58A-5.0191(1) FAC
Based on interview and record review, the facility failed to ensure that Administrator had completed the required ALF Core training.

The findings include:

Review of the Administrator's file revealed that she was missing the ALF Core training.

On at 1:30 p.m., the Owner stated, "The Administrator is scheduled for the ALF core training class." The Owner was reminded that the Administrator had been employed as the Administrator since of 2013. The Owner stated, "I don't know when it is scheduled for. I will get it scheduled."

Class III

0161-Records - Staff 58A-5.024(2) FAC
Based on record review and interview, the facility failed to assure that personnel records for 2 (Staff B and C) of 3 staff members contained a copy of the employment application, with references furnished.

The findings include:

Record review revealed that Staff B and C did not have employment applications or references in their personnel files.

On at 1:30 p.m., the Owner stated, "I don't know what happened to those items. I wasn't sure I was going

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to keep employing them."

Class III

RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

, 2014

Administrator
The Village Alf I Corp
301 Kamal Parkway
Cape Coral, FL 33904

Dear Administrator:

This letter reports the findings of a state licensure and Limited Nursing Service (LNS) survey that was conducted on , 2014 by representatives 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 surveyors. Should you have any questions please call this office at (239) 335-1315.

Sincerely,

Harold D. Williams
Field Office Manager

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Enclosure: State Form

Fort Myers Field Office
2295 Victoria Avenue,
Fort Myers, FL 33901
Phone:(239) 335-1315; Fax:(239) 338-2372
AHCA.MyFlorida.com