STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11965038	09/11/2014
NAME OF PROVIDER OR SUPPLIER **Noble House Retirement Of Jacksonville, Llc**	STREET ADDRESS, CITY, STATE, ZIP CODE **6561 San Juan Ave. Jacksonville, FL 32210**	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAG AND REGULATORY IDENTIFYING INFORMATION)		

List of Tags Cited:
St - A - 0000 - - Initial Comments
St - A - 0008 - 58a-5.0181(2) Fac - Admissions - Health Assessment S-S= D
St - A - 0081 - 58a-5.0191(2) Fac - Training - Staff In-Service S-S= D
St - A - 0084 - 58a-5.0191(5) Fac - Training - Assis Self-Admin Meds & Med Mgmt S-S= D
St - A - 0152 - 58a-5.023(3) Fac - Physical Plant - Safe Living Environ/other S-S= F
St - A - 0161 - 58a-5.024(2) Fac - Records - Staff S-S= D
St - A - 0167 - 58a-5.025 Fac - Resident Contracts S-S= D
St - A - L243 - 58a-5.0191(8) Fac - Lmh - Training S-S= D
St - A - N277 - 58a-5.031(2) Fac - Lns - Resident Care Standards S-S= D
St - A - N278 - 58a-5.031(3) Fac - Lns - Records S-S= D

Specific Tag Findings:

0000-Initial Comments
An unannounced biennial re-licensure survey with Change of Ownership (CHOW), initial Limited Nursing Services (LNS) and Limited Mental Health (LMH) standards was conducted at Noble House Retirement of Jacksonville, LLC, in Jacksonville, Florida on 2014. Deficient practice was identified as a result of the survey.

0008-Admissions - Health Assessment 58A-5.0181(2) FAC
Based on record review and staff interview, the facility failed to obtain a completed resident health assessment (AHCA form 1823) for 2 of 2 sampled residents. (Residents #3, and #9)

The findings include:

A review of Resident #3 ' s clinical record on revealed that Resident #3 was admitted to the facility on The resident health assessment (AHCA Form 1823) was dated and the resident's health care provider failed to document on page 4 how much assistance Resident #3 required with medication administration.

A review of Resident #9 ' s clinical record revealed that Resident #9 was admitted to the facility on The most recent resident health assessment (AHCA Form 1823) was dated and the resident's health care provider failed to document anything on page 2, section C regarding Resident #9's communicable status, whether he was bedridden, had a or , was a danger to himself or others, or whether he required 24-hour nursing or supervision.

An interview with the administrator on at approximately 3:20 p.m. revealed that he was unaware that Resident #3's health assessment was incomplete.

An interview with the administrator on at approximately 4:30 p.m. revealed that he was unaware that Resident #9's health assessment was incomplete.

Class III

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0081-Training - Staff In-Service 58A-5.0191(2) FAC
Based on employee record review and staff interview the facility failed to ensure that two direct care staff out of 3 sampled had received the minimum 1 hour of training in control and residents rights within the first 30 days of hire.

The findings include:

An employee record review was conducted for Employees #2 Date of Hire and #3 Date of Hire during the survey on No proof of training in control or resident ' s rights was found in their records.

During an interview with the Administrator on at 4:00pm he stated he could not find any proof of the trainings for control and resident ' s rights for Employees #2 and #3.

Class III

0084-Training - Assis Self-Admin Meds & Med Mgmt 58A-5.0191(5) FAC
Based on employee record review and staff interview the facility failed to ensure one unlicensed employee (#2), who provides assistance with self-administration of medications, had successfully completed the initial 4 hour training prior to providing assistance with self-administration of medications.

The findings include:

An employee record review was conducted for Employee #2 during the survey on . No proof of the initial 4 hour training on assistance with self-administration of medications was found in his record.

During an interview with the Administrator on at 4:00 pm he stated he could not find any proof of the training on assistance with self-administration of medications for Employee #2. He confirmed Employee #2 assisted with self-administration of medication.

Class III

0152-Physical Plant - Safe Living Environ/Other 58A-5.023(3) FAC
Based on resident interview, observation and staff interview the facility failed to provide a safe living environment when the front doors of the facility were locked against egress while the building was occupied and only staff had keys to open the doors.

The findings include:

During an interview on at 1:40pm with a resident who wished to remain anonymous, the resident stated the staff all had keys to the front door and the residents cannot leave unless the staff unlocks the door for them. The resident stated " It feels like we ' re all locked in here and I ' d like to be able to leave. "

An observation of the front door was made on at 2:05pm. The door was locked and there was no key in

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observed to open the door.

During an interview with the administrator on at 5:25pm he stated that only the staff have a key to the doors and that they are all locked from the inside. He stated " If you want to get in you can but we have to open the door to let you out. " When asked why the front door is locked all the time he stated that it was for the safety of the residents because there are some residents in the facility that wander and might elope if the doors were not kept locked at all times.

Class III

0161-Records - Staff 58A-5.024(2) FAC
Based on employee record review and staff interview the facility failed to ensure that the Administrator and Employee #2 had references listed on their employment applications.

The findings include:

An employee record review was conducted for the Administrator and Employee #2 during the survey on . No references were found on their employment applications.

During an interview with the Administrator on at 4:00pm he stated he was not aware that Employee #2 and his application had no references listed on them. He could not provide the references.

Class III

0167-Resident Contracts 58A-5.025 FAC
Based on record review and staff interview, the facility failed to have a contract containing the amount for services for 1 of 2 sampled residents. (Resident #9)

The findings include:

A review of Resident #9's contract signed by Resident #9 on revealed that there was no indication of how much Resident #9 was to pay the facility for services rendered, or how often he was to make that payment.

A interview with the administrator at approximately 2:55 p.m. revealed that he could not explain why the contract did not reflect the negotiated payment amount. The administrator provided the previous contract dated and stated that the payment hadn't changed. He stated that he would go over it again with Resident #9, and ensure completion of the contract.

Class III

L243-LMH - Training 58A-5.0191(8) FAC
Based on employee record review and staff interview the facility failed to ensure that one employee (#3) out of 3 sampled employees had the minimum required number of continuing education hours for Limited Mental Health training.

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The findings include:

An employee record review was conducted for the Administrator Date of Hire and Employee #3 Date of Hire during the survey on No proof of 3 hours of continuing education for Limited Mental Health training was found.

During an interview with the Administrator on at 4:00 pm he stated he was not aware that he and Employee #3 had not received 3 hours of continuing education on Limited Mental Health. He could not provide proof that they had received the training.

Class III

N277-LNS - Resident Care Standards 58A-5.031(2) FAC
Based on record review and staff interview, the facility failed to appropriately contract with a nurse who would be available to provide such services as needed by potential Limited Nursing Services (LNS) residents.

The findings include:

A review of the facility's LNS registered nurse personnel record on revealed that there was no contract between the facility and the designated LNS nurse for provision of LNS services.

An interview with the administrator on at approximately 12:45 p.m. revealed that he was unaware that a completed contract was required prior to the facility's receipt of a LNS license.

Class III

N278-LNS - Records 58A-5.031(3) FAC
Based on record review and staff interview, the facility failed to maintain a form for recording all residents receiving limited nursing services (LNS) and the type of service provided. The facility also failed to maintain a nursing assessment form for the completion of a monthly nursing assessment which is required for all potential limited nursing services admissions.

The findings include:

A review of the folder containing all of the facility's Limited Nursing Services (LNS) information revealed that there was no LNS Log or monthly nursing assessment form in place for potential LNS resident admissions.

An interview with the administrator on at approximately 12:45 p.m. revealed that he was unaware that the forms were required.

Class III

RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

, 2014

Administrator
Noble House Retirement Of Jacksonville, LLC
6561 San Juan Ave.
Jacksonville, FL 32210

Dear Administrator:

This letter reports the findings of a state biennial licensure with Change of Ownership and an initial Limited Nursing Services 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 904.798-4201.

Sincerely,

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

JG/JM/sm
Enclosure

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