

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER: AL11967059	(X3) DATE SURVEY COMPLETED 09/25/2014
NAME OF PROVIDER OR SUPPLIER Sweet Home At Last	STREET ADDRESS, CITY, STATE, ZIP CODE 1580 Drayton Ave Deltona, FL 32725	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAG AND REGULATORY IDENTIFYING INFORMATION)		

Revisit Repeat Tags:

0000-Initial Comments-
0161-Records - Staff-58a-5.024(2) Fac
E210-Ecc - Training-58a-5.0191(7) Fac

Revisit New Tags:

0078-Staffing Standards - Staff-58a-5.019(2) Fac
0081-Training - Staff In-Service-58a-5.0191(2) Fac
0083-Training - First Aid And 5.0191(4) Fac
0090-Training - -5.0191(11) Fac

Specific Tag Findings:

0000-Initial Comments

An unannounced revisit to the 2014 Extended Congregate Care (ECC) monitoring survey was conducted at Sweet Home at Last in Deltona, Florida on 2014. New and uncorrected deficiencies were identified as a result of the survey.

0078-Staffing Standards - Staff 58A-5.019(2) FAC

Based on record review and staff interview, the facility failed to ensure that staff submitted a statement from a health care provider within 30 days of employment documenting that they did not have any signs or symptoms of a communicable for 2 of 3 sampled employees. (Employees X and Y) The facility also failed to ensure annual documentation of freedom from for 1 of 3 sampled employees. (Employee Y)

The findings include:

A review of the personnel files for Employees X and Y revealed that Employee X was hired on and Employee Y was hired on Neither had a statement from their healthcare provider indicating that they were free from communicable Further review revealed that Employee Y had no documentation within the last 12 months that she was free from Her most recent screening test was dated (Photographic evidence obtained)

An interview with the administrator on at approximately 12:30 p.m. revealed that she was unaware that this information was missing.

Class III

0081-Training - Staff In-Service 58A-5.0191(2) FAC

Based on record review and staff interview, the facility failed to maintain appropriate documentation of the completion of required staff education for 2 (Employees X and Y) of 3 sampled employees.

The findings include:

A review of the employee personnel files on revealed that there was no documentation of completion of training related to elopement response, emergency preparedness and evacuation, incident reporting, or neglect and for either Employee X or Employee Y. There was also no training related to resident rights in Employee Y's personnel file. Employee X was hired on and Employee Y was hired on

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During an interview with the administrator on _____ at approximately 12:30 p.m., she acknowledged that the above-mentioned training was missing from the employee files. She stated that she would review the employee files and ensure that all required training was completed.

Class III

0083-Training - First Aid and 58A-5.0191(4) FAC

Based on record review and staff interview, the facility failed to ensure that a staff member who completed courses in First Aid and _____ and held a currently valid card documenting completion of such courses was in the facility at all times. Two of three sampled employees had no First Aid training. (Employees X and Y) Two of three employees had no current _____ training. (Employees Y and Z)

The findings include:

A _____ review of the personnel files for Employees X and Y revealed no documentation of completion of first aid training for either employee. Employee X was hired on _____ and Employee Y was hired on _____. Both employees were certified nursing assistants. (CNAs) (Photographic evidence obtained)

A _____ review of the personnel files for Employees Y and Z revealed no current documentation of completion of _____ training for either employee. The most recent _____ training for Employee Y expired on _____ and the most recent _____ training for Employee Z expired on _____. (Photographic evidence obtained)

A _____ review of the staffing schedules for _____ and _____ 2014 revealed that Employees X, Y, and Z all worked during shifts during that time frame in which no employee had current First Aid or _____ training. (Photographic evidence obtained)

An interview with the administrator on _____ at approximately 12:30 p.m. revealed that she was unaware that Employees Y and Z were not current with their _____ training, and that Employees X and Y did not have First Aid training. She stated that she was unaware that someone with current training in both _____ and First Aid was required to be scheduled at all times.

Class III

0090-Training - 58A-5.0191(11) FAC

Based on record review and staff interview, the facility failed to maintain documentation of the completion of training in the facility's policies and procedures regarding _____ for 3 of 3 sampled employees. (Employees X, Y and Z)

The findings include:

A _____ review of the employee personnel files revealed that the certificates related to required _____ training for Employees X (Date of Hire _____), Y (Date of Hire _____) and Z (Date of Hire _____) were not available for review.

An interview with the administrator on _____ at approximately 12:30 p.m. revealed that she was unaware of the need for staff training related to _____.

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Class III

0161-Records - Staff 58A-5.024(2) FAC

Based on employee record review and staff interview the facility failed to ensure that 2 of 3 employees (Employees Y and Z) had references listed on their employment applications.

The findings include:

Employee record reviews were conducted for Employees Y and Z during the survey on No references were found on their employment applications.

During an interview with the Administrator on at approximately 12:00 p.m. she stated that she was unaware that Employee Y's and Employee Z's applications had no references listed on them.

This was previously cited during the Extended Congregate Care (ECC) monitoring survey.

Class III

E210-ECC - Training 58A-5.0191(7) FAC

Based on record review and staff interview, the facility failed to ensure that direct-care staff providing care to residents in an Extended Congregate Care (ECC) program completed at least two hours of in-service training within six months of beginning employment in the facility for 3 of 3 sampled employee records. (Employees X, Y, and Z)

The findings include:

A review of the employee personnel files revealed that Employees X, Y, and Z did not have any Extended Congregate Care (ECC) training available for review. Employee X was hired on Employee Y was hired on and Employee Z was hired on

An interview with the administrator on at approximately 12:30 p.m. confirmed that the above-referenced employees did not have two hours of ECC training within 6 months of employment. They had never completed the required training. The administrator could not explain why the training was not completed.

This was previously cited during the ECC monitoring survey.

Class III



RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

, 2014

Administrator
Sweet Home At Last
1580 Drayton Avenue
Deltona, FL 32725

Dear Administrator:

This letter reports the findings of a revisit survey conducted on , 2014 by a representative of this office. Enclosed is the provider's copy of the Statement of Deficiencies (State Form 5000-3547), which references the uncorrected deficiencies and new deficiencies identified during the revisit.

All deficiencies shall be corrected no later than , 2014.

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 (904) 798-4201.

Sincerely,

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

JG/JM/sm
Enclosure

