RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

, 2014

Administrator
Osprey Lodge
1761 Nightingale Lane
Tavares, FL 32778

Dear Administrator:

This letter reports the findings of a state licensure survey that was conducted on 2014 by representative(s) of this office.

Enclosed 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 this office at (386) 462-6201.

Sincerely,

for

Kristen J. Mennella
Field Office Manager

KJM/amw
Enclosure

Alachua Field Office
14101 N W Hwy 441, Suite 800
Alachua, FL 32615-5669
Phone:(386) 462-6201; Fax:(386) 418-5300
AHCA.MyFlorida.com

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11968349	09/25/2014
NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE	
Osprey Lodge	1761 Nightingale Ln Tavares, FL 32778	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAG AND REGULATORY IDENTIFYING INFORMATION)		

List of Tags Cited:

St - A - 0081 - 58a-5.0191(2) Fac - Training - Staff In-Service S-S= D
St - A - 0090 - 58a-5.0191(11) Fac - Training - S-S= D
St - A - E210 - 58a-5.0191(7) Fac - Ecc - Training S-S= D

Specific Tag Findings:

0000-Initial Comments

An unannounced Biennial licensure survey with Extended Congregate Services was conducted on at Osprey Lodge, an assisted living facility in Tavares, FL. Deficient practice was identified at the time of the survey.

0081-Training - Staff In-Service 58A-5.0191(2) FACBased on record review and interview, the facility failed to ensure that two of three staff members received all required training within 30 days of employment (staff A and B).

Findings:

1. On , a review of staff A ' s employee record revealed staff A was hired on . Further review staff A had not received training in control or incident reporting.

2. On , a review of staff B ' s employee records (hire date, revealed staff B had not received training in and neglect of the elderly or incident reporting.

3. An interview was conducted with the business manager on at 10:55 AM. She stated Staff A had not received training in control or incident reporting or and neglect.

0090-Training - 58A-5.0191(11) FAC
Based on record review and interview, the facility failed to ensure that one of three staff members received training on the facility's policy and procedures related to within 30 days of employment (staff B).

Findings:

1. On , a review of staff B ' s employee record (hire date, revealed staff B had not received training in policy and procedures.

2. An interview was conducted with the business manager on at 10:55 AM. She stated that staff B had not received training in policy and procedures.

Class III

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

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11968349	**09/25/2014**
NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE	
Osprey Lodge	**1761 Nightingale Ln Tavares, FL 32778**	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAG AND REGULATORY IDENTIFYING INFORMATION)		

Based on record review and interview, the facility failed to ensure that one of three staff members received training in ECC within 6 months of employment (staff B).

Findings:

1. On a review of staff B ' s employee record (hire date, revealed staff B had not received training in ECC.

2. An interview was conducted with the business manager on at 10:55 AM. She stated that staff B had not received training in ECC.

Class III