RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

, 2014

Administrator
Willow Brook
1580 South Marion Avenue
Lake City, FL 32025

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 **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(s). Should you have any questions please call this office at (386) 462-6201.

Sincerely,

Kristie J. Mennella
Field Office Manager

KJM/amw
Enclosure

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STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11965555	09/16/2014
NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE	
Willow Brook	**1580 South Marion Avenue Lake City, FL 32025**	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAG AND REGULATORY IDENTIFYING INFORMATION)		

List of Tags Cited:
St - A - 0010 - 58a-5.0181(4) Fac - Admissions - Continued Residency S-S= D
St - A - 0030 - 58a-5.0182(6) Fac; 429.28 Fs - Resident Care - Rights & Facility Procedures 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 - 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:

0010-Admissions - Continued Residency 58A-5.0181(4) FAC
Based on observations, interviews and record review, the facility failed to update residents 1823 health assesment for a significant change in the condition for 1 of 2 residents, resident #8.

The findings include:

On at 9:35 a.m., resident #8 was observed seated in a wheelchair in the middle of a hallway, Resident #8 was observed to be slightly

On at 9:35 a.m., resident #8 was interviewed. She provided her name, but she was unable to communicate where she was going in the wheelchair.

On at 11:05 a.m., resident #8 was observed seated in wheelchair at table playing dominos.

On at 1:42 p.m., resident #8 was observed participating in chair exercises. She was observed to be seated in a wheelchair.

On at 3:45 p.m., a record review revealed that resident #8's most recent Resident Health Assessment for Assisted Living Facilities form, AHCA Form 1823, dated documented that resident #8 required supervision for ambulation. Record review revealed no physician's order for a wheelchair.

On at 10:25 a.m., Staff A who is a licensed pratical nurse was interviewed. She stated resident #8 uses walker and wheelchair to ambulate, but the wheelchair she uses more often. She stated she believes this is a significant change from supervised ambulation.

Class III

0030-Resident Care - Rights & Facility Procedures 58A-5.0182(6) FAC; 429.28 FS
Based on observations, record reviews and interviews the facility failed to have a physicians order for a half bed rail for 1 of 10 residents (#1).

Findings:

On at approximately 9:45 AM it was observed that resident #1 had a half bed-rail on his bed in the up position which he used to pull himself up into a sitting position.

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On at approximately 3:30 PM an interview was conducted with the facility Licensed Practical Nurse and Administrator in reference to resident #1 having a half bed-rail on his bed. They were asked to provide a physicians order and consent form for the half bed-rail on resident #1 bed. The Administrator stated the resident came from the veterans hospital with the bed-rail and she did not know if there was a physicians order or not.

On a record review was conducted on resident #1 facility's records. It was observed that there was no physicians order or a consent form for a half bed-rail to be on his bed.

Class III

0057-Medication - Over The Counter (OTC) Products 58A-5.0185(8) FAC
Based on observations and interviews the facility failed to label over the counter (OTC) medication with the residents name for 3 of 10 residents (#1, 7, 9).

Findings:

On at approximately 9:45 AM it was observed that resident #1 had OTC medication sitting on a bedside table which did not have his name written on the medication bottles. There was 1 bottle of chest 1 bottle of Dime Tapp and Resident #1 was asked if those were his medications and he stated yes.

On at approximately 10:42 AM it was observed that resident #7 had in her OTC Centrum Fish Oil B-100, Ester-C I-caps. Her name was not observed any where on the bottle.

On at approximately 1:16 PM it was observed resident #9 had in his OTC Omnaris nasal spray in his his name on the bottle.

On at approximately 10:00 AM an interview was conducted with the nurse in reference to residents #1, #7, and #9 having OTC's in their did not contain their names. She stated she knew if the resident had an OTC on the medication cart it needed to have their name on it, but she did not know if they kept the medication in their had to have their name on it as well.

Class III

0078-Staffing Standards - Staff 58A-5.019(2) FAC
Based on observations, interviews and record review, the facility failed to provide a job description for 1 of 3 staff, Staff A.

The findings include:

On at 9:05 a.m., the facility administrator was interviewed. She stated the facility census is 61 residents, the facility capacity is 68 residents.

On at 9:19 a.m., a record review revealed as date of hire for Staff A. Record review revealed that Staff A is a Licensed Practical Nurse. Record review revealed no documentation that Staff A received a job

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description from through .

On at 9:20 a.m., the facility administrator was interviewed. She stated Staff A has not received a job description. She stated she will give Staff A a job description.

On at 9:21 a.m., the facility administrator was observed to print a job description, unsigned and undated, for a Licensed Practical Nurse.

On at 9:30 a.m., Staff A was interviewed. She stated she has not received a job description since her date of hire.

Class III

0081-Training - Staff In-Service 58A-5.0191(2) FAC
Based on interviews and record review, the facility failed to provide required in-service training to 1 of 3 staff, Staff A, within 30 days of hire date:

The findings include:

On at 9:19 a.m., a record review revealed as hire date for Staff A. Record review revealed that Staff A is a Licensed Practical Nurse. Record review revealed no documentation that Staff A has received the following training from through Emergency Preparedness and Evacuation Training, Incident Reporting Training, Resident Rights Training and Recognizing/Reporting , Neglect, Training.

On at 9:20 a.m., the facility administrator was interviewed. She stated Staff A has not received Emergency Preparedness and Evacuation Training, Incident Reporting Training, Resident Rights Training and Recognizing/Reporting , Neglect, Training. She stated she believed Staff A received much of this training as a part of getting her nursing license.

On at 9:30 a.m., Staff A was interviewed. She stated she just received in-house, hands-on training at the facility. She stated she has not received Resident Rights Training, Training. She stated she would have to check her CUE's from her nursing license to see if she has received the other required training.

Class III

0090-Training - 58A-5.0191(11) FAC
Based on interviews and record review, the facility failed to provide required and P & P Training to 1 of 3 staff, Staff B, within 30 days of hire date:

The findings include:

On at 9:19 a.m., a record review revealed as hire date for Staff B. Record review revealed no documentation that Staff B has received and P & P Training from through .

On at 9:20 a.m., the facility administrator was interviewed. She stated that she is unable to find

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documentation that Staff B has received and P & P Training.

Class III

E210-ECC - Training 58A-5.0191(7) FAC
Based on interviews and record review, the facility failed to provide ECC Training to 1 of 3 staff, Staff A, within 6 months of hire date:

The findings include:

On at 9:05 a.m., the facility administrator was interviewed. She stated the facility has an ECC license.

On at 9:19 a.m., a record review revealed as date of hire for Staff A. Record review revealed no documentation that Staff A received 2 hours of ECC Training from through

On at 9:20 a.m., the facility administrator was interviewed. She stated none of the facility staff have received ECC Training.

On at 9:30 a.m., Staff A was interviewed. She stated she has not received ECC Training since her hire date of

Class III