STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11942993	10/30/2014
NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE	
Queen Of Angels	1645 Bartlett Avenue Orange Park, FL 32073	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAG AND REGULATORY IDENTIFYING INFORMATION)		

List of Tags Cited:
St - A - 0000 - - Initial Comments
St - A - 0077 - 58a-5.019(1) Fac - Staffing Standards - Administrators S-S= D
St - A - 0078 - 58a-5.019(2) Fac - Staffing Standards - Staff S-S= D
St - A - 0079 - 58a-5.019(3) Fac - Staffing Standards - Levels S-S= D
St - A - 0081 - 58a-5.0191(2) Fac - Training - Staff In-Service S-S= D
St - A - 0082 - 58a-5.0191(3) Fac - Training - S-S= D
St - A - 0083 - 58a-5.0191(4) Fac - Training - First Aid And
St - A - 0092 - 58a-5.020(1) Fac - Food Service - General Responsibilities S-S= D
St - A - 0093 - 58a-5.020(2) Fac - Food Service - Dietary Standards S-S= D
St - A - Z815 - 408.809, 435.02(2), 435.06 - Background Screening; Prohibited Offenses S-S= D

Specific Tag Findings:

0000-Initial Comments
An unannounced biennial licensure survey was conducted at Queen of Angels in Jacksonville, Florida on Deficiencies were identified.

0077-Staffing Standards - Administrators 58A-5.019(1) FAC
Based on employee file review and interview, the Administrator failed to comply with the continuing education requirement pursuant to Rule 58.A-5.0191, F. A. C.

The findings include:

A review of the employee file for the Administrator revealed there were 2 hours continuing education documentation in the last two years. Date of Hire was and core training date was

An interview with the Administrator at 1:05 PM on confirmed the continuing education was not completed.

Class III

0078-Staffing Standards - Staff 58A-5.019(2) FAC
Based on employee record review and staff interview the facility failed to provide documentation of a negative examination on an annual basis for 3 out of 3 sampled employees. (Employees A,CR & D)

The findings include:

Record review for Employee A revealed a hire date of Further record review revealed no documentation of an annual negative examination.

During an interview on at 1:00 pm with Employee A he confirmed that he did not have a examination done annually.

Record review for Employee CR revealed a hire date of Further record review revealed no documentation of an annual negative examination.

During an interview with Employee CR she confirmed she did not have a examination done annually.

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Record review for Employee D revealed a hire date of . Further record review revealed no documentation of an annual negative . examination.

During an interview with Employee A he confirmed that Employee D did not have a . examination done annually.

Class 111

0079-Staffing Standards - Levels 58A-5.019(3) FAC
Based on record review and interview, the facility failed to have a written work schedule that reflects it's 24-hour staffing pattern.

The findings include:

A review of the facility files on . . . . . revealed no written work schedule to reflect the facility staffing patterns.

In an interview with the Administrator on . . . . . at 1:00 PM, he reported that he did not have a written staffing schedule. He reported " I do not have a schedule for employee hours. Employee C works 7AM to 7PM Monday through Saturday. Employee E works 7AM to 7PM on the weekends and is my relief. I am here all the time. Employee A works Thursday from 7 AM to Saturday 7AM. "

Class III

0081-Training - Staff In-Service 58A-5.0191(2) FAC
Based on employee record review and staff interview the facility failed to provide in-service training for understanding and competency in the implementation of elopement response policies and procedures for 1 out of 3 sampled employees. (Employee D)

The findings include:

Record review for Employee D revealed a hire date of . . . . . Further record review revealed no documentation of Elopement training.

During an interview on . . . . . at 12:30 pm with the Administrator he confirmed that Employee D did not have the required elopement training.

Class 111

0082-Training - . . . . . 58A-5.0191(3) FAC
Based on employee record review, and staff interview the facility failed to provide a one-time education course on . training for 1 out of 3 sampled employees. (Employee D).

The findings include:

Record review for Employee D revealed a hire date of . Further record review revealed no documentation of . training.

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During an interview on at 12:45 pm with the Administrator he confirmed that Employee D did not have the training.

Class III

0083-Training - First Aid and 58A-5.0191(4) FAC
Based on employee file review and interview with the administrator, the facility failed to ensure that 3 out of 3 sampled employee's (Employee A, C and D) was trained in and First Aid.

The findings include:

An employee file review was conducted for Employee A with a date of hire and First Aid training expired 014. An updated and First Aid training was

An employee file review was conducted for Employee C with a date of hire and First Aid training expired 014. An updated and First Aid training was not found in the file.

An employee file review was conducted for Employee D with a date of hire Updated and First Aid training was not found in the file.

An interview with the Owner and Administrator at 1:00 PM on confirmed the training was expired and needed to be redone for Employee A, C and D. The Owner stated " I do not have a schedule for employee hours. Employee C works 7AM to 7PM Monday through Saturday. Employee E works 7AM to 7PM on the weekends and is my relief. I am here all the time. Employee A works Thursday from 7 AM to Saturday 7AM. "

Class III

0092-Food Service - General Responsibilities 58A-5.020(1) FAC
Based on employee file review and interview the facility failed to comply with 2 hours of annual food handling continuing education for 1 of 3 employees. (Administrator)

The findings include:

An employee file was conducted for Employee A and the 2 hour updated food service continuing education was missing. The last updated food service training was completed in 2012.

An interview with the Administrator at 1:05 confirmed he did not receive the 2 hour updated food service continuing education and he is the food service designee.

Class III

0093-Food Service - Dietary Standards 58A-5.020(2) FAC
Based on observation and interview the facility failed to provide a 3 day sufficient supply of emergency water for the residents.

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The findings include:

An observation of the three day emergency food supply and water located in the kitchen pantry revealed two bins for emergency food and 3 containers with 3 gallons of water in each container. The water expired . . . . . The Administrator found 3 gallons of water in another area which expired in , 2013.

An interview with the Administrator at 9:20 AM on . . . . . confirmed the water was expired and the owner disposed of the water.

A review of the Agency for Health Care Administrations Background Screening website was conducted on . . . . . and confirmed Employee C's last background screening was completed on . . . . . The determination of eligibility for Employee C read "A new screening is required."

Class III

Z815-Background Screening; Prohibited Offenses 408.809, 435.02(2), 435.06
Based on Employee record review and staff interview the facility failed to provide a Level 2 background screening for 1 out of 3 sampled employees. (Employee C)

The findings include:

Record review for Employee C revealed a hire date of . . . . . Further record review revealed a level 1 background screen dated . . . . . **A level 2 background screen needed to be completed by** . . . . . .

During an interview with the Administrator on . . . . . at 11:00 am he confirmed that Employee C has not had a Level 2 background screening. He confirmed that the only background screen Employee C has had was the level 1 background screen dated .

Class 111

RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

, 2014

Administrator
Queen Of Angels
1645 Bartlett Avenue
Orange Park, FL 32073

Dear Administrator:

This letter reports the findings of a state biennial licensure survey that was conducted on , 2014 by a representative 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 surveyor. Should you have any questions please call this office at .

Sincerely,

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

RS/JM/sm
Enclosure

Jacksonville Field Office
921 N. Davis St., Bldg. A, Suite 115
Jacksonville, FL 32209
Phone:(904) 798-4201; Fax:(904) 359-6054
AHCA.MyFlorida.com

Facebook.com/ACHAFlorida
Youtube.com/AHCAFlorida
Twitter.com/AHCA_FL
SlideShare.net/AHCAFlorida